Cognition and Affect after Stroke: Prospective Evaluation of Risks (CASPER)

Principal Investigators

Sebastian Köhler, Pauline Aalten, Frans Verhey
Contact: Seb Köhler
School for Mental Health and Neuroscience,
Department of Psychiatry and Neuropsychology,
Maastricht University, The Netherlands.
s.koehler@maastrichtuniversity.nl

Summary

Country	The Netherlands
Principal Investigators	Seb Köhler, Pauline Aalten, Frans Verhey
Contact person (email)	s.koehler@maastrichtuniversity.nl
Key publication/reference	Douven et al. BMC Neurology 2016; 16:65
Years in which study conducted	2013-2016
Sample	
Size	250
Population: Hospital/community	Hospital
Selection: consecutive/random	Consecutive
Admit with previous stroke?	Yes, if fully remitted, no residual symptoms
Admit with TIA?	Yes
Age range	40+
Number of centres	1
Control group: number, population, selection	None; cognition data are z-scores based on norm groups for age, gender and education from the Maastricht Aging Study
Assessment	

Initial: Time and data collected/tests administered	3m after index stroke (baseline)
Detailed	3m after index stroke (baseline)
Subsequent (follow-ups)	6m after baseline (9m after stroke), 12m after baseline (15m after stroke)
Stroke-related data	Location, severity, volumetry
Functional tests/data	Barthel (ADL), Lawton (IADL), SS-QoL,
Other medical tests/data	MedHx; VRF; Immune function and inflammation (e.g. hsCRF, IL-6, TNF-a, sICAM, sVCAM, sE/sP-selectine); tHcy, folate, vit B12; standard lab; DNA buffycoats (e.g. ApoE, ACE, MTHFR); PAXgene tubes (RNA)
Neuropsychological tests	MMSE, Rey 15 Word Verbal Learning Test, Digit Span, Digit Substitution Test, TMT A and B, BADS Zoo & Key Search, Verbal Fluency, Clock drawing, Star cancellation, Boston Naming Test, Dutch Adult Reading Test
MRI scans, when and how many	Yes (3T; T1, T2, T2*/DWI, SWI, FLAIR) at baseline, with volumetry for stroke lesion (manual), WML (semi-auomatic, Rotterdam pipeline), hippocampus (LEAP); Fazekas and MTA visual rating scales
PET scans	No
Psychiatric exams/diagnoses	DSM-IV depression (MINI), dementia, NPI, MADRS, HADS, AES, Fatigue Severity Scale, NEO-FFI (personality)
Intervention trialled?	No

CT=computed tomography scan, MedHx=medical history, VRF=vascular risk factors (hypertension, diabetes, atrial fibrillation, obesity, smoking etc.), NΨ=neuropsychological, TIA=transient ischemic attack, m=month, y=year