

Relational and sexual functioning after CVA. A cross-sectional survey.

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Primary Objective: This study aims to determine the following: * What is the nature and extent of the relational and sexual functioning by revalidated (??) stroke patients and their partners. Secondary Objectives: In addition, the researchers are...

Ethical review	Approved WMO
Status	Pending
Health condition type	Central nervous system vascular disorders
Study type	Observational non invasive

Summary

ID

NL-OMON42457

Source

ToetsingOnline

Brief title

RSF-Survey

Condition

- Central nervous system vascular disorders
- Sexual function and fertility disorders

Synonym

sexual dysfunction, sexual problem, stroke

Research involving

Human

Sponsors and support

Primary sponsor: Sophia Revalidatie

Source(s) of monetary or material Support: subsidie Nederlandse wetenschappelijke Vereniging Voor Seksuologie, eigen middelen Kenniscentrum Sophia Revalidatie

Intervention

Keyword: CVA, Marriage, Relationship, Sexuality

Outcome measures

Primary outcome

Questionnaires aimed at relational and sexual problems, general physical and mental functioning, quality of life, health care utilization, regarding relational and sexual problems, socio-demographic data and disease characteristics.

Secondary outcome

None.

Study description

Background summary

INTRODUCTION AND RATIONALE

Every year about 30,000 people in the Netherlands experience a cerebrovascular accident (CVA) or stroke. Of these, 12,500 die during the first year. Most patients who have had a stroke experience (depending on the location of the damage) loss of function due to paralysis, speech problems, cognitive problems, and changes in personality, mood and emotional stability (Höing 2005)

A CVA can thus have a major impact on quality of life, also on the relationship, intimacy and sexuality. Although stroke can lead to big changes in relationships and sexuality, experience shows that patients do not make their intimate relationship subject of their rehabilitation goals easily.

Research on the effects of a stroke on the intimate relationship and sexual functioning is scarce. Little is known about the nature, magnitude and determinants of these problems of stroke patients and their partners. The research on sexual and relational problems after a stroke in rehabilitation focuses mainly on (observational) intervention studies (Song et al. 2011) or (cross-section) studies without longitudinal follow-up (Schmitz 2010, Thompson 2009 Tamam 2008 Giaquinto 2003) Therefore little is known about the course of problems in intimate relationships and sexual functioning and health care needs in this area during and after rehabilitation. However, the scarce research

shows that relational and sexual problems often manifest themselves in the chronic phase than in the acute phase (Forsberg-Wärleby, Taman, Korpelainen, Aloni & Katz).

Because stroke patients and their partners make a significant part of the group of patients Sophia Rehabilitation serves, it is important to look beyond the rehabilitation period and get insight into their relational and sexual function, as well as understanding the need for assistance.

Study objective

Primary Objective:

This study aims to determine the following:

- * What is the nature and extent of the relational and sexual functioning by revalidated (??) stroke patients and their partners.

Secondary Objectives:

In addition, the researchers are trying to get answers to the following questions:

- * What factors are associated with relational and sexual problems in re-validated stroke patients and their partners.
- * In what extent is there a need for care on relational and sexual problems in re-validated stroke patients and their partners.

Study design

STUDY DESIGN

The study consists of a cross-sectional, monocentre questionnaire survey among all adult patients associated with stroke and their partners who were inpatient or outpatient at Sophia Revalidatie and were referred to a sexologist (> 1 consult) between 01-01-2010 and 01-01-2014. These patients and their partners will be asked to complete a questionnaire once.

Study burden and risks

Een risico kan zijn dat men door de vragenlijsten gevoelens van verdriet of gemis ervaart, doordat de vragen daarmee confronteren.

Het is van belang voor verbetering van hulpaanbod om meer zicht te krijgen op de mate waarin mensen met CVA gevolgen ervaren in de relatie en de seksualiteit. Dit belang overstijgt het individueel belang om niet geconfronteerd te worden met gevoelens van verdriet of gemis. Bovendien is de verwachting gerechtvaardigd dat mensen die hier niet mee geconfronteerd willen worden, ook niet aan het onderzoek zullen deelnemen.

A risk may be that one experiences feelings of sadness or loss, while confronted with these feelings through the questionnaire.

It is important to improve our service, by getting more insight into the extent to which people with stroke experience consequences in their relationship and sexuality. This interest transcends the individual interest, being confronted with feelings of sadness or loss. Moreover, the expectation is justified that people who not want to be confronted also will not participate in the study.

Contacts

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Trial sites

Listed location countries

Netherlands

Eligibility criteria

Age

Adults (18-64 years)

Elderly (65 years and older)

Inclusion criteria

All (former) patients with stroke of Sophia Revalidatie (and their spouses) , > 18 years, who

have attended more than once a sexologist of Sophia Revalidatie between 01-2010 and 01-01-2014.

Exclusion criteria

Er worden geen specifieke exclusiecriteria gehanteerd.

Study design

Design

Study type: Observational non invasive

Masking: Open (masking not used)

Control: Uncontrolled

Primary purpose: Other

Recruitment

NL

Recruitment status: Pending

Start date (anticipated): 01-09-2015

Enrollment: 50

Type: Anticipated

Ethics review

Approved WMO

Date: 17-12-2015

Application type: First submission

Review commission: METC Leids Universitair Medisch Centrum (Leiden)

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
CCMO	NL54198.058.15