## D.5.2 Occupational therapy

Study details	Participants	Methods	Results				Comments
Full citation Sturkenboom,I.H., Graff,M.J., Hendriks,J.C., Veenhuizen,Y., Munneke,M., Bloem,B.R., Nijhuis-van der Sanden MW, OTiP study group, 20140708, Efficacy of occupational therapy for patients with Parkinson's disease: a randomised controlled trial.[Erratum appears in Lancet Neurol. 2014 Jun;13(6):536], Lancet Neurology, 13, 557-566, 2014 Ref Id 310044 Country/ies where the study was carried out Netherlands Study type RCT Aim of the study	Sample size N=191; intervention n=124, control n=67 caregiver: 117/124 in intervention and 63/67 in control had caregiver who participated  Inclusion criteria patients: had diagnosis of PD according to UKBB criteria were living at home reported difficulties in meaningful	revention 24, trol n=67 egiver: /124 in rvention 63/67 in trol had egiver who cicipated cicipated computer-generated minimisation algorithm assessors masked to tmt allocation. patients and therapists could not be masked  Interventions BB criteria e living at events  randomised controlled clinical trial with 3 and 6 month follow up all patients with diagnosis of PD according to UK BB from 10 centres were invited to participate after baseline assessment, patients randomized to group (2:1) randomization by computer-generated minimisation algorithm assessors masked to tmt allocation. patients and therapists could not be masked  Interventions within 2 weeks of randomization the experimental group received 10 weeks of home-based OT according to Dutab guidelings	unexplained with demographics median age interest (63.0 - 75.0) men 63% int, 62 disease duration UPDRS III: int = daily LED in = 61033.4)  RESULTS key: COPM = Comeasure; p = per questionnaire 32 = proactive copi of rehabilitation-	en = 63 Intion: n=120 Intion: n=120 Intion: n=120 Intion: n=61 Intion: n=61 Intion: n=6.0 (4 - 10), n=627 (18 - 36), control Intion: n=6.0 (4 - 10), n=687.5 (415.5 - 957.5) I	control = 6 (3 - 11) control = 6 (3 - 11) rol = 28 (19 - 36) 7) control = 550 (3  nal performance tisfaction; PDQ39 bression inventory; cale; ERPS = evaluation scale	32.5 - = PD PCC	An appropriate method of randomization was used to allocate pts to treatment groups? Yes There was adequate concealment of allocation: not applicable The groups were comparable at baseline, including all major confounding and prognostic factors? Yes Comparison groups received same care apart from
To evaluate the	daily	interventions included advice	assessment	3nt MD 95%	6mnt MD 95%		interventions.
effectiveness of home- based occupational	activities	or strategy training activities, or adaptation of tasks, daily	СОРМ-р	1.2 (0.8 to 1.6)	0.9 (0.5 to 1.3)		Yes - best medical
therapy compared to	Exclusion	routines, or environment	COPM-s	1.1 (0.7 to 1.5)	0.9 (0.5 to 1.3)		treatment
usual care in the improvement of daily	criteria	in OT intervention, caregivers needs in supporting patient	PDQ39	-1.7 (-3.9 to 0.5)	-2.1 (-4.3 to 0.1)		Pts receiving care were kept
activities, social participation and quality of	excluded patients who had: received OT  received or in supporting patient were also assessed and addressed if needed.	EQ5D	0.03 (-0.03 to 0.08)	0.02 (-0.03 to 0.07)		blind to tmt allocation. No - not possible	

If the Patients with PD and their carers.  Study dates Patients recruited and assigned between April 2011 and Nov 2012. Published 2014 Source of funding Study funded by Prinses Beatinx Splerfonds and the Parkinson Vereniging  Study Indied by Prinses Beatinx Splerfonds and the Parkinson Vereniging  And Splerfonds and the Parkinson Vereniging  Survive and their care intervention strategies used was individually tailored to about periodic problems in activities prioritised by the patient and to suit the patients coping style, the patients coping style, the patients oping style that the language had an MMSs of <2.4  Source of funding Survive funders and the Parkinson Vereniging  Survive funders and the Surv							
and their carers.  Study dates  Patients recruited and assigned between April 2011 and Nov 2012.  Published 2014  Source of funding Study funded by Prinses Beatrix Spierfonds and the Parkinson Vereniging  Study funded by Prinses Beatrix Spierfonds and the Parkinson Vereniging  Study funded by Prinses Beatrix Spierfonds and the Parkinson Utereniging  Study funded by Prinses Beatrix Spierfonds and the Parkinson Utereniging  Study funded by Prinses Beatrix Spierfonds and the Parkinson Utereniging  Study funded by Prinses Beatrix Spierfonds and the Parkinson Utereniging  Study funded by Prinses Beatrix Spierfonds and the Parkinson Utereniging  Study funded by Prinses Beatrix Spierfonds and the Parkinson Utereniging  Study funded by Prinses Beatrix Spierfonds and the Parkinson Utereniging  Study funded by Prinses Beatrix Spierfonds and the Parkinson Utereniging  Study funded by Prinses Beatrix Spierfonds and the Parkinson Utereniging  Study funded by Prinses Beatrix Spierfonds and the Parkinson Utereniging  Study funded by Prinses Beatrix Spierfonds and the Parkinson Utereniging  Study funded by Prinses Beatrix Spierfonds and the Parkinson Utereniging  Study funded by Prinses Beatrix Spierfonds and the Parkinson Utereniging  Study funded by Prinses Beatrix Spierfonds and the Parkinson Utereniging  Study funded by Prinses Beatrix Spierfonds and the Parkinson Utereniging of the dutch language and the Parkinson Utereniging  Study funded by Prinses Beatrix Spierfonds and the Parkinson Utereniging of the dutch language and the Parkinson Utereniging of the dutch language and the Parkinson Utereniging  Study funded by Prinses Beatrix Spierfonds and the Parkinson Utereniging of the dutch language and the Parkinson Utereniging  Study funded by Prinses Beatrix Spierfonds and the Parkinson Utereniging of the dutch language and the Parkinson Utereniging of the dutch language	•		Methods	Results			Comments
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Patients recruited and assigned between April 2011 and Nov 2012. Published 2014  Source of funding Study funded by Prinses Beatrix Spierfonds and the Parkinson Vereniging  Study funded by Prinses Beatrix Spierfonds and the Parkinson Vereniging  Study funded by Prinses Beatrix Spierfonds and the Parkinson Vereniging  Study funded by Prinses Beatrix Spierfonds and the Parkinson Vereniging  Study funded by Prinses Beatrix Spierfonds and the Parkinson Vereniging  Study funded by Prinses Beatrix Spierfonds and the Parkinson Vereniging  Study funded by Prinses Beatrix Spierfonds and the Parkinson Vereniging  Study funded by Prinses Beatrix Spierfonds and the Parkinson Vereniging  Study funded by Prinses Beatrix Spierfonds and the Parkinson Vereniging  Study funded by Prinses Beatrix Spierfonds and the Parkinson Vereniging  Study funded by Prinses Beatrix Spierfonds and the Parkinson Vereniging  Study funded by Prinses Beatrix Spierfonds and the Parkinson Vereniging  Study funded by Prinses Beatrix Spierfonds and the Parkinson Vereniging  Study funded by Prinses Beatrix Spierfonds and the Parkinson Vereniging  Study funded by Prinses Beatrix Spierfonds and the Parkinson Vereniging  Study funded by Prinses Beatrix Spierfonds and the Parkinson Vereniging  Study funded by Prinses Beatrix Spierfonds and the Parkinson Vereniging  Study funded by Prinses Beatrix Spierfonds and the Parkinson Vereniging  Study funded by Prinses Beatrix Spierfonds and the Parkinson Vereniging  Study funded by Prinses Beatrix Spierfonds and the Parkinson Vereniging  Study funded by Prinses Beatrix Spierfonds and the Parkinson Vereniging  Study funded by Prinses Beatrix Spierfonds and the Parkinson Vereniging  Study funded by Prinses Beatrix Spierfonds and the Parkinson Vereniging  Study funded by Prinses Beatrix Spierfonds and the Parkinson Vereniging  Study funded by Prinses Beatrix Spierfonds and the Parkinson Vereniging  Study funded by Prinses Beatrix Spierfonds and the Parkinson Vereniging  Study funded by Prinses Beatrix Spierfonds And Th	Study dates Patients recruited and	had predominant disabling comorbidity insufficient	to alleviate the problems in activities prioritised by the patient and to suit the patients coping style, the patients capacity to change, and the environmental and social context in which the targeted activity is usually done depending on complexity of issue addressed, number of sessions could vary, with max of 16hrs over 10 weeks session lengths were mostly 1 hour control group did not receive OT but were allowed to receive other medical, psychosocial, or allied health-care interventions all therapists had extensive experience in OT, median exp of 12 years, and attended a 3 day training course for this study and 1 day booster	carer burden	-1.1 (-3.8 to 1.7)	-2.5 (-5.3 to 0.4)	care were kept
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Source of funding Study funded by Prinses Beatix Spierfonds and the Parkinson Vereniging  depending on complexity of issue addressed, number of sessions could vary, with max of 16hrs over 10 weeks session lengths were mostly 1 hour control group did not receive OT but were allowed to receive other medical, psychosocial, or allied health-care interventions all therapists had extensive experience in OT, median or of 12 years, and attended a 3 day training course for this study and 1 day booster training halfway through study  service of funding  depending on complexity of issue addressed, number of sessions could vary, with max of 16hrs over 10 weeks session lengths were mostly 1 hour control group did not receive OT but were allowed to receive other medical, psychosocial, or allied health-care interventions all therapists had extensive experience in OT, median or adistinguishment of the principation in instrumental activities, but did not improve carer outcomes apart from EQ5D at 3 months.  Groups comparable for treatmen completion? Yes Groups were comparable with respect to availlability of outcome data? Yes Study had appropriate length of followup. Yes Study used a precise definition of outcome. Yes Valid and reliable method was used to determine the outcome . Yes Investigators were kept blind to participants		of the dutch					an equal length
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Study details	Participants	Methods	Results	Comments
				intervention. Yes - blind assessors
				Investigators were kept blind to other important confounding and prognostic factors. Unclear Low risk of bias