

The development of shoulder pain after stroke.

No registrations found.

Ethical review	Positive opinion
Status	Pending
Health condition type	-
Study type	Observational non invasive

Summary

ID

NL-OMON22070

Source

Nationaal Trial Register

Brief title

The development of shoulder pain after stroke

Health condition

stroke, post-stroke shoulder pain

CVA, hemiplegische schouderpijn

Sponsors and support

Primary sponsor: University of Twente

Source(s) of monetary or material Support: University of Twente
Roessingh Rehabilitation Center

Intervention

Outcome measures

Primary outcome

Baseline assessment consists of a questionnaire that assesses pain complaints (current, past), clinical neurological tests (touch, temperature, sharpness) and tests for motor function.

Moreover, general neurologic status and emotional status are assessed. Follow-up measurements consist of the assessment of pain complaints (quality, quantity) and the assessment of somatosensory and nociceptive changes using quantitative sensory testing and cold pressor testing.

Secondary outcome

1. Motor function;
2. Depression.

Study description

Background summary

Shoulder pain is a common complication after stroke and in some cases difficult to treat. Better prevention in the acute stroke phase and appropriate treatment in of shoulder pain may be accomplished when more is known about the neurophysiological mechanisms underlying the development and chronification of shoulder pain after stroke. The objective of the study is to identify somatosensory and nociceptive changes in the acute phase after stroke in relation to the development of shoulder pain.

Study objective

Shoulder pain is related to somatosensory and nociceptive changes in the acute phase after stroke. These changes may indicate the involvement of specific mechanisms (nociceptive, neuropathic) of post-stroke shoulder pain. Changes may either precede or follow the development of shoulder pain.

Study design

1. Baseline: 0-2 weeks post-stroke;
2. Follow up 1: 3 months post-stroke;
3. Follow up 2: 6 months post-stroke.

Intervention

N/A

Contacts

Public

P.O. box 217

M. Roosink

University of Twente, Biomedical Signals and Systems

Enschede 7500 AE

The Netherlands

+31 (0)53 4892740

Scientific

P.O. box 217

M. Roosink

University of Twente, Biomedical Signals and Systems

Enschede 7500 AE

The Netherlands

+31 (0)53 4892740

Eligibility criteria

Inclusion criteria

1. Older than 18 years;
2. Legally competent;
3. Able to communicate;
4. First-ever unilateral CVA (ischemic or hemorrhagic) of the middle cerebral artery (if possible confirmation by CT or MRI scan);
5. Somatosensory and motor loss during baseline measurement (0-2 weeks after stroke);
6. Sign informed consent.

Exclusion criteria

1. Pregnancy;
2. HIV/AIDS;
3. Any other brain disease (trauma, tumor, parkinson, multiple sclerosis);

4. Any peripheral neurological disease (amputation, neuropathy);
5. Pre-existent psychiatric disorders;
6. Pre-existent use of psychotropic substances or medication;
7. Chronic pain complaint (> 3 subsequent months) in the 6 months prior to stroke.

Study design

Design

Study type:	Observational non invasive
Intervention model:	Other
Allocation:	N/A: single arm study
Masking:	Open (masking not used)
Control:	N/A , unknown

Recruitment

NL	
Recruitment status:	Pending
Start date (anticipated):	01-05-2009
Enrollment:	100
Type:	Anticipated

Ethics review

Positive opinion	
Date:	06-04-2009
Application type:	First submission

Study registrations

Followed up by the following (possibly more current) registration

No registrations found.

Other (possibly less up-to-date) registrations in this register

No registrations found.

In other registers

Register	ID
NTR-new	NL1648
NTR-old	NTR1746
Other	MEC Twente : P09-05
ISRCTN	ISRCTN wordt niet meer aangevraagd

Study results

Summary results

N/A