Oculomotor rehabilitation in concussion/mild traumatic brain injury: A systematic review M. Biscardi^{1,2}, Z. Grossinger¹, M. Bayley^{1,2}, A. Colantonio^{1,2}, T. Molayeva^{1,2}

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Background

- Up to 85% of people with a concussion/mild traumatic brain injury (mTBI) experience persistent symptoms related to oculomotor dysfunction
- The efficacy of oculomotor-based interventions for adults with concussion/mTBI, and any sex/gender-based differences in response to these interventions, are currently
- unknown

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Sex refers to **biological attributes** of humans; gender refers to socially constructed roles, responsibilities, identities and behaviors of men, women, and gender-diverse people

Objectives

This systematic review aimed to:

- 1. Synthesize and critically appraise evidence on the efficacy of oculomotor-based interventions in adults with concussion/mTBI
- 2. Apply a sex and gender lens to analyses / reporting
- 3. Identify direction for **future research**

Methods

Table 1: Study Selection via PICOS framework

Population	Adults recovering from concussion/mTBI
Intervention	Oculomotor-based, non-pharmacological
Comparator	Any comparator, placebo, no treatment
Outcome	Oculomotor metrics, (adverse events- no
Study Design	Experimental study

Registration PROSPERO: CRD42022352276

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Results (preliminary)

Figure 1 shows steps taken in the research process

Screen initial 7,731 citations

31 studies retrieved for full review

Limited to 8 studies meeting PICOS criteria

Quality assessment of included studies

Tabulation of individual studies and analysis

Figure 2 shows Risk of Bias across all studies (% studies per domain)

Participation

Attrition

Intervention Description

Outcome Measurement

Confounding

Analysis & Reporting

25

50

Table 2 shows selected results, variance in outcome assessed

	-		-	-
Study Variable	1	2	3	
Days (per wk)	varied	1	1	
Time (mins/day)	varied	60	40	(
Duration (wks)	varied	3-6	4.5	1
NPC (cm)	1	1	-	
RR (wpm)	-	-	-	
VSAT (score)	-	-	-	

*mins=minutes; NPC=near point convergence; RR=reading rate; VSAT=visual search and attention; wks=weeks; wpm=words per minute



report)



6 8 2 45 45 60 45 3.6 6 10 6 6

1. There exists a trend suggesting a benefit of oculomotor**based interventions** in persons with concussion/mTBI however their utility versus standard care remains unknown 2. The influence of sex and gender remains a giant gap that

- must be explored

REFERENCES: 1. Gallaway et al (2017), 2. Moller et al.(2020), 3. Scheiman et al.(2017), 4. Smaakjaer et al (2022), 5. Peters et al.(2017), 6. Thiagarajan et al.(2013), 7. Thiagarajan et al (2015). 8. Yadav et al (2014)





3. Future directions: A randomized controlled trial is required to determine if (1) oculomotor-based rehabilitation is more effective than usual care and (2) early intervention improves outcomes

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