



Development of a Hand Assessment for Multiple Sclerosis (HAMS)

Luisa Johnson Bkin, MOT Student, Lauren Braun BSc, MOT Student, Sinéad Hynes PhD, BSC(Hons) OT, Susan Forwell PhD, OT(C), FCAOT
University of British Columbia, Department of Occupational Science and Occupational Therapy & MS Clinic

Background

Impaired hand function (1,2,3,4) in MS includes:

- deficits in grip strength, coordination, and sensation.
- difficulties with daily activities such as work, meal preparation, and dressing.
- affecting ability to participate in occupations of productivity and leisure, and impact one's independence and quality of life (5,6).

The Need

- ❑ A priority is to support people to engage in meaningful chosen occupations.
- ❑ **There is currently no MS-specific performance-based hand assessment.**
- ❑ A specific, sensitive assessment will aid in tailoring interventions appropriately.

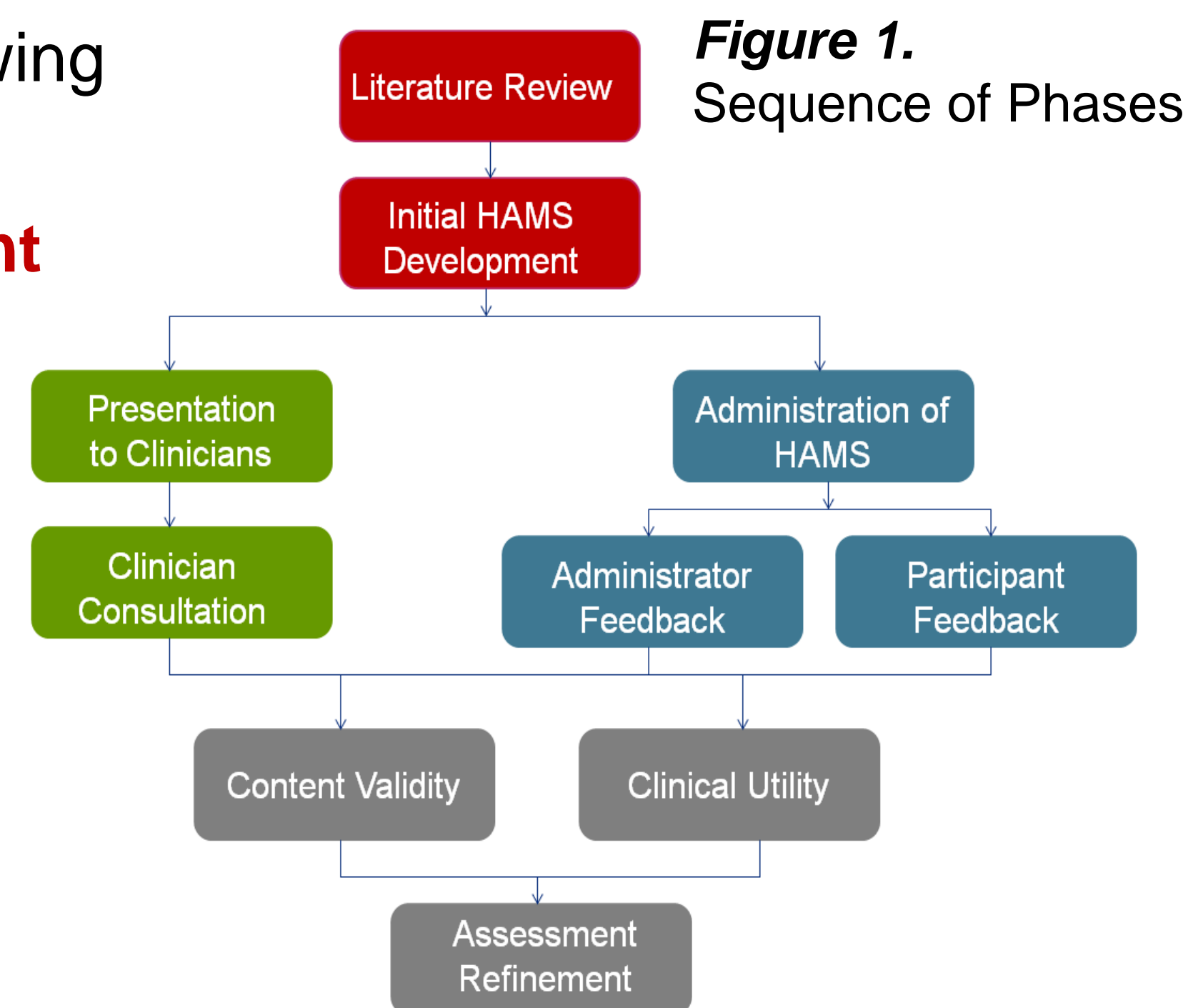
Research Questions

1. What would a hand assessment include for use in MS?
2. Does this hand assessment have clinical utility & content validity?

Research Design

This study involved the following phases (Figure 1):

1. **Assessment development**
2. **Consultation**
3. **Manual use & tool administration**
4. **Analysis**



Development of the HAMS

1. **Assessment Development**
 - Literature review using CINAHL, Medline, Embase, Google Scholar to:
 - identify hand deficits in MS & methods of functional hand assessment.
 - Based on this, the 1st version of the HAMS was developed.
2. **Consultation Phase**
 - Recruited occupational therapists at an information session & snowball.
 - Feedback gained through an anonymized survey. Example of questions:
 - Does the HAMS capture sensation, coordination and vibration?
 - Is the assessment easy to follow and organized logically?
 - Was the administration, equipment & assessment flow appropriate
3. **Administration Phase**
 - Recruited persons with MS to do a HAMS evaluation & provide feedback.
 - Feedback gained through an anonymized survey. Example of questions:
 - Does the HAMS accurately measure what it is intended to?
 - Are the HAMS directions easy to understand?
4. **Analysis**

Upon analyzing clinical utility & content validity data - HAMS was refined.

Results

Research question #1: What does the HAMS include? (Figures 2 & 3)

- Focus is on the activities that persons with MS want to engage in through the use of their hands.
- 5 components: 1 self response; 1 interview; 2 physical assessment; 1 summary & recommendations.
- Physical Assessment includes observation (wounds, atrophy, redness, swelling, contracture, involuntary movement), strength, sensation, coordination, and vibration.

Figure 2. Hand Assessment for Multiple Sclerosis (HAMS)

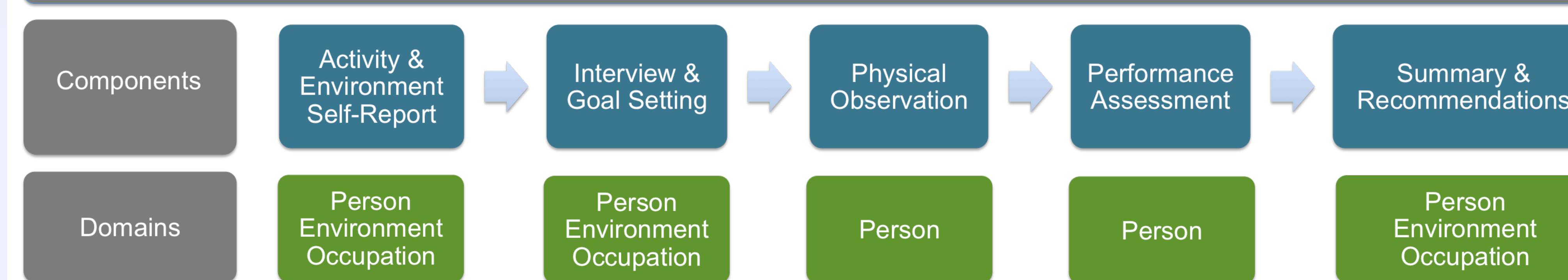


Figure 3. Equipment

- Dynamometer
- Pinch gauge
- 9-Hole Peg Test
- Stereognosis kit
- Semmes-Weinstein Monofilaments
- Tuning fork

Research question #2: Evaluating clinical utility and content validity

Participant group: Occupational Therapists (OTs)

CLINICAL UTILITY:

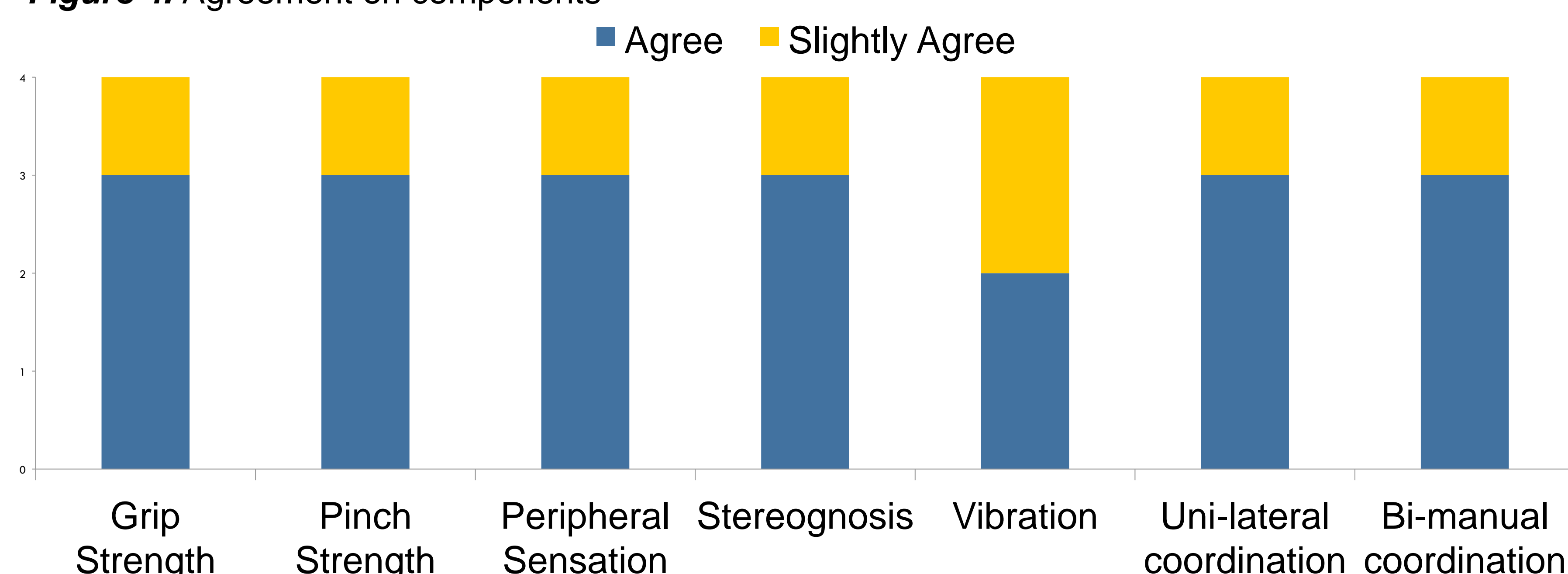
- OTs agreed that the HAMS:
- equipment was appropriate (Figure 3)
 - was feasible to administer in 60 minutes.

CONTENT VALIDITY:

- OTs agreed that the HAMS:
- captured information about performance components (Figure 4)

Participants also suggested the activities of driving, putting on/off jewelry, and tying shoes be added to the Self-Report Questionnaire.

Figure 4. Agreement on components



Characteristics of OTs	n
Consenting	5
Completing Survey	4
Gender	
Female	4
Male	0
Yrs of Experience (avg)	21
Practice Setting	
Rehabilitation	2
Neuromuscular	1
Outpatient	1

Research question #2 (continued):

Participant: Person with MS

Participant Characteristics

- Female with Relapsing Remitting MS (1989).

CLINICAL UTILITY:

The participant agreed that the HAMS:

- questionnaire was easy to understand and fill out.
- results would help a therapist plan her treatment.
- administration time was appropriate.

Participant noted that she experienced some hand fatigue at the end of the assessment.

CONTENT VALIDITY:

The participant agreed that the HAMS:

- questionnaire captured the activities where she experiences difficulties with her hands.
- allowed her to set goals that were accurate and specific to what she wanted to work on and reflected her strengths and difficulties.

Future Steps

- Continued recruitment of participants with MS.
- Refine HAMS based on participant feedback.
- Based on present results:
 - the Self-Report Questionnaire will include additional activities.
 - the Administration Handbook will be refined to increase clarity.
- An instructional video will be created.
- Evaluation of HAMS reliability and validity clinicometrics.

References

1. Guclu-Gunduz, Arzu, et al. "Upper extremity function and its relation with hand sensation and upper extremity strength in patients with multiple sclerosis." *NeuroRehabilitation* 30.4 (2012): 369-374.
2. Reilmann, R., et al. "Grasping multiple sclerosis: do quantitative motor assessments provide a link between structure and function?" *Journal of neurology* 260.2 (2013): 407-414.
3. Bonzano, Laura, et al. "Quantitative assessment of finger motor impairment in multiple sclerosis." *PloS one* 8.5 (2013): e65225.
4. Chen, C. C., Kasven, N., Karpatkin, H. I., & Sylvester, A. (2007). Hand strength and perceived manual ability among patients with multiple sclerosis. *Archives of physical medicine and rehabilitation*, 88(6), 794-797
5. Månsson Lexell, Eva, Susanne Iwarsson, and Jan Lexell. "The complexity of daily occupations in multiple sclerosis." *Scandinavian journal of occupational therapy* 13.4 (2006): 241-248.
6. Lamers, Ilse, et al. "Upper limb assessment in multiple sclerosis: a systematic review of outcome measures and their psychometric properties." *Archives of physical medicine and rehabilitation* 95.6 (2014): 1184-1200.

Acknowledgements

This research is funded in part by a National MS Society
Post doctoral Fellowship Award #MB 0016.