

INPLASY

Effectiveness of Telerehabilitation on Health-Related Quality of Life and ICF Frame Parameters in Persons with Lower Extremity Amputation: A Systematic Review

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ADMINISTRATIVE INFORMATION

Support - None.

Review Stage at time of this submission - The review has not yet started.

Conflicts of interest - None declared.

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Amendments - This protocol was registered with the International Platform of Registered Systematic Review and Meta-Analysis Protocols (INPLASY) on 10 July 2024 and was last updated on 10 July 2024.

INTRODUCTION

Review question / Objective What is the effectiveness of telerehabilitation on health-related quality of life and ICF frame parameters in persons with lower extremity amputations rehabilitation?

Condition being studied Amputation affects quality of life, ability to perform daily life activities, and the individual's emotional and psychological well-being. Within the ICF framework, all these effects affect the individual's happiness and quality of health in life. Amputation is considered a major life-changing event and a leading cause of permanent disability. Our country is in an earthquake zone and due to our dense population and the multitude of other negative factors that cause amputation, there are many amputee individuals in our country. It will be important to carry out rehabilitation applications through telerehabilitation. However, it will be important to determine how the effect is determined in studies and present it to clinicians.

METHODS

Participant or population Persons with lower extremity amputation.

Intervention Telerehabilitation models can include telemedicine, video conferencing, SMS, mobile application, using a website, email, DVDs, or other comparable media.

Comparator No intervention or usual care.

Study designs to be included Randomized controlled trial, non-randomized observational interventional studies.

Eligibility criteria Inclusion Criterias: Over 18 year age , individuals with unilateral lower extremity amputation, English studies and full text published ;Exclusion Criteria: Case report, orthopedic or neurological problems in the intact lower or upper extremity.

Information sources MEDLINE, PubMed, Scopus(Elsevier), Web of Science (WOS) will searched for literature published June 2024.

Main outcome(s) ICF frames parameters and health related quality of life.

Quality assessment / Risk of bias analysis Two reviewers (S.Y. and M.K.G.) independently assessed risk of bias by version 2 of the Cochrane risk-of bias tool (RoB 2 tool) for randomized trials and ROBINS-I (Risk Of Bias In Non-randomised Studies - of Interventions) for non-randomized observational interventional studies within studies. Participant blinding to group allocations in telehealth intervention studies pose a significant challenge; hence, we will discuss whether the knowledge of group allocation may affect participants' behaviors.

Strategy of data synthesis The quality of the body of evidence for each outcome will be determined by two assessors according to the Grading of Recommendations Assessment, Development and Evaluation (GRADE) rating.

Subgroup analysis No subgroups identified yet.

Sensitivity analysis To assess the robustness of the conclusions, studies with lower methodological quality and greater risk of bias will be excluded.

Language restriction English.

Country(ies) involved Turkey.

Keywords Amputees; ICF; Telerehabilitation.

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