

City Research Online

City, University of London Institutional Repository

Citation: Williams, L., Ali, M., VandenBerg, K., Godwin, J., Elders, A., Becker, F., Bowen, A., Breitenstein, C., Gandolfi, M., Godecke, E., Hilari, K., Hinckley, J., Horton, S., Howard, D., Jesus, L.M.T., Jungblut, M., Kambanaros, M., Kukkonen, T., Laska, A., MacWhinney, B., Martins, I., Mattioli, F., Meinzer, M., Palmer, R., Patrício, B., Price, C., Smania, N., Szaflarski, J., Thomas, S., Visch-Brink, E., Worrall, L. & Brady, M. C. (2016). Creating an international, multidisciplinary, aphasia dataset of individual patient data (IPD) for the REhabilitation and recovery of peopLE with Aphasia after StrokE (RELEASE) project. International Journal of Stroke, 11(4), S50.

This is the accepted version of the paper.

This version of the publication may differ from the final published version.

Permanent repository link: http://openaccess.city.ac.uk/20247/

Link to published version:

Copyright and reuse: City Research Online aims to make research outputs of City, University of London available to a wider audience. Copyright and Moral Rights remain with the author(s) and/or copyright holders. URLs from City Research Online may be freely distributed and linked to.

City Research Online:

http://openaccess.city.ac.uk/

publications@city.ac.uk

Creating an international, multidisciplinary, aphasia dataset of individual patient data (IPD) for the REhabilitation and recovery of peopLE with Aphasia after StrokE (RELEASE) project.

L R Williams, NMAHP Research Unit, Glasgow Caledonian University

M Ali, NMAHP Research Unit, Glasgow Caledonian University

K VandenBerg, NMAHP Research Unit, Glasgow Caledonian University

J Godwin, Glasgow Caledonian University

A Elders, NMAHP Research Unit, Glasgow Caledonian University

F Becker, University of Oslo Sunnaas Rehabilitation Hospital

A Bowen, University of Manchester

C Breitenstein, University of Muenster

M Gandolfi, Marialuisa, University of Verona

E Godecke, Edith Cowan University

K Hilari, City University London

J Hinckley, University of South Florida

S Horton, University of East Anglia

D Howard, Newcastle University

L M T Jesus, University of Aveiro

M Jungblut, Interdisciplinary Institute for Music and Speech Therapy

M Kambanaros, Cyprus University of Technology

T Kukkonen, University of Tampere

A-C Laska, Karolinska Institute

B MacWhinney, Carnegie Mellon University

I Martins, University of Lisbon

F Mattioli, Spedali Civili, Brescia

M Meinzer, University of Queensland

R Palmer, University of Sheffield

B Patricio, Polytechnic Institute of Porto

C Price, University College London

N Smania, University of Verona

J P Szaflarski, University of Alabama at Birmingham

S Thomas, University of Nottingham

E Visch-Brink, Erasmus University Rotterdam

L Worrall, University of Queensland

M C Brady, NMAHP Research Unit, Glasgow Caledonian University on behalf of the RELEASE Collaborators.

Introduction:

Aphasia affects a third of stroke survivors (~5.6 million worldwide annually). The social and emotional impact of aphasia makes timely and effective rehabilitation vital. Speech and language therapy benefits recovery; however the specific patient, stroke, aphasia and intervention factors which optimise recovery and rehabilitation are unclear. We will explore these uncertainties in our RELEASE study (NIHR HS&DR 14/04/22). In Phase I of this study we aimed to create a large, collaborative, international database of individual patient data (IPD) from pre-existing aphasia research.

Method:

Eligible datasets included IPD of ≥10 people with stroke-related aphasia, with time poststroke specified and aphasia severity data. Contributions were invited from international, multidisciplinary, aphasia research collaborators via the EU COST funded Collaboration of Aphasia Trialists. We also conducted a systematic search of the literature [Cochrane Stroke Group Trials, MEDLINE, CINAHL, AMED, Cochrane Library Databases (CDSR, DARE, CENTRAL, HTA), EMBASE, LLBA and SpeechBITE from inception to Sept 2015 for additional datasets. Two independent reviewers considered full texts, a third resolved any conflicts.

Results:

As of June 2016 our database included 2,531 IPD from 11 countries (33 datasets). Nine were in the public domain. Following the systematic search of 5,272 records (of which 75 duplicates, 2,395 reference titles and 965 abstracts were excluded) further datasets were identified and the investigators of these datasets invited to collaborate.

Conclusion:

We succeeded in creating a large, collaborative, international aphasia database of preexisting IPD. A systematic search process to identify additional datasets eligible for inclusion supplemented more informal dataset recruitment methods.

Words: 250/250