



# Neurological examination and EDSS training for research: The Oxford MS Trials Unit Experience

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## Introduction

One of the most common outcome measures in Multiple sclerosis (MS) trials is the 'expanded disability status scale' (EDSS)(1), usually performed by a blinded assessor, who is different from the trial treating physician. The Oxford MS trials unit EDSS's were previously performed by research fellows and registrars whose stay within the trials unit varied from 6 months to 3 years. This led to continuity issues for EDSS assessments and issues with assessors availability.(2)

## Objective

The lead consultants of the MS trials unit decided to enhance the consistency of EDSS scores and the availability of EDSS assessors through training the clinical research nurses within the unit.

## Method

The clinical research nurses underwent a six week training programme lead by the neurology research consultants, which included improving knowledge of neuroanatomy and its direct link to the neurological examination, guiding participant examination and assessment of patient's clinical signs from neurological descriptions.(3)

We designed a questionnaire for both nursing staff and previous EDSS assessors to gain an insight into their experiences of EDSS within clinical trials; which provided interesting comments:

Patients would have to wait for EDSS assessments as assessor had other commitments

The intra-rater reproducibility of EDSS score is known to be low even between expert raters.

A nurse also requires training in performing a neurological exam

With the appropriate training it is a great skill for nurses to have.

Two of the clinical research nurses undertook the Neurostatus test and now contribute to the examination of participants. There is now a consistent approach to assessment of trial participants. EDSS research nurse training helped overcome challenges of varying EDSS assessors and their availability.

## Discussion

From feedback within the questionnaires the challenges include ensuring that nurses are competent in assessing patients, as a trials group we have a number of years experiences within neurology. The course developed may therefore require additional knowledge to ensure that when a nurse undertakes an EDSS they understand the implications of the scores.

## Conclusion

There is a plan in place to roll out an education program to other clinical research and specialist nurses on neurological examination and EDSS, which intends to improve the overall patient experience both within clinical trials and the clinical area. We would also like to analysis the feedback further and present in a journal.

## References:

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