

Clinical Trial Protocol

Iranian Registry of Clinical Trials

11 Sep 2026

Effects of Multi-modal Balance Training with and without Auditory cues on balance, Gait Mobility, Risk of Fall and Quality of Life in Patients with Chronic Stroke

Protocol summary

Study aim

To determine the effects of multi-modal balance training with and without auditory cues on balance, mobility, risk of fall and quality of life in chronic stroke.

Design

A randomized, single blinded clinical trial with a parallel group design of 42 patients (divided into two groups), were selected from Physical Therapy Department of Islam teaching hospital and Imran idrees hospital cantt. and followed for 12 weeks

Settings and conduct

The data will be collected from the Islam teaching Hospital and Imran idrees hospital cantt.. The study population will be patients with chronic stroke which will randomly allocated into two groups. Group A (Multimodal Balance Training with Auditory cues) and Group B (Multimodal Balance Training without Auditory cues).

Participants/Inclusion and exclusion criteria

Inclusion criteria will be both genders with the age between 45-70 years, having one sided stroke with no or less than grade 2 spasticity in modified ashworth scale and less than 52 score in berg balance scale. Exclusion criteria will be the patients with any respiratory disorders (i.e. asthma), orthopedic disorder (i.e. arthritis), non-healing ulcers, visuospatial problems (i.e. hemineglect) and cardiac disorder (i.e. myocardial infarction)

Intervention groups

Both experimental groups received balance training; one intervention group (Group A) received exercises combined with auditory cues provided by using a google metronome (RAS-supported multimodal balance intervention), whereas the other intervention group (Group B) received balance training without auditory cues (only multimodal balance training). All the participants perform exercises for 45 minutes session with 10 minutes of rest break, on two alternative days in a week for a period of 12 weeks. Effects of intervention

will be measured after 6th and 12th weeks

Main outcome variables

Balance, Gait mobility, Risk of fall, Quality of life

General information

Reason for update

Acronym

IRCT registration information

IRCT registration number: **IRCT20240714062437N1**

Registration date: **2024-11-15, 1403/08/25**

Registration timing: **retrospective**

Last update: **2024-11-15, 1403/08/25**

Update count: **0**

Registration date

2024-11-15, 1403/08/25

Registrant information

Name

Hammad Sattar

Name of organization / entity

University of Lahore

Country

Pakistan

Phone

+92 344 7089190

Email address

hammadstarrpt@gmail.com

Recruitment status

Recruitment complete

Funding source

Expected recruitment start date

2024-05-29, 1403/03/09

Expected recruitment end date

2024-10-30, 1403/08/09

Actual recruitment start date

2024-05-29, 1403/03/09
Actual recruitment end date
2024-10-31, 1403/08/10
Trial completion date
2024-12-02, 1403/09/12

Scientific title
Effects of Multi-modal Balance Training with and without Auditory cues on balance, Gait Mobility, Risk of Fall and Quality of Life in Patients with Chronic Stroke

Public title
Effects of Multi-modal Balance Training with and without Auditory cues on balance, Gait Mobility, Risk of Fall and Quality of Life in Patients with Chronic Stroke

Purpose
Treatment

Inclusion/Exclusion criteria
Inclusion criteria:
both genders are included individuals with the age of between 45-70 years individuals with absent or less than grade 2 spasticity in modified ashworth scale in affected extremity individuals having only one sided stroke individuals having score of less than 52 out of 56 in berg balnce scale
Exclusion criteria:
individuals who have any kind of cardiac disorder i.e. myocardial infarction etc individuals who have any orthopedic disorder i.e. arthritis etc indivduals who have any respiratory condition such as asthma etc. individuals who have non-healing ulcers individuals who have some visuospatial problems i.e. hemi-neglect etc

Age
From **45 years** old to **70 years** old

Gender
Both

Phase
3

Groups that have been masked

- Participant

Sample size
Target sample size: **42**
Actual sample size reached: **42**

Randomization (investigator's opinion)
Randomized

Randomization description
all the screened and willing participants will be randomly allocated into tw groups (Group A and Group B) by computerized generated method

Blinding (investigator's opinion)
Single blinded

Blinding description
study will be single and assessor blinded. Participants will be masked about other groups but they will know what treatment they will be receiving or what exercises they will be doing. Principal investigator would also not be masked or blinded because investigator would be applying the techniques or participants of both groups.

Placebo
Not used

Assignment

Parallel
Other design features

Secondary Ids
empty

Ethics committees

1
Ethics committee
Name of ethics committee
Research Ethics Committee of University of Lahore
Street address
University of Lahore Teaching Hospital Lahore, Punjab, Pakistan
City
Lahore
Postal code
55150
Approval date
2024-05-22, 1403/03/02
Ethics committee reference number
REC-UOL-205-08-24

Health conditions studied

1
Description of health condition studied
Stroke
ICD-10 code
G46
ICD-10 code description
Vascular syndromes of brain in cerebrovascular diseases

Primary outcomes

1
Description
Balance
Timepoint
12 weeks
Method of measurement
The Berg Balance Scale (BBS) is one of the most widely used tools for balance assessment. The BBS is a 14-item scale that quantitatively assesses balance and risk for falls in older community-dwelling adults through direct observation of their performance. The scale requires 10 to 20 minutes to complete and measures the patient's ability to maintain balance—either statically or while performing various functional movements for a specified duration of time. The items are scored from 0 to 4, with a score of 0 representing an inability to complete the task and a score of 4 representing independent item completion. A global score is calculated out of 56 possible points. Scores of 0 to 20 represent balance impairment, 21 to 40 represent acceptable balance, and 41 to 56 represent good balance. The BBS measures both static and dynamic aspects of balance.

2

Description

Gait mobility

Timepoint

12 weeks

Method of measurement

The TUG test is a composite measure of functional mobility. The TUG was originally created to predict fall risk in geriatric patients. It includes executive function (listening and initiating movements), transfer tasks (standing up and sitting down), walking, and balance. The TUG is performed by having the patient seated in a chair and with the command "go", rise from the chair, walk 3 meters, turn around, return to chair and sit. The trial is timed from when the patient's back leaves the backrest to when the patient returns to the seated position, and the patient is allowed one practice trial. TUG score of 13.5 seconds or more could rule in the risk of a fall.

3

Description

Risk of fall

Timepoint

12 weeks

Method of measurement

The Falls Efficacy Scale International (FES-I) is a measure of "fear of falling" or "concerns about falling". The FES-I is intended to be used in adult population to measure the level of concern about falling during social and physical activities inside and outside the home whether or not the person actually does the activity. It is a 16 item questionnaire, useful to the researchers and clinicians interested in fear of falling, with a score ranging from minimum 16 (no concern about falling) to maximum 64 (severe concern about falling). In this scale individuals are instructed to score their concern of falling during an activity on a 4 point Likert scale with 1 as not concerned at all and 4 as very concerned. The item scores are summed up to obtain a total, with higher the score, higher being the concern for falling.

4

Description

Quality of life

Timepoint

12 weeks

Method of measurement

The Stroke Specific Quality of Life scale (SS-QOL) is a patient-centered outcome measure intended to provide an assessment of health-related quality of life (HRQOL) specific to patients with stroke. Patients must respond to each question of the SS-QOL with reference to the past week. It is a self-report scale containing 49 items in 12 domains. The score is between 49-245, having high score with better quality of life.

Secondary outcomes

empty

Intervention groups

1

Description

In this study, patients are allocated into two groups. Both experimental groups received balance training; one intervention group received multi modal balance training exercises combined with auditory cues provided by a metronome (RAS-supported multimodal balance intervention), whereas the other intervention group received balance training exercises without auditory cues (only multimodal balance training). Multimodal balance training exercises in the intervention are: Ball lifted over head in sitting position, Trunk stability in seated position, Stability upright posture when holding a stick, Trunk twist with ball in sitting position, Weight shifts, Balance on both feet with visual cues, Latero-lateral step single-leg balance, walking with visual cues and foam, make side-steps, walking with visual cues and cones, Diagonal reaching with ball, sit to Stand, Twisting. Participants of each group will perform 24 sessions (over 12 weeks) on alternative days in a week. The duration of each session will be 45 minutes lasting 10 minutes each with rest breaks. Effects of interventions will be measured after 6th week and after 12th week.

Category

Rehabilitation

Recruitment centers

1

Recruitment center

Name of recruitment center

Islam teaching hospital sialkot and Imran idress hospital cantt. sialkot

Full name of responsible person

Dr. Husna and Dr. Ayesha zulfikar

Street address

Islam medical college, pasrur road sialkot

City

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Email

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Sponsors / Funding sources

1

Sponsor

Name of organization / entity

The University of Lahore

Full name of responsible person

Hammad Sattar

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1-km Defence Road, near Bhupatian Chowk, Lahore, Punjab

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Grant name

Grant code / Reference number

Is the source of funding the same sponsor organization/entity?
No

Title of funding source
None

Proportion provided by this source
100

Public or private sector
Private

Domestic or foreign origin
Domestic

Category of foreign source of funding
empty

Country of origin

Type of organization providing the funding
Academic

Person responsible for general inquiries

Contact

Name of organization / entity
The University of Lahore

Full name of responsible person
Hammad Sattar

Position
Student

Latest degree
Bachelor

Other areas of specialty/work
Physiotherapy

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1-km Defence Road, near Bhuptian Chowk, Lahore, Punjab

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Position
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Bachelor

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Person responsible for updating data

Contact

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Sharing plan

Deidentified Individual Participant Data Set (IPD)
Yes - There is a plan to make this available

Study Protocol
Yes - There is a plan to make this available

Statistical Analysis Plan
Yes - There is a plan to make this available

Informed Consent Form
Undecided - It is not yet known if there will be a plan to make this available

Clinical Study Report
Yes - There is a plan to make this available

Analytic Code
Undecided - It is not yet known if there will be a plan to

make this available

Data Dictionary
Undecided - It is not yet known if there will be a plan to make this available

Title and more details about the data/document
Demographic data and data related to final outcome will be shared by maintaining the confidentiality

When the data will become available and for how long
Data will be available after the publication of findings till twelve months

To whom data/document is available

Hammad Sattar

Under which criteria data/document could be used
For research purpose

From where data/document is obtainable
To the corresponding of the study, Hammad Sattar, and can contact on 00923447089190, hammad.sattarpt@gmail.com

What processes are involved for a request to access data/document
Open access and there is traditional public data release where anyone can get access to the data

Comments