



RECRUITING INFANTS AND TODDLERS WHO HAVE HAD A STROKE

Who is eligible?

Your infant or toddler may be eligible if he or she:

- Had a stroke very early in life
- Shows motor weakness or poor movement control on one side (hemiparesis)
- Will be between 8 and 36 months old when treatment is received

Program staff can speak with you to review all eligibility requirements in detail.



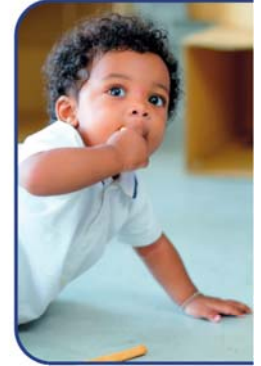
What therapy is being offered?

I-ACQUIRE, a form of constraint-induced movement therapy (CIMT), is being evaluated—in two dosages—compared to typical treatments for children with hemiparesis; such as one hour weekly each of occupational therapy and physical therapy. Both dosages involve therapy five days a week for four consecutive weeks, provided by a therapist trained in I-ACQUIRE.

I-ACQUIRE therapy involves:

- A cast for your child's 'unaffected' arm and hand
 - Your child wearing the cast for 3½ weeks
- (for the last three days of therapy, the cast is removed and the therapy is bimanual)
- Parents participating in one session a week and completing about 45 minutes home practice each day

The cast is judged to be clinically safe, and is removed once a week to check that everything is okay.



Therapy Groups

Participants will be in one of three groups:

Group 1: I-ACQUIRE 6 hrs daily, 5 days a week, for 4 weeks

Group 2: I-ACQUIRE 3 hrs daily, 5 days a week, for 4 weeks

Group 3: Continue current therapy

6 months later participants in Group 3 will be able to receive I-ACQUIRE therapy (dosage randomly assigned by the study).

Families will sign an agreement when they enroll to accept the therapy group assigned and attend all three required assessments.



Where is therapy provided, and is there a cost?

Therapy is provided at 12 different sites across the United States. Therapy is provided in your home, a homelike setting such as an Air BnB (for families who will relocate to a site), or a child-care center or early intervention program that your child attends.

Therapy is provided at no cost. However, if traveling for therapy, you will need to pay for housing and travel to all three assessments.

More information regarding housing options and scheduling assessments will be made available upon request.

We hope you will consider participating in the study. The findings will be helpful to doctors, therapists, and families. The treatment may benefit your child, but it is possible some children will benefit more than others and some may not show benefits.

To learn more about the I-ACQUIRE study, please contact us.

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www.nihstrokenet.org/i-acquire