

RECRUITING IN-PATIENTS WITH STROKE TO A FALL-PREDICTION STUDY ON DISCHARGE TO THE COMMUNITY.

A. Ashburn, D. Hyndman

Neuro-Rehabilitation Research Group, University of Southampton.

Retrospective evidence suggests that 88% of people with a stroke living in the community have nearly fallen, 50% have fallen and 24% have fallen repeatedly (Hyndman et al. 2002). We aimed to recruit 200 people with stroke to an ongoing *prospective* fall-prediction study, basing our recruitment estimate on the number of patients with stroke admitted to the local General Hospital each year, approximately 430.

We identified consecutive patients through admission records. They were recruited via clinicians if they had a confirmed diagnosis of stroke, had previously been mobile, passed a cognitive screening test and were about to be discharged to the community. Assessment took place on discharge, with follow-ups at six and twelve months.

Over a fifteen month recruitment period, 353/512 people admitted with stroke (69%) were ineligible for the study for reasons including death, unconfirmed diagnosis, withholding of medical consent, cognitive impairment, not discharged in time and discharge to nursing home. Therefore, only 159 (31%) were invited to participate: as 34 declined, only 125 (24%) were recruited. Data collection is ongoing: at six months, 15/125 participants (12%) have been lost to follow-up due to death (5), illness (6) and withdrawal of consent (4).

Fewer patients were eligible for the study than was estimated. The conclusion to be drawn is that power calculations based on *admission rate* (i.e. following convention and using the previous year's data, adjusted for anticipated ineligibility and drop-outs) can be inadequate. Rate of *discharge to the community* would have been more informative to us but, unlike admission rate, this data is not available in many cases. Our findings will allow researchers to make more informed power calculations and recruitment estimates for future studies.

The authors acknowledge grant support from The Stroke Association.

References

Hyndman D., Ashburn A., Stack E., (2002) Fall events among people with stroke living in the community: Circumstances of falls and characteristics of fallers. *Archives of Physical Medicine and Rehabilitation* 83/2: 165-70.