

# Early therapy in perinatal stroke study

<b>Submission date</b> 30/09/2015	<b>Recruitment status</b> No longer recruiting	<input type="checkbox"/> Prospectively registered <input type="checkbox"/> Protocol
<b>Registration date</b> 30/09/2015	<b>Overall study status</b> Completed	<input type="checkbox"/> Statistical analysis plan <input checked="" type="checkbox"/> Results
<b>Last Edited</b> 22/09/2021	<b>Condition category</b> Neonatal Diseases	<input type="checkbox"/> Individual participant data

## Plain English summary of protocol

### Background and study aims

Cerebral palsy (CP) is a condition which affects movement, posture and coordination. It is caused by an injury to the parts of the brain responsible for controlling muscles, usually before or very soon after birth. Hemiplegic cerebral palsy (HCP) is a type of CP where only one side (hemisphere) of the brain is affected, causing weakness or stiffness on one side of the body. The main cause of HCP is a perinatal stroke (a stroke occurring around the time of birth). Although strokes are usually associated with older people, the risk of a newborn baby having a stroke is just as high in the first 28 days of life. The stroke may be caused by a blood clot or a bleed (haemorrhage), however both lead to the brain being starved of oxygen. During the first six months of life, an infant's nervous system undergoes extensive development. This process is hindered in cases of perinatal strokes and children who go on to develop HCP are unable to use the affected side of the body. Currently there are no early therapy options for infants with perinatal stroke. The aim of this study is to find out whether a home-based therapy given by parents is a practical option for treating infants with perinatal stroke.

### Who can participate?

Infants who have had a stroke before the age of three months and aged matched healthy infants.

### What does the study involve?

Parents or carers of infants who have suffered from a perinatal stroke are taught how to give therapy to their children using educational materials, as well as supervision and support from a trained therapist. The movement of the children's arms and legs is monitored in monthly visits using lightweight movement detectors. All assessments are videoed and compared to healthy infants of the same age. After five months, the parents or guardians of the infants are interviewed for their opinions of the therapy.

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

Participants will benefit from the study as it should be an enjoyable experience and the development of infants who have suffered a perinatal stroke may be improved. There are no notable risks of taking part in the study.

### Where is the study run from?

Royal Victoria Infirmary, Newcastle Upon Tyne (UK)

When is the study starting and how long is it expected to run for?  
January 2015 to December 2018

Who is funding the study?  
1. National Institute for Health Research (UK)  
2. Newcastle Health Care Charity (UK)

Who is the main contact?  
Dr Anna Basu

## Contact information

**Type(s)**  
Scientific

**Contact name**  
Dr Anna Basu

**ORCID ID**  
<http://orcid.org/0000-0002-1356-3027>

**Contact details**  
Sir James Spence Institute  
4th Floor, Queen Victoria Road  
Newcastle Upon Tyne  
United Kingdom  
NE1 4LP

## Additional identifiers

**EudraCT/CTIS number**

**IRAS number**

**ClinicalTrials.gov number**

**Secondary identifying numbers**  
19197

## Study information

**Scientific Title**  
Early intervention to improve motor outcome after perinatal stroke: eTIPS pilot feasibility study

**Acronym**  
eTIPS

**Study objectives**  
The aim of this study is to assess the feasibility of using a therapy intervention, from birth or from diagnosis to six months, in babies who have suffered a perinatal stroke.

**Ethics approval required**

Old ethics approval format

**Ethics approval(s)**

West of Scotland Research Ethics Service, 03/07/2015, ref: 15/WS/0129

**Study design**

Non-randomised; Interventional; Design type: Treatment

**Primary study design**

Interventional

**Secondary study design**

Non randomised study

**Study setting(s)**

Other

**Study type(s)**

Treatment

**Participant information sheet**

Not available in web format, please use the contact details below to request a patient information sheet

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

Topic: Children, Reproductive health and childbirth; Subtopic: All Diagnoses, Reproductive Health and Childb (all Subtopics); Disease: Reproductive Health & Childbirth, All Diseases

**Interventions**

Interventions for infants with stroke: A manualised home-based parent delivered therapy approach with therapist oversight. Additional information and tips for the approach including videos are provided through a website. The approach is pervasive, can be incorporated into everyday life and lasts until the infant is 6 months of age.

Interventions for typically developing infants: No formal intervention is indicated. However, parents are given a baby massage manual and access to the relevant website, and requested to follow the instructions and provide feedback on the materials.

**Intervention Type**

Other

**Primary outcome measure**

Current Primary Outcome Measure (as of 10/01/2018)

Feasibility and acceptability of approach determined monthly throughout the intervention period, including at a qualitative interview of therapists working with the infants, with parental consent, towards the end of the infant's involvement in the eTIPS intervention.

### Previous Primary Outcome Measure

Feasibility and acceptability of approach determined monthly throughout the intervention period, including at a qualitative interview at 5 months.

### Secondary outcome measures

1. Rates of eligibility, consent, participation and retention throughout the study.
2. Infant motor development is measured using the Alberta Infant Motor Scale at baseline, 2, 4 and 6 months, Prechtl's General Movement Assessments at baseline, 1, 2 and 3 months, the Hand Assessment for Infants at 3, 4, 5 and 6 months, and the Pediatric Stroke Outcome Measure at baseline, 3 and 6 months (the latter for infants with perinatal stroke only)
3. Parental well-being and sense of competence are measured using the Warwick-Edinburgh Mental Wellbeing scale and the Parenting Sense of Competence scale respectively at 1 month and 6 months
4. Exploratory outcomes are measured using Accelerometry at each visit (infant limb movements) and the eTIPS feasibility questionnaire (perinatal stroke group only) at 1 month and 6 months

### Overall study start date

03/07/2015

### Completion date

31/12/2018

## Eligibility

### Key inclusion criteria

1. Infants who sustained a predominantly unilateral stroke (arterial ischaemic, haemorrhagic or haemorrhagic periventricular venous infarction) demonstrated on cranial imaging and identified within the first 3 months of life
2. Aged matched health infants (control group)
3. Fully informed parental consent and parent/carer with the ability and willingness to adhere to protocol

### Participant type(s)

Patient

### Age group

Adult

### Sex

Both

### Target number of participants

Planned Sample Size: 48; UK Sample Size: 48

### Key exclusion criteria

Current Participant Exclusion Criteria (as of 10/01/2018)

1. Additional significant medical diagnoses which would render the therapy inappropriate or outcomes uninterpretable in relation to the therapy (e.g. known progressive or

neurodegenerative disorder; severe visual impairment)

2. Evidence of significant bilateral intracerebral pathology

3. Strokes shown radiologically to affect only occipital, prefrontal or temporal areas of the brain (which would not be expected to produce adverse motor outcomes)

4. Ongoing involvement in another research study where this is likely to interfere with the interpretation of either study

#### Previous Participant Exclusion Criteria

1. Extreme prematurity, of less than 26 weeks gestation

2. Additional significant medical diagnoses which would render the therapy inappropriate or outcomes uninterpretable in relation to the therapy (e.g. known progressive or neurodegenerative disorder; severe visual impairment)

3. Evidence of significant bilateral intracerebral pathology

4. Strokes shown radiologically to affect only occipital, prefrontal or temporal areas of the brain (which would not be expected to produce adverse motor outcomes)

5. Ongoing involvement in another research study where this is likely to interfere with the interpretation of either study

#### Date of first enrolment

03/08/2015

#### Date of final enrolment

02/10/2017

## Locations

#### Countries of recruitment

England

United Kingdom

#### Study participating centre

Newcastle upon Tyne Hospitals NHS Foundation Trust

Newcastle Upon Tyne

United Kingdom

NE7 7DN

#### Study participating centre

North Tees and Hartlepool NHS Foundation Trust

North Tees

United Kingdom

TS19 9PE

#### Study participating centre

**South Tees Hospitals NHS Foundation Trust**

South Tees  
United Kingdom  
TS4 3BW

**Study participating centre**

**City Hospitals Sunderland NHS Foundation Trust**

Sunderland  
United Kingdom  
SR4 7TP

**Study participating centre**

**South Tyneside Foundation Trust**

South Tyneside District Hospital  
Harton Lane  
South Shields  
Tyne and Wear  
United Kingdom  
NE34 0PL

**Study participating centre**

**County Durham and Darlington Foundation Trust**

Darlington Memorial Hospital  
Hollyhurst Road  
Darlington  
County Durham  
United Kingdom  
DL3 6HX

**Study participating centre**

**Northumbria Healthcare Trust**

Rake Lane  
North Shields  
Tyne and Wear  
United Kingdom  
NE29 8NH

**Study participating centre**

**North Cumbria University Hospitals NHS Trust**

North Cumbria University Hospital  
Newtown Rd

Carlisle  
United Kingdom  
CA2 7HY

## Sponsor information

### Organisation

Newcastle upon Tyne Hospitals NHS Foundation Trust

### Sponsor details

Royal Victoria Infirmary  
New Victoria Wing  
Queen Victoria Road  
Newcastle Upon Tyne  
England  
United Kingdom  
NE1 4LP

### Sponsor type

Hospital/treatment centre

### ROR

<https://ror.org/05p40t847>

## Funder(s)

### Funder type

Government

### Funder Name

National Institute for Health Research

### Alternative Name(s)

National Institute for Health Research, NIHR Research, NIHRresearch, NIHR - National Institute for Health Research, NIHR (The National Institute for Health and Care Research), NIHR

### Funding Body Type

Government organisation

### Funding Body Subtype

National government

### Location

United Kingdom

**Funder Name**

Newcastle Health Care Charity

## Results and Publications

**Publication and dissemination plan**

The trialists intend that paper summarising the findings of the pilot feasibility study will be published in 2018, as will a paper describing the results of the infant movement analysis and a paper discussing the qualitative research findings.

**Intention to publish date**

01/06/2018

**Individual participant data (IPD) sharing plan**

The datasets generated during and/or analysed during the current study are not expected to be made available to preserve confidentiality given the relatively small sample size. The data is held at Newcastle University by Dr Basu.

**IPD sharing plan summary**

Not expected to be made available

**Study outputs**

Output type	Details	Date created	Date added	Peer reviewed?	Patient-facing?
<a href="#">Results article</a>	results	23/07/2018		Yes	No
<a href="#">HRA research summary</a>			28/06/2023	No	No