Adjustment post-stroke and aphasia: protocol for the SUpporting well-being through PEeR-Befriending (SUPERB trial)

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Background and aims: Stroke and aphasia can have a profound impact on people’s lives. There is a need to systematically evaluate interventions that aim to improve psychosocial wellbeing for people with stroke and aphasia, who are often excluded from stroke studies. SUPERB will evaluate the feasibility of a study on the clinical and cost-effectiveness of one-to-one peer befriending for people with aphasia post-stroke and provide the necessary parameters to plan a definitive trial.

Methods: Design: Single blind, mixed methods, parallel group phase II RCT comparing peer-befriending vs. usual care, starting at discharge from hospital. The design has been informed by the MRC framework for complex interventions. The study will deliver on four work packages: development phase; RCT; qualitative study; economic evaluation. Participants (n=60) will be assessed three times up to 10 months post-randomisation.

Results: We will assess feasibility of recruitment to a definitive trial (proportion screened who meet criteria; proportion who consent; rate of consent); participant, significant other, peer befriender views on acceptability of procedures (qualitative study); number of missing/incomplete data on outcome measures; attrition rate at follow-up; potential value of conducting main trial using value of information analysis (economic evaluation); description of usual care; intervention fidelity of peer-befriending. Patient-reported outcomes will include mood, confidence, participation, social support, quality of life.

Conclusion: This study will provide evidence for one-to-one peer befriending; and provide the necessary parameters and information to plan a definitive trial. Peer befriending is worth exploring as it has the potential, pending positive outcomes of a definitive trial, to improve service provision for people with stroke and aphasia.