

SMART STROKES

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PROGRESS ON COMPARE: A RANDOMISED CONTROLLED TRIAL COMPARING CONSTRAINT-INDUCED AND MULTI-MODAL APHASIA THERAPY TO USUAL CARE IN PEOPLE WITH CHRONIC APHASIA

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Background/Aims: Chronic post-stroke aphasia impacts 30% of stroke survivors. This study aims to determine whether two contrasting, intensive treatments, Constraint Induced Aphasia Therapy (CIAT) and Multi-Modal Aphasia Therapy (M-MAT), are superior and cost saving when compared to usual care (UC). Response to these therapies has been highly variable, with aphasia severity and co-occurring cognitive problems likely to be key factors in treatment response.

Methods: This 3-arm prospective, single-blinded, randomized controlled trial has an end point at three months post treatment. Participants (n=198) are randomised to CIAT, M-MAT or UC. CIAT and M-MAT focus on intensive speech practice (30 hours in 2 weeks) using interactive game formats, however M-MAT also involves gesture, writing, and drawing cues. UC is usual health service-based aphasia therapy. Primary outcome immediately post treatment is the Aphasia Quotient of the Western Aphasia Battery. Secondary outcomes at 3-month follow up include measures of connected speech, multi-modal communication, and quality of life. Participant cognitive and linguistic predictors of treatment response are identified. Re-randomised UC participants will undertake a less intense schedule (30 hours in 5 weeks) in a nested sub-study exploring the impact of treatment intensity on outcomes. A full cost effectiveness analysis will be undertaken.

Results: The trial is underway: ethics approval, trial registration, data base are established. Recruitment from 5 Australian states has commenced.

Conclusions: This trial will determine the therapeutic effect of and variable response to treatment types in chronic aphasia. It will provide vital economic evaluative information regarding the service delivery standards of aphasia rehabilitation.