

An RCT assessing the effects of varying exposure times of therapeutic communication robots on dementia in group homes in Japan

Kaoru Inoue 1), Mitsunobu Kono 2), Ryuji Kobayashi 3), Takanori Shibata 4), Chiyomi Yatsu 1), Daryl Patrick Gamboa Yao 5), Masahiro Shigeta 6)
 1) Tokyo Metropolitan University, 2) Kinjo University, 3) Hyogo Medical University, 4) National Institute of Advanced Industrial Science and Technology, 5) University of Illinois at Chicago and 1), 6) The Jikei University School of Medicine



Background:

- Japan faces challenges with an aging population and a shortage of caregivers.
- There is keen interest in communication robots like PARO for dementia care.
- In the U.S., PARO has been approved as a medical device.
- Considering clinical usage of PARO in Japan, current scarcity for strong evidence such as RCT hopes to aid in effective application.

Methods:

- Cluster randomized trial where group homes were assigned to use PARO either once a week or three times a week for one-hour sessions.
- PARO was placed in communal areas for participants to interact with freely, with no caregiver encouragement.
- Changes in BPSD severity and caregiver burden were assessed using a linear mixed model, with primary outcomes measured using the Neuropsychiatric Inventory brief Questionnaire (NPI-Q).

Results:

- 91 participants were recruited, with 85 included in the analysis.
- The group using PARO three times a week showed improvement in severity scores post-intervention, but differences between once-weekly and three-times-weekly groups were not statistically significant.
- Caregiver burden score significantly improved in the three-times-weekly group compared to the once-weekly group.

Conclusions:

- Using PARO once a week for one month did not significantly affect BPSD severity or caregiver burden. Three times a week usage reduced caregiver burden significantly. –
- Improvement in the severity score was clinically valuable but statistically not significant, suggesting a need for longer intervention periods.
- Short-term use of PARO may reduce caregiver burden and potentially enhance care quality in group homes.

Table 1. The Baseline demographic and clinical characteristics for each group

		Once weekly group (n=53)	Thrice weekly group (n=32)
Sex	Female	44	31
	Male	9	1
Age	Youngest	65	78
	Oldest	99	98
	Average	86.8	87.8
	tandard deviation	7.67	4.92
Care level	Care level 1	7	6
	Care level 2	9	10
	Care level 3	20	11
	Care level 4	6	2
	Care level 5	11	3
Level of independence in daily living for the elderly with	I a	0	0
	I b	0	0
	II a	3	0
	II b	17	7
	III a	11	11
	III b	9	6
	IV	12	6
	M	1	0
	J1	0	0
	J2	6	2
Diagnosis	A1	17	15
	A2	11	9
	B1	4	4
	B2	10	2
	C1	1	0
	C2	4	0
Diagnosis	Alzheimer's disease	19	23
	Juvenile-onset Alzheimer's disease	1	0
	Vascular dementia	3	0
	Lewy body dementia	0	2
	Frontotemporal dementia	1	0
Dementia	26	5	
Not known	3	2	

Table 2. Change in outcome measure Pre and post intervention, Comparison between groups (one-weekly VS thrice-weekly group)

	Group A: Once-weekly (n=53)				Group B: Thrice-weekly(n=32)				Difference (Group B - A)		
	LS mean	95%CI	P-value		LS mean	95%CI	P-value		LS mean	95%CI	P-value
NPI Severity Score	Pre	8.428	5.916 , 10.940	-	5.487	2.013 , 8.961	-				
	Post	8.654	6.142 , 11.166	-	3.737	0.263 , 7.211	-				
	Amount of change	0.226	-1.076 , 1.528	0.730	-1.750	-3.426 , -0.074	0.041	-1.976	-4.099 , 0.146	0.068	
NPI Caregiver Burden Score	Pre	9.324	5.641 , 13.006		5.818	0.712 , 10.925					
	Post	9.833	6.150 , 13.516		3.037	-2.070 , 8.144					
	Amount of change	0.509	-1.312 , 2.331	0.579	-2.781	-5.125 , -0.437	0.021	-3.291	-6.259 , -0.322	0.030	

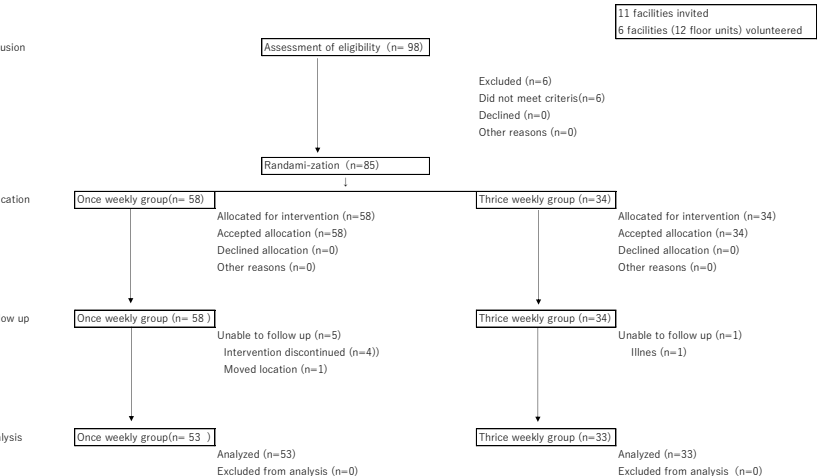


Figure 2. Flow Diagram