

# Cochrane Reviews für den Fachbereich Logopädie

Ressourcen zur Evidenzbasierung  
in den Gesundheitsfachberufen

Juli bis Dezember 2016



Nutzerspezifische  
Cochrane Reviews



Cochrane Deutschland analysiert monatlich alle [neu erschienenen Cochrane Reviews](#) nach Relevanz für die Gesundheitsfachberufe (GFB). Die Relevanz für die Disziplinen wird jeweils durch zwei Experten der GFB unabhängig voneinander beurteilt. Ebenso prüft Cochrane Deutschland, in wie weit die jeweiligen Cochrane Reviews für AWMF-Leitlinien relevant sind und ob sie dort zitiert werden.

Die Berichte können eine aktuelle und berufsspezifische Basis für Übersetzungsaktivitäten und andere Nutzungen von Cochrane Reviews in Forschung und Praxis werden. Für die Erarbeitung von Leitlinien können diese Übersichten ebenfalls hilfreich sein.

**Autoren:**

Katharina Kunzweiler & Sebastian Voigt-Radloff

**Kontakt:**

Cochrane Deutschland  
Universitätsklinikum Freiburg  
Breisacher Str. 153  
D-79110 Freiburg  
[www.cochrane.de](http://www.cochrane.de)

## Logopädie-relevante Cochrane Reviews (CR)

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Madhok VB, Gagyor I, Daly F, Somasundara D, Sullivan M, Gammie F, Sullivan F. Corticosteroids for Bell's palsy (idiopathic facial paralysis). Cochrane Database of Systematic Reviews 2016, Issue 7. Art. No.: CD001942. DOI: 10.1002/14651858.CD001942.pub5.

<http://onlinelibrary.wiley.com/doi/10.1002/14651858.CD001942.pub5/full>

Publiziert 07\_2016 Studien bis 2016

The available moderate- to high-quality evidence from randomised controlled trials showed significant benefit from treating Bell's palsy with corticosteroids.

Relevante AWMF-Leitlinien, die das Cochrane Review enthalten (CR IN) bzw. nicht enthalten (CR OUT):

CR IN

CR OUT [www.awmf.org/uploads/tx\\_szleitlinien/030-013l\\_S2k\\_Idiopathische\\_Fazialisparese\\_Therapie\\_2011-09.pdf](http://www.awmf.org/uploads/tx_szleitlinien/030-013l_S2k_Idiopathische_Fazialisparese_Therapie_2011-09.pdf)

Pennington L, Parker NK, Kelly H, Miller N. Speech therapy for children with dysarthria acquired before three years of age. Cochrane Database of Systematic Reviews 2016, Issue 7. Art. No.: CD006937. DOI: 10.1002/14651858.CD006937.pub3.

<http://onlinelibrary.wiley.com/doi/10.1002/14651858.CD006937.pub3/full>

Publiziert 07\_2016 Studien bis 2015

This review found no evidence from randomised trials of the effectiveness of speech and language therapy interventions to improve the speech of children with early acquired dysarthria. Rigorous, fully powered randomised controlled trials are needed to investigate if the positive changes in children's speech observed in phase I and phase II studies are generalisable to the population of children with early acquired dysarthria served by speech and language therapy services. Research should examine change in children's speech production and intelligibility. It must also investigate children's participation in social and educational activities, and their quality of life, as well as the cost and acceptability of interventions.

Relevante AWMF-Leitlinien, die das Cochrane Review enthalten (CR IN) bzw. nicht enthalten (CR OUT):

CR IN

CR OUT [www.awmf.org/uploads/tx\\_szleitlinien/030-103l\\_S1\\_Neurogene\\_Sprechst%C3%B6rung\\_Stimmst%C3%B6rung\\_Dysarthrie\\_Dysarthrophonie\\_2012\\_verl%C3%A4ngert.pdf](http://www.awmf.org/uploads/tx_szleitlinien/030-103l_S1_Neurogene_Sprechst%C3%B6rung_Stimmst%C3%B6rung_Dysarthrie_Dysarthrophonie_2012_verl%C3%A4ngert.pdf)

Perry A, Lee SH, Cotton S, Kennedy C. Therapeutic exercises for affecting post-treatment swallowing in people treated for advanced-stage head and neck cancers. Cochrane Database of Systematic Reviews 2016, Issue 8. Art. No.: CD011112. DOI: 10.1002/14651858.CD011112.pub2.

<http://onlinelibrary.wiley.com/doi/10.1002/14651858.CD011112.pub2/full>

Publiziert 08\_2016 Studien bis 2016

We found no evidence that undertaking therapeutic exercises before, during and/or immediately after HNC treatment leads to improvement in oral swallowing. This absence of evidence may be due to the small participant numbers in trials, resulting in insufficient power to detect any difference. Data from the identified trials could not be combined due to differences in the choice of primary outcomes and in the measurement tools used to assess them, and the differing baseline and endpoints across studies.

Designing and implementing studies with stronger methodological rigour is essential. There needs to be agreement about the key primary outcomes, the choice of validated assessment tools to measure them and the time points at which those measurements are made.

Relevante AWMF-Leitlinien, die das Cochrane Review enthalten (CR IN) bzw. nicht enthalten (CR OUT):

CR IN

CR OUT [www.awmf.org/uploads/tx\\_szleitlinien/007\\_100OLI\\_S3\\_Mundhoehlenkarzinom\\_122012-verlaengert.pdf](http://www.awmf.org/uploads/tx_szleitlinien/007_100OLI_S3_Mundhoehlenkarzinom_122012-verlaengert.pdf) [www.awmf.org/uploads/tx\\_szleitlinien/049-014l\\_S1\\_Neurogene\\_Sprech-Stimmst%C3%B6rungen\\_Erwachsene\\_2014-09.pdf](http://www.awmf.org/uploads/tx_szleitlinien/049-014l_S1_Neurogene_Sprech-Stimmst%C3%B6rungen_Erwachsene_2014-09.pdf) [www.awmf.org/uploads/tx\\_szleitlinien/027-043l\\_S1\\_Schilddruesenkarzinome\\_2011-abgelaufen.pdf](http://www.awmf.org/uploads/tx_szleitlinien/027-043l_S1_Schilddruesenkarzinome_2011-abgelaufen.pdf)

## Logopädie-relevante Cochrane Reviews (CR)

Irons JY, Petocz P, Kenny DT, Chang AB. Singing as an adjunct therapy for children and adults with cystic fibrosis. *Cochrane Database of Systematic Reviews* 2016, Issue 9. Art. No.: CD008036. DOI: 10.1002/14651858.CD008036.pub4.

<http://onlinelibrary.wiley.com/doi/10.1002/14651858.CD008036.pub4/full>

Publiziert 09\_2016 Studien bis 2016

There is insufficient evidence to determine the effects of singing on quality of life or on the respiratory parameters in people with cystic fibrosis. However, there is growing interest in non-medical treatments for cystic fibrosis and researchers may wish to investigate the impact of this inexpensive therapy on respiratory function and psychosocial well-being further in the future.

Relevante AWMF-Leitlinien, die das Cochrane Review enthalten (CR IN) bzw. nicht enthalten (CR OUT):

CR IN

CR OUT <http://www.awmf.org/leitlinien/detail/anmeldung/1/II/026-024.html>

Kloukos D, Fudalej P, Sequeira-Byron P, Katsaros C. Maxillary distraction osteogenesis versus orthognathic surgery for cleft lip and palate patients. *Cochrane Database of Systematic Reviews* 2016, Issue 9. Art. No.: CD010403. DOI: 10.1002/14651858.CD010403.pub2.

<http://onlinelibrary.wiley.com/doi/10.1002/14651858.CD010403.pub2/full>

Publiziert 09\_2016 Studien bis 2016

This review found only one small randomised controlled trial concerning the effectiveness of distraction osteogenesis compared to conventional orthognathic surgery. The available evidence is of very low quality, which indicates that further research is likely to change the estimate of the effect. Based on measured outcomes, distraction osteogenesis may produce more satisfactory results; however, further prospective research comprising assessment of a larger sample size with participants with different facial characteristics is required to confirm possible true differences between interventions.

Relevante AWMF-Leitlinien, die das Cochrane Review enthalten (CR IN) bzw. nicht enthalten (CR OUT):

CR IN

CR OUT [www.awmf.org/uploads/tx\\_szleitlinien/007-038\\_S2k\\_Einseitige\\_Lippen-Kiefer-Gaumen-Spalten\\_2010\\_abgelaufen.pdf](http://www.awmf.org/uploads/tx_szleitlinien/007-038_S2k_Einseitige_Lippen-Kiefer-Gaumen-Spalten_2010_abgelaufen.pdf)

Carvalho FR, Lentini-Oliveira DA, Prado LBF, Prado GF, Carvalho LBC. Oral appliances and functional orthopaedic appliances for obstructive sleep apnoea in children. *Cochrane Database of Systematic Reviews* 2016, Issue 10. Art. No.: CD005520. DOI: 10.1002/14651858.CD005520.pub3.

<http://onlinelibrary.wiley.com/doi/10.1002/14651858.CD005520.pub3/full>

Publiziert 10\_2016 Studien bis 2016

There is insufficient evidence to support or refute the effectiveness of oral appliances and functional orthopaedic appliances for the treatment of obstructive sleep apnoea in children. Oral appliances or functional orthopaedic appliances may be considered in specified cases as an auxiliary in the treatment of children who have craniofacial anomalies which are risk factors for apnoea.

Relevante AWMF-Leitlinien, die das Cochrane Review enthalten (CR IN) bzw. nicht enthalten (CR OUT):

CR IN

CR OUT