

Cochrane Reviews für den Fachbereich Ergotherapie

Ressourcen zur Evidenzbasierung
in den Gesundheitsfachberufen

Oktober bis Dezember 2017



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 Stiftung
Universitätsklinikum Freiburg
Breisacher Str. 153
D-79110 Freiburg
www.cochrane.de

Ergotherapie-relevante Cochrane Reviews (CR)

Synnot A, Chau M, Pitt V, O'Connor D, Gruen RL, Wasiaik J, Clavisi O, Pattuwage L, Phillips K. Interventions for managing skeletal muscle spasticity following traumatic brain injury. *Cochrane Database of Systematic Reviews* 2017, Issue 11. Art. No.: CD008929. DOI: 10.1002/14651858.CD008929.pub2.

<http://onlinelibrary.wiley.com/doi/10.1002/14651858.CD008929.pub2/full>

Publiziert 11/2017 Studien bis 2017

The very low quality and limited amount of evidence about the management of spasticity in people with TBI means that we are uncertain about the effectiveness or harms of these interventions. Well-designed and adequately powered studies using functional outcome measures to test the interventions used in clinical practice are needed.

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

CR IN

CR OUT

Aalbers S, Fusar-Poli L, Freeman RE, Spreen M, Ket JCF, Vink AC, Maratos A, Crawford M, Chen XJ, Gold C. Music therapy for depression. *Cochrane Database of Systematic Reviews* 2017, Issue 11. Art. No.: CD004517. DOI: 10.1002/14651858.CD004517.pub3.

<http://onlinelibrary.wiley.com/doi/10.1002/14651858.CD004517.pub3/full>

Publiziert 11/2017 Studien bis 2017

Findings of the present meta-analysis indicate that music therapy provides short-term beneficial effects for people with depression. Music therapy added to treatment as usual (TAU) seems to improve depressive symptoms compared with TAU alone. Additionally, music therapy plus TAU is not associated with more or fewer adverse events than TAU alone. Music therapy also shows efficacy in decreasing anxiety levels and improving functioning of depressed individuals.

Future trials based on adequate design and larger samples of children and adolescents are needed to consolidate our findings. Researchers should consider investigating mechanisms of music therapy for depression. It is important to clearly describe music therapy, TAU, the comparator condition, and the profession of the person who delivers the intervention, for reproducibility and comparison purposes.

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/028-043l_S3_Depressive_St%C3%B6rungen_bei_Kindern_Jugendlichen_2013-07.pdf,
www.awmf.org/uploads/tx_szleitlinien/nvl-005l_S3_Unipolare_Depression_2017-05.pdf

Laver KE, Lange B, George S, Deutsch JE, Saposnik G, Crotty M. Virtual reality for stroke rehabilitation. *Cochrane Database of Systematic Reviews* 2017, Issue 11. Art. No.: CD008349. DOI: 10.1002/14651858.CD008349.pub4.

<http://onlinelibrary.wiley.com/doi/10.1002/14651858.CD008349.pub4/full#CD008349-sec1-0004>

Publiziert 11/2017 Studien bis 2017

We found evidence that the use of virtual reality and interactive video gaming was not more beneficial than conventional therapy approaches in improving upper limb function. Virtual reality may be beneficial in improving upper limb function and activities of daily living function when used as an adjunct to usual care (to increase overall therapy time). There was insufficient evidence to reach conclusions about the effect of virtual reality and interactive video gaming on gait speed, balance, participation, or quality of life. This review found that time since onset of stroke, severity of impairment, and the type of device (commercial or customised) were not strong influencers of outcome. There was a trend suggesting that higher dose (more than 15 hours of total intervention) was preferable as were customised virtual reality programs; however, these findings were not statistically significant.

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/053-011l_S3_Schlaganfall_2012-abgelaufen.pdf

Ergotherapie-relevante Cochrane Reviews (CR)

Hemmingsen B, Gimenez-Perez G, Mauricio D, Roqué i Figuls M, Metzendorf MI, Richter B. Diet, physical activity or both for prevention or delay of type 2 diabetes mellitus and its associated complications in people at increased risk of developing type 2 diabetes mellitus. Cochrane Database of Systematic Reviews 2017, Issue 12. Art. No.: CD003054. DOI: 10.1002/14651858.CD003054.pub4.

<http://onlinelibrary.wiley.com/doi/10.1002/14651858.CD003054.pub4/full>

Publiziert 12/2017 Studien bis 2017

There is no firm evidence that diet alone or physical activity alone compared to standard treatment influences the risk of T2DM and especially its associated complications in people at increased risk of developing T2DM. However, diet plus physical activity reduces or delays the incidence of T2DM in people with IGT. Data are lacking for the effect of diet plus physical activity for people with intermediate hyperglycaemia defined by other glycaemic variables. Most RCTs did not investigate patient-important outcomes.

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/nvl-001f1_S3_nvl_Diabetes_Schulung_2016-07-abgelaufen.pdf, www.awmf.org/uploads/tx_szleitlinien/nvl-001g1_S3_Typ-2-Diabetes-Therapie_2014-11.pdf

Hou WH, Chi CC, Lo HL, Chou YY, Kuo KN, Chuang HY. Vocational rehabilitation for enhancing return-to-work in workers with traumatic upper limb injuries. Cochrane Database of Systematic Reviews 2017, Issue 12. Art. No.: CD010002. DOI: 10.1002/14651858.CD010002.pub3.

<http://onlinelibrary.wiley.com/doi/10.1002/14651858.CD010002.pub3/full>

Publiziert 12/2017 Studien bis 2017

There is currently no high-quality evidence to support or refute the efficacy of vocational rehabilitation for enhancing RTW in workers with traumatic upper limb injuries. Since injured people in occupational settings frequently receive vocational rehabilitation with the aim of decreasing work disability, enhancing RTW, increasing productivity, and containing the welfare cost, further high-quality RCTs assessing the efficacy of vocational rehabilitation for workers with traumatic upper limb injury are needed to fill this gap in knowledge.

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

CR IN

CR OUT

Lawrence M, Celestino Junior FT, Matozinho HHS, Govan L, Booth J, Beecher J. Yoga for stroke rehabilitation. Cochrane Database of Systematic Reviews 2017, Issue 12. Art. No.: CD011483. DOI: 10.1002/14651858.CD011483.pub2.

<http://onlinelibrary.wiley.com/doi/10.1002/14651858.CD011483.pub2/full>

Publiziert 12/2017 Studien bis 2017

Yoga has the potential for being included as part of patient-centred stroke rehabilitation. However, this review has identified insufficient information to confirm or refute the effectiveness or safety of yoga as a stroke rehabilitation treatment. Further large-scale methodologically robust trials are required to establish the effectiveness of yoga as a stroke rehabilitation treatment.

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/053-011f_S3_Schlaganfall_2012-abgelaufen.pdf

Ergotherapie-relevante Cochrane Reviews (CR)

Rietberg MB, Veerbeek JM, Gosselink R, Kwakkel G, van Wegen EEH. Respiratory muscle training for multiple sclerosis. Cochrane Database of Systematic Reviews 2017, Issue 12. Art. No.: CD009424. DOI: 10.1002/14651858.CD009424.pub2.

<http://onlinelibrary.wiley.com/doi/10.1002/14651858.CD009424.pub2/full>

Publiziert 12/2017 Studien bis 2017

This review provides low-quality evidence that resistive inspiratory muscle training with a resistive threshold device is moderately effective postintervention for improving predicted maximal inspiratory pressure in people with mild to moderate MS, whereas expiratory muscle training showed no significant effects. The sustainability of the favourable effect of inspiratory muscle training is unclear, as is the impact of the observed effects on quality of life.

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

CR IN

CR OUT