Home-based Reach-to-Grasp training for people after stroke is feasible: a pilot randomised controlled trial
Turton, A; Cunningham, Paul; van Wijck, Frederike; Smartt, H; Rogers, CA; Sackley, Catherine; Jowett, Sue; Wolf, Steven L; Wheatley, Keith; van Vliet, P

DOI: 10.1177/0269215516661751

Citation for published version (Harvard):

General rights
Unless a licence is specified above, all rights (including copyright and moral rights) in this document are retained by the authors and/or the copyright holders. The express permission of the copyright holder must be obtained for any use of this material other than for purposes permitted by law.

• Users may freely distribute the URL that is used to identify this publication.
• Users may download and/or print one copy of the publication from the University of Birmingham research portal for the purpose of private study or non-commercial research.
• Users may use extracts from the document in line with the concept of ‘fair dealing’ under the Copyright, Designs and Patents Act 1988 (?)
• Users may not further distribute the material nor use it for the purposes of commercial gain.

Where a licence is displayed above, please note the terms and conditions of the licence govern your use of this document.

When citing, please reference the published version.

Take down policy
While the University of Birmingham exercises care and attention in making items available there are rare occasions when an item has been uploaded in error or has been deemed to be commercially or otherwise sensitive.

If you believe that this is the case for this document, please contact UBIRA@lists.bham.ac.uk providing details and we will remove access to the work immediately and investigate.

Download date: 10. Jan. 2019
Total stroke admissions during recruitment window (n=2156)

Identified by therapists as potential participants (n=102)
PIL provided and referred as eligible by therapists (n=60)
Consented to referral to research team (n=52)
Consented to trial (n=48)
Baseline assessment (n=47)
Action Research Arm Test (ARAT) (n=47); Wolf Motor Function Test (WMFT) (n=47); Motor Activity Log (MAL) (n=46); Stroke Impact Scale (SIS) (n=47)
Randomised (n=47)
Allocated to Reach to Grasp group (n=24)
Allocated to Usual Care group (n=23)
Included in analysis population (n=24)
Included in analysis population (n=23)

7 week follow-up data available (n=23)
Action Research Arm Test (ARAT) (n= 23)
Wolf Motor Function Test (WMFT) (n=23)
Motor Activity Log (MAL) (n=21)
Stroke Impact Scale (SIS) (n=23)

7 week follow-up data available (n=22)
Action Research Arm Test (ARAT) (n= 22)
Wolf Motor Function Test (WMFT) (n=21)
Motor Activity Log (MAL) (n=20)
Stroke Impact Scale (SIS) (n=22)

12 week follow-up data available (n=23)
Action Research Arm Test (ARAT) (n= 23)
Wolf Motor Function Test (WMFT) (n=23)
Motor Activity Log (MAL) (n=20)
Stroke Impact Scale (SIS) (n=22)

12 week follow-up data available (n=21)
Action Research Arm Test (ARAT) (n= 21)
Wolf Motor Function Test (WMFT) (n=20)
Motor Activity Log (MAL) (n=18)
Stroke Impact Scale (SIS) (n=21)

24 week follow-up data available (n=16 of 17)
Action Research Arm Test (ARAT) (n= 16)
Wolf Motor Function Test (WMFT) (n=16)
Motor Activity Log (MAL) (n=14)
Stroke Impact Scale (SIS) (n=15)

24 week follow-up data available (n=16 of 19)
Action Research Arm Test (ARAT) (n= 16)
Wolf Motor Function Test (WMFT) (n=15)
Motor Activity Log (MAL) (n=15)
Stroke Impact Scale (SIS) (n=16)

Exclusions (n=42)
- Not discharged home (n=9)
- No remaining upper limb movement deficit (n=28)
- Pre-stroke pathology of stroke-affected upper limb (n=1)
- Unable to lift hand off lap (n=3)
- Severe fixed contractures of elbow and wrist (n=1)
- More than 12 months post-stroke (n=1)
- Died before approach (n=1)

Exclusions (n=8)
- Did not consent to referral but agreed to details being recorded (n=2)
- Did not consent to referral or details being recorded (n=6)

Exclusions (n=4)
- Did not consent to trial but agreed to details being recorded (n=1)
- Did not consent to trial or details being recorded (n=3)

Exclusions (n=1)
- Patient withdrawal (n=1)

Consented to referral to research team (n=52)
Exclusions (n=8)
- Did not consent to referral but agreed to details being recorded (n=2)
- Did not consent to referral or details being recorded (n=6)

Exclusions (n=4)
- Did not consent to trial but agreed to details being recorded (n=1)
- Did not consent to trial or details being recorded (n=3)

Consented to trial (n=48)
Exclusions (n=4)
- Did not consent to trial but agreed to details being recorded (n=1)
- Did not consent to trial or details being recorded (n=3)

Baseline assessment (n=47)
Action Research Arm Test (ARAT) (n=47); Wolf Motor Function Test (WMFT) (n=47); Motor Activity Log (MAL) (n=46); Stroke Impact Scale (SIS) (n=47)

Randomised (n=47)
Patient consent to contact carer(s) (n=26)
Carer consent to interview (n=12)
Carer assessment:
- At 12 weeks (n=9)
- At 24 weeks (n=6)

Exclusions (n=1)
- Patient withdrew after intervention, diagnosed with another health problem, agreed to data collected to be used (n=1)

Exclusions (n=1)
- Patient lost to follow-up (n=1)

Exclusions (n=1)
- Patient lost to follow-up (n=1)

Exclusions (n=1)
- Patient lost to follow-up (n=1)