

ODP Portfolio Analysis: Data Snapshot

Pathways to Prevention (P2P) Workshop: Can Physical Activity Improve the Health of Wheelchair Users?

Introduction

The <u>Pathways to Prevention (P2P) Workshop: Can Physical Activity Improve the Health of</u> <u>Wheelchair Users?</u> was convened in December 2020 to assess the available scientific research on the benefits of physical activity interventions for people at risk of using, or currently using, wheeled mobility devices (e.g., wheelchairs, scooters, walkers, rollators) as a result of a disabling injury or illness. The goals of the workshop were to synthesize evidence, identify research gaps, shape a research agenda, and develop an action plan to move the field forward. Published products from the workshop include the <u>independent panel's report</u>, <u>systematic</u> <u>evidence review</u>, and <u>Federal Partners Meeting report (PDF)</u>.

Purpose

A portfolio review was conducted during fall 2020 as part of the National Institutes of Health's (NIH's) assessment of current agency support and informed by NIH subject matter experts. The review describes and evaluates research projects funded by NIH that are related to the P2P workshop topic. Aims of the review were to quantify and characterize current research activities, inform the identification of potential research and funding gaps, and provide a baseline to measure against future progress.

Methods

New NIH research projects (Types 1, 2, and 9) funded from fiscal years 2016–2020 (FY16–20) were identified using NIH RePORTER based on related keywords such as "physical activity," "exercise," "mobility exercise," and/or "disability exercise" in relation to "wheelchair users" within defined populations including those diagnosed with multiple sclerosis, spinal cord injury, cerebral palsy, paraplegia, stroke, muscular dystrophy, and Parkinson's disease.

Project titles and abstracts were screened for relevance and included in the final data if they focused on developing, testing, or assessing the impact of physical activity interventions in the defined populations (e.g., people with multiple sclerosis at risk for or currently using a wheeled mobility device). Research projects were excluded if they included basic research, medication interventions, observational studies, or ineligible grant types (including intramural, career development, and infrastructure awards). Relevant projects were manually screened and validated internally by Westat coders, Office of Disease Prevention staff, and NIH subject matter experts to ensure relevance to the research topic.

The funding and number of new NIH projects were broadly summarized across NIH Institutes and Centers to assess and develop a baseline of relevant research.

Results and Summary of the Data

- From 2016 to 2020, the annual number of relevant projects increased from four to nine per year.
- The initial search yielded approximately 980 new projects, of which 27 (2.8%) were determined to be directly relevant to this P2P workshop.
- Six NIH Institutes and Centers supported 27 new relevant research projects with funding totaling \$38,611,970, with the majority of support provided by the *Eunice Kennedy Shriver* National Institute of Child Health and Human Development and the National Institute on Neurological Disorders and Stroke.

Implications

Review of the NIH research portfolio found that fewer than 30 new projects were funded over the last five years that developed, tested, or assessed the impact of physical activity interventions for people at risk of using, or currently using, wheeled mobility devices because of a disabling injury or illness. These results are similar to previous portfolio analysis findings indicating an overall lower representation of prevention interventions focusing on people with disabilities when compared with other study designs like observational studies or analysis of existing data.¹

This summary of NIH's FY16-20 portfolio represents a baseline that will be used to measure future progress as the <u>P2P workshop's independent panel recommendations (PDF)</u> are implemented to address this critical research need.



New NIH-Funded Projects by Fiscal Year (FY16-20)

Funding by NIH Institutes and Centers (FY16–20)

NIH Institutes and Centers	Number of Projects	Total Cost
<i>Eunice Kennedy Shriver</i> National Institute of Child Health and Human Development (NICHD)	17	\$16,980,580
National Institute of Neurological Disorders and Stroke (NINDS)	6	\$19,563,959
National Institute of Diabetes and Digestive and Kidney Diseases (NIDDK)	1	\$1,313,597
National Institute of General Medical Sciences (NIGMS)	1	\$306,084
National Institute on Aging (NIA)	1	\$225,000
National Institute of Nursing Research (NINR)	1	\$222,750
Grand Total	27	\$38,611,970

New NIH Projects Relevant to the Wheelchair Users P2P Workshop (FY16–20)

Project Number	Project Title
F31HD097903	Restless legs syndrome and physical activity in adults with multiple sclerosis
F32HD101214	Development of a wheelchair exercise training program for persons with multiple sclerosis using a community-engaged research approach
K23HD101667	Aerobic exercise to improve mobility in multiple sclerosis: optimizing design and execution for a full-scale multimodal remyelination clinical trial
R01HD083384	Daily and Weekly Rehabilitation Delivery for young children with Cerebral Palsy (DRIVE Study)
R01HD085930	Ischemic Conditioning as a Neurorecovery Agent for Stroke
R01HD090126	Effect of vibration on muscle properties, physical activity and balance in children with cerebral palsy
R01HD091155	Treadmill Walking Exercise Training Effects on Cognition and Brain Function in Multiple Sclerosis: A Systematically-Developed Randomized Controlled Trial
R01HD093724	Multimodality Intervention to Improve Function and Metabolism in Spinal Cord Injury
R01HD097407	An exercise intervention to Reduce Neuropathic Pain and Brain Inflammation after Spinal Cord Injury

Project Number	Project Title
R01HD098270	Short-Burst Interval Treadmill Training to Improve Community Walking Activity and Mobility in Cerebral Palsy
R01HD100383	Mobility in Daily Life and Falls in Parkinson's Disease: Potential for Rehabilitation
R01HD100544	Priming with High-Frequency Trans-spinal Stimulation to Augment Locomotor Training Benefits in Spinal Cord Injury
R01HD101900	Evaluation of the Efficacy of a Physical Therapy Intervention Targeting Sitting and Reaching for Young Children with Cerebral Palsy
R03HD094583	Pediatric Gait Rehabilitation Via Wearable Robotic Assistance
R03HD097727	NEO rehab program for premature infants at risk for cerebral palsy
R21HD087840	Post-PT Extension of In-Home Dynamic Standing Table Use in Parkinson Disease
R44HD097803	FitMi Plus: Smart Functional Modules for Practicing Activities of Daily Living after Stroke
R01NS100810	Closed loop control of vibration for muscle spasms after human spinal cord injury: efficacy and mechanism
R01NS114279	Characterization of Physiological Changes Induced Through MEP Conditioning in People with SCI
R21NS118764	Imaging Biomarkers of Exercise-Induced Brain Changes in Parkinson's Disease
R44NS110237	Enhancing Physical Therapy with Brain Stimulation for Treating Postural Instability
U01NS106655	Perinatal Arterial Stroke: A Multi-site RCT of Intensive Infant Rehabilitation (I-ACQUIRE)
U01NS113851	Study in Parkinson Disease of Exercise Phase 3 Clinical Trial: SPARX3
R01DK116669	Weight management for adults with mobility related disabilities
P20GM113125	Interventions to improve cardiovascular health and fitness and walking function and activity after stroke
R43AG064990	MiGo-Wheels: A comprehensive feedback system to help wheelchair users maintain a healthy lifestyle
R21NR019309	Telehealth high intensity interval exercise and cardiometabolic health in spinal cord injury

References

 Oyedele NK, Ganoza LF, Schully SD, Liggins CA, Murray DM. <u>NIH Primary and Secondary</u> <u>Prevention Research in Humans: A Portfolio Analysis of Study Designs Used in 2012-2019</u>. Prevention Science. 2022;23(4):477-487. doi: 10.1007/s11121-022-01337-9. PMID: 35064895.

Additional Information

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