

# Eye-movement training improves reading function in children and young people with eye-movement disorders after acquired brain injury

**Submission date**  
17/09/2024

**Recruitment status**  
No longer recruiting

Prospectively registered

Protocol

**Registration date**  
22/09/2024

**Overall study status**  
Completed

Statistical analysis plan

Results

**Last Edited**  
08/10/2024

**Condition category**  
Injury, Occupational Diseases, Poisoning

Individual participant data

## Plain English summary of protocol

### Background and study aims

Acquired brain injury (ABI) often causes a worsening of reading function. This may decrease motivation for school activities. Eye-movement training has been shown to have positive effects, but its feasibility and effectiveness are unknown, as is its optimal duration, frequency and intensity. The aim was to develop and evaluate eye-movement training for children and young people with ABI.

### Who can participate?

Children and young people aged between 10-19 years old with eye-movement disorders after ABI

### What does the study involve?

The intervention involves 20 minutes of training each day for three weeks. Each participant and caregiver will be introduced to the home training program and will receive individual support by phone calls and/or text messages during the intervention. Vision assessments, a reading speed test and a survey will record results at baseline, at the end of the training, and three months after the end of the training.

### What are the possible benefits and risks of participating?

The participants might benefit regarding their reading function, and possible risks including headaches from the training are expected to be minimal.

### Where is the study run from?

The study is run from the Child and Youth Rehabilitation Center in Lund, Sweden.

### When is the study starting and how long is it expected to run for?

January 2020 and February 2024

### Who is funding the study?

Region Skåne (Sweden)

Who is the main contact?

Dr. Katarina Lauruschkus, katarina.lauruschkus@med.lu.se

## Contact information

### Type(s)

Public, Scientific, Principal investigator

### Contact name

Dr Katarina Lauruschkus

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## Additional identifiers

### Clinical Trials Information System (CTIS)

Nil known

### Protocol serial number

Nil known

## Study information

### Scientific Title

Eye-movement training improves reading function in children and young people with eye-movement disorders after acquired brain injury

### Study objectives

Three weeks of eye-movement training is feasible and improves the reading function in children and young people with eye-movement disorders after acquired brain injury.

### Ethics approval required

Ethics approval required

### Ethics approval(s)

approved 20/11/2020, Swedish Ethical Review Authority (Box 2110, Uppsala, SE-750 02, Sweden; +46 10-475 08 00; [registrator@etikprovning.se](mailto:registrator@etikprovning.se)), ref: EPM-Dnr 2020-04154

### Study design

Single-centre interventional study

## **Primary study design**

Interventional

## **Study type(s)**

Treatment

## **Health condition(s) or problem(s) studied**

Eye-movement disorders after acquired brain injury

## **Interventions**

The materials for the eye-movement training with instructions were provided for each participant by the occupational therapist or the special education teacher. The materials are described and visualized in the manuscript that will be submitted and is available upon request.

The intervention involves 20 minutes of training each day for three weeks. Each participant and caregiver is introduced to the home training program and receives individual support during the intervention. Vision assessments, a reading speed test and a survey records results at baseline, at the end of the training, and three months after the end of the training.

The paediatrician, the occupational therapist and the special education teacher all worked at the Child and Youth Rehabilitation Center and were trained for the intervention. They were all well experienced for working with the target group.

## **Intervention Type**

Behavioural

## **Primary outcome(s)**

Reading speed measured using a reading speed test at baseline, at the end of the training, and three months after the end of the training

## **Key secondary outcome(s)**

Clinical signs of convergence insufficiency measured using vision assessments and the modified Convergence Insufficiency Symptom Survey (CISS) at baseline, at the end of the training, and three months after the end of the training

## **Completion date**

20/02/2024

## **Eligibility**

### **Key inclusion criteria**

1. Aged 10-19 years old
2. Eye-movement disorders after ABI
3. Live in the Skåne Region in Southern Sweden
4. Being followed up by the Child and Youth Rehabilitation Center in Lund, Sweden
5. Able to read independently before the injury

## **Participant type(s)**

Patient

**Healthy volunteers allowed**

No

**Age group**

Mixed

**Lower age limit**

10 years

**Upper age limit**

19 years

**Sex**

All

**Total final enrolment**

16

**Key exclusion criteria**

Not meeting the participant inclusion criteria

**Date of first enrolment**

20/11/2020

**Date of final enrolment**

12/11/2023

**Locations****Countries of recruitment**

Sweden

**Study participating centre**

Child and Youth Rehabilitation Center

Lovisastigen 9

Lund

Sweden

22100

**Sponsor information****Organisation**

Region Skåne

# Funder(s)

## Funder type

Government

## Funder Name

Region Skåne

## Alternative Name(s)

## Funding Body Type

Government organisation

## Funding Body Subtype

Local government

## Location

Sweden

# Results and Publications

## Individual participant data (IPD) sharing plan

The datasets generated and analyzed during the current study will be available upon request from Katarina Lauruschkus, katarina.lauruschkus@med.lu.se

## IPD sharing plan summary

Available on request

## Study outputs

Output type	Details	Date created	Date added	Peer reviewed?	Patient-facing?
<a href="#">Poster results</a>		06/09/2022	20/09/2024	No	No