

The development of shoulder pain after stroke.

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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...

Ethische beoordeling	Positief advies
Status	Werving nog niet gestart
Type aanpak	-
Onderzoekstype	Observationeel onderzoek, zonder invasieve metingen

Samenvatting

ID

NL-OMON22070

Bron

Nationaal Trial Register

Verkorte titel

The development of shoulder pain after stroke

Aandoening

stroke, post-stroke shoulder pain

CVA, hemiplegische schouderpijn

Ondersteuning

Primaire sponsor: University of Twente

Overige ondersteuning: University of Twente

Roessingh Rehabilitation Center

Onderzoeksproduct en/of interventie

Uitkomstmaten

Primaire uitkomstmaten

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.

Toelichting onderzoek

Achtergrond van het onderzoek

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.

Doel van het onderzoek

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.

Onderzoeksopzet

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

Onderzoeksproduct en/of interventie

N/A

Contactpersonen

Publiek

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Wetenschappelijk

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Deelname eisen

Belangrijkste voorwaarden om deel te mogen nemen (Inclusiecriteria)

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.

Belangrijkste redenen om niet deel te kunnen nemen (Exclusiecriteria)

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.

Onderzoeksopzet

Opzet

Type:	Observationeel onderzoek, zonder invasieve metingen
Onderzoeksmodel:	Anders
Toewijzing:	N.v.t. / één studie arm
Blinding:	Open / niet geblindeerd
Controle:	N.v.t. / onbekend

Deelname

Nederland	
Status:	Werving nog niet gestart
(Verwachte) startdatum:	01-05-2009
Aantal proefpersonen:	100
Type:	Verwachte startdatum

Ethische beoordeling

Positief advies	
Datum:	06-04-2009
Soort:	Eerste indiening

Registraties

Opgevolgd door onderstaande (mogelijk meer actuele) registratie

Geen registraties gevonden.

Andere (mogelijk minder actuele) registraties in dit register

Geen registraties gevonden.

In overige registers

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

Resultaten

Samenvatting resultaten

N/A