

# Cochrane Reviews für den Fachbereich Ergotherapie

Ressourcen zur Evidenzbasierung  
in den Gesundheitsfachberufen

Juli bis September 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.

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## Ergotherapie-relevante Cochrane Reviews (CR)

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Langhorne P, Baylan S, Early Supported Discharge Trialists. Early supported discharge services for people with acute stroke. Cochrane Database of Systematic Reviews 2017, Issue 7. Art. No.: CD000443. DOI: 10.1002/14651858.CD000443.pub4.

<http://onlinelibrary.wiley.com/doi/10.1002/14651858.CD000443.pub4/full>

Publiziert 07\_2017      Studien bis 2017

Appropriately resourced ESD services with co-ordinated multidisciplinary team input provided for a selected group of stroke patients can reduce long-term dependency and admission to institutional care as well as reducing the length of hospital stay. Results are inconclusive for services without co-ordinated multidisciplinary team input. We observed no adverse impact on the mood or subjective health status of patients or carers, nor on readmission to hospital.

### 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/II/053-011.html>

Legg LA, Lewis SR, Schofield-Robinson OJ, Drummond A, Langhorne P. Occupational therapy for adults with problems in activities of daily living after stroke. Cochrane Database of Systematic Reviews 2017, Issue 7. Art. No.: CD003585. DOI: 10.1002/14651858.CD003585.pub3.

<http://onlinelibrary.wiley.com/doi/10.1002/14651858.CD003585.pub3/full>

Publiziert 07\_2017      Studien bis 2017

We found low-quality evidence that occupational therapy targeted towards activities of daily living after stroke can improve performance in activities of daily living and reduce the risk of deterioration in these abilities. Because the included studies had methodological flaws, this research does not provide a reliable indication of the likely effect of occupational therapy for adults with stroke.

### 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/II/053-011.html>

Valentín-Gudiol M, Mattern-Baxter K, Girabent-Farrés M, Bagur-Calafat C, Hadders-Algra M, Angulo-Barroso RM. Treadmill interventions in children under six years of age at risk of neuromotor delay. Cochrane Database of Systematic Reviews 2017, Issue 7. Art. No.: CD009242. DOI: 10.1002/14651858.CD009242.pub3.

<http://onlinelibrary.wiley.com/doi/10.1002/14651858.CD009242.pub3/full>

Publiziert 07\_2017      Studien bis 2017

This update of the review from 2011 provides additional evidence of the efficacy of treadmill intervention for certain groups of children up to six years of age, but power to find significant results still remains limited. The current findings indicate that treadmill intervention may accelerate the development of independent walking in children with Down syndrome and may accelerate motor skill attainment in children with cerebral palsy and general developmental delay. Future research should first confirm these findings with larger and better designed studies, especially for infants with cerebral palsy and developmental delay. Once efficacy is established, research should examine the optimal dosage of treadmill intervention in these populations.

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

CR IN

CR OUT

## Ergotherapie-relevante Cochrane Reviews (CR)

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Miyahara M, Hillier SL, Pridham L, Nakagawa S. Task-oriented interventions for children with developmental co-ordination disorder. Cochrane Database of Systematic Reviews 2017, Issue 7. Art. No.: CD010914. DOI: 10.1002/14651858.CD010914.pub2.

<http://onlinelibrary.wiley.com/doi/10.1002/14651858.CD010914.pub2/full>

Publiziert 07\_2017      Studien bis 2017

We have very little confidence in the effect estimate: the true effect is likely to be substantially different from the estimate of effect. The conclusions drawn from previous reviews, which unanimously reported beneficial effects of intervention, are inconsistent with our conclusions. This review highlights the need for carefully designed and executed RCTs to investigate the effect of interventions for children with DCD.

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

CR IN

CR OUT

Kuster AT, Dalsbø TK, Luong Thanh BY, Agarwal A, Durand-Moreau QV, Kirkehei I. Computer-based versus in-person interventions for preventing and reducing stress in workers. Cochrane Database of Systematic Reviews 2017, Issue 8. Art. No.: CD011899. DOI: 10.1002/14651858.CD011899.pub2.

<http://onlinelibrary.wiley.com/doi/10.1002/14651858.CD011899.pub2/full>

Publiziert 08\_2017      Studien bis 2017

We found very low-quality evidence with conflicting results, when comparing the effectiveness of computer-based stress management interventions with in-person stress management interventions in employees. We could include only two studies with small sample sizes. We have very little confidence in the effect estimates. It is very likely that future studies will change these conclusions.

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

CR IN

CR OUT

Bidonde J, Busch AJ, van der Spuy I, Tupper S, Kim SY, Boden C. Whole body vibration exercise training for fibromyalgia. Cochrane Database of Systematic Reviews 2017, Issue 9. Art. No.: CD011755. DOI: 10.1002/14651858.CD011755.pub2.

<http://onlinelibrary.wiley.com/doi/10.1002/14651858.CD011755.pub2/full>

Publiziert 09\_2017      Studien bis 2016

Whether WBV or WBV in addition to mixed exercise is superior to control or another intervention for women with fibromyalgia remains uncertain. The quality of evidence is very low owing to imprecision (few study participants and wide confidence intervals) and issues related to risk of bias. These trials did not measure major outcomes such as pain intensity, stiffness, fatigue, and physical function. Overall, studies were few and were very small, which prevented meaningful estimates of harms and definitive conclusions about WBV safety.

### **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/II/145-004.html>

Appelen D, van Loo E, Prins MH, Neumann MHAM, Kolbach DN. Compression therapy for prevention of post-thrombotic syndrome. Cochrane Database of Systematic Reviews 2017, Issue 9. Art. No.: CD004174. DOI: 10.1002/14651858.CD004174.pub3.

<http://onlinelibrary.wiley.com/doi/10.1002/14651858.CD004174.pub3/full>

Publiziert 09\_2017 Studien bis 2017

Low-quality evidence suggests that elastic compression stockings may reduce the occurrence of PTS after DVT. We downgraded the quality of evidence owing to considerable heterogeneity between studies and lack of or unclear risk of blinding due to clinical assessment scores. No serious adverse effects occurred in these studies. Large randomised controlled trials are needed to confirm these findings because of current lack of high-quality evidence and considerable heterogeneity.

### 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/II/065-002.html>

Ellis G, Gardner M, Tsiachristas A, Langhorne P, Burke O, Harwood RH, Conroy SP, Kircher T, Somme D, Saltvedt I, Wald H, O'Neill D, Robinson D, Shepperd S. Comprehensive geriatric assessment for older adults admitted to hospital. Cochrane Database of Systematic Reviews 2017, Issue 9. Art. No.: CD006211. DOI: 10.1002/14651858.CD006211.pub3.

<http://onlinelibrary.wiley.com/doi/10.1002/14651858.CD006211.pub3/full>

Publiziert 09\_2017 Studien bis 2016

Older patients are more likely to be alive and in their own homes at follow-up if they received CGA on admission to hospital. We are uncertain whether data show a difference in effect between wards and teams, as this analysis was underpowered. CGA may lead to a small increase in costs, and evidence for cost-effectiveness is of low-certainty due to imprecision and inconsistency among studies. Further research that reports cost estimates that are setting-specific across different sectors of care are required.

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

CR IN

CR OUT

Gibson W, Wand BM, O'Connell NE. Transcutaneous electrical nerve stimulation (TENS) for neuropathic pain in adults. Cochrane Database of Systematic Reviews 2017, Issue 9. Art. No.: CD011976. DOI: 10.1002/14651858.CD011976.pub2.

<http://onlinelibrary.wiley.com/doi/10.1002/14651858.CD011976.pub2/full>

Publiziert 09\_2017 Studien bis 2016

In this review, we reported on the comparison between TENS and sham TENS. The quality of the evidence was very low meaning we were unable to confidently state whether TENS is effective for pain control in people with neuropathic pain. The very low quality of evidence means we have very limited confidence in the effect estimate reported; the true effect is likely to be substantially different. We make recommendations with respect to future TENS study designs which may meaningfully reduce the uncertainty relating to the effectiveness of this treatment modality.

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

CR IN

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