

ATTV Intervention Results Table

Author, Year, Country, Design, PEDro score, Rating	Sample Size	Intervention	Outcomes and significance: (+) significant (-) not significant
<p>Nelson et al., 2000</p> <p>United States</p> <p>RCT</p> <p>4/10</p> <p>Fair quality</p>	<p>N = 37 preterm infants</p> <p>Age at enrollment: 33 weeks post conceptional age</p> <p>CP diagnosis: 10/18 (55%)</p> <p>CP Type: N/A</p> <p>GMFCS Level: N/A</p>	<p>Auditory-Tactile-Visual-Vestibular Intervention + routine care (n=21)</p> <p>vs.</p> <p>Routine care (n=16)</p> <p><u>Intervention details:</u></p> <p><i>Auditory-Tactile-Visual-Vestibular Intervention:</i></p> <ul style="list-style-type: none"> • 15 minutes, 2x/daily, 5x/week • Intervention began in hospital at 33 weeks postconceptional age and continued after discharge in the home until 2 months corrected age <p>Multisensory stimuli:</p> <ul style="list-style-type: none"> • Auditory stimuli via a female human voice • Tactile stimuli administered as light stroking • Visual stimuli involving eye to eye contact • Vestibular stimulation consisting of rhythmic rocking • The stimuli began with 10 minutes of light massage followed by 5 minutes of rocking. The whole 15 minutes the 	<p>At post-treatment (2 months):</p> <p><i>Mother-infant interaction:</i></p> <p>(-) Dyadic Mutuality Code</p> <p>(-) Nursing Child Assessment Feeding Scale (NCAFS): Maternal behaviors (MB) – sensitivity to cues</p> <p>(-) NCAFS: MB – response to distress</p> <p>(+) *NCAFS: MB – social emotion growth fostering</p> <p>(+) *NCAFS: MB – cognitive growth fostering</p> <p>(-) NCAFS: Infant behaviors (IB) – clarity of cues</p> <p>(+) *NCAFS: IB – infant responsivity</p> <p>(+) *NCAFS: Summary scores (SS) – maternal behavior scale</p> <p>(-) NCAFS: SS – infant behavior scale</p> <p>(-) NCAFS: SS – total scaled behavior</p> <p>At follow-up (4 months of age):</p> <p><i>Mother-infant interaction:</i></p> <p>(-) Dyadic Mutuality Code</p> <p>(-) NCAFS: MB – sensitivity to cues</p> <p>(-) NCAFS: MB – response to distress</p> <p>(+) *NCAFS: MB – social emotion growth fostering</p> <p>(-) NCAFS: MB – cognitive growth fostering</p> <p>(-) NCAFS: IB – clarity of cues</p> <p>(-) NCAFS: IB – infant responsivity</p> <p>(-) NCAFS: SS – maternal behavior scale</p> <p>(-) NCAFS: SS – infant behavior scale</p> <p>(-) NCAFS: SS – total scaled behavior</p>

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		<p>research assistant talked to the infant and tried to maintain eye-to-eye contact.</p> <ul style="list-style-type: none"> • The stimulation was continuously adapted in response to infant behaviour and psychological cues (ex: if infant showed negative response to a stimuli it was discontinued and the next portion was initiated) • Infants received intervention from a research assistant who was trained to criterion on the intervention • Mothers were trained to criterion prior to the infants' discharge home and monitored through self-report for compliance <p><i>Routine care :</i></p> <ul style="list-style-type: none"> • Stress reduction program: reduction of environmental stress (decrease sound and light) and facilitate both sleep cycles and motor development. • Parents were given a home program of physical therapy intervention. It was updated as needed as infant matured 	<p>Note: * Favoring routine care vs. intervention</p> <p>At follow-up (12 months of age):</p> <p><i>Infant development:</i></p> <p>(-) Bayley scales of Infant development (BSID): Mental developmental index (-) BSID: Psychomotor developmental index</p>