ACCEPTABILITY AND FEASIBILITY OF COMBINED TREATMENT OF GRADED MOTOR IMAGERY AND TRANSCRANIAL DIRECT CURRENT STIMULATION: A PROOF-OF-CONCEPT RANDOMIZED CONTROLLED TRIAL

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INTRODUCTION / AIM

We investigated the efficacy of the combination of graded motor imagery (GMI) and transcranial direct current stimulation (tDCS) in the management of complex regional pain syndrome (CRPS). In this context, we aimed to describe acceptability and feasibility of this treatment, and the feasibility of this research method.

METHODS

A proof-of-concept randomized controlled trial with two treatment options (GMI + tDCS or GMI + tDCS placebo) was conducted. According to Sidani & Bradens framework (2011), a home survey, participants diary, the researcher’s field notes and detailed descriptions were used to collect data.

RESULTS

In regards to acceptability, no participants dropped out, reflecting an excellent compliance. Adverse treatment effects were noted, but were consistent with those previously reported. The treatment feasibility was warranted with the use of a structured intervention guide, and the training of three qualified professionals. During the intervention, the research team conducted systematic observations to ensure the fidelity of the intervention. The description of the physical and social environment of the participants helped to understand the context and to estimate the resources necessary for a future implementation. For the feasibility of the research method, the recruitment of participants was difficult since CRPS is rare and the admissibility criteria were restrictive. The eligibility of 62 participants was assessed, but only 22 were eventually included. Randomization procedures and data collection were effective.

DISCUSSION / CONCLUSIONS

The combination of treatments appears to be acceptable and feasible in the context of a randomized controlled trial. The research method, particularly the recruitment, may be refined for later studies.

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