

Central Lancashire Online Knowledge (CLoK)

Title	The International Stroke Recovery and Rehabilitation Alliance
Type	Article
URL	https://clock.uclan.ac.uk/46017/
DOI	##doi##
Date	2023
Citation	Bernhardt, Julie, Corbett, Dale, Dukelow, Sean, Savitz, Sean, Solomon, John M, Stockley, Rachel orcid iconORCID: 0000-0003-4441-6860, Sunnerhagen, Katharina S, Verheyden, Geert, Walker, Marion et al (2023) The International Stroke Recovery and Rehabilitation Alliance. <i>The Lancet Neurology</i> , 22 (4). pp. 295-296. ISSN 1474-4422
Creators	Bernhardt, Julie, Corbett, Dale, Dukelow, Sean, Savitz, Sean, Solomon, John M, Stockley, Rachel, Sunnerhagen, Katharina S, Verheyden, Geert, Walker, Marion, Murphy, Margit Alt, Bonkhoff, Anna Katharina, Cadilhac, Dominique, Carmichael, S Thomas, Dalton, Emily, Dancause, Numa, Edwards, Jodi, English, Coralie, Godecke, Erin, Hayward, Kate, Kamalakannan, Sureshkumar, Kim, Joosup, Kwakkel, Gert, Lang, Catherine E, Lannin, Natasha, Levin, Mindy, Lynch, Elizabeth, Mead, Gillian, Saa, Juan Pablo and Ward, Nick

It is advisable to refer to the publisher's version if you intend to cite from the work. ##doi##

For information about Research at UCLan please go to <http://www.uclan.ac.uk/research/>

All outputs in CLoK are protected by Intellectual Property Rights law, including Copyright law. Copyright, IPR and Moral Rights for the works on this site are retained by the individual authors and/or other copyright owners. Terms and conditions for use of this material are defined in the <http://clock.uclan.ac.uk/policies/>

The Lancet Neurology

Introducing the International Stroke Recovery and Rehabilitation Alliance (ISRRRA)

--Manuscript Draft--

Manuscript Number:	
Article Type:	Correspondence
Keywords:	stroke; rehabilitation; recovery; alliance; collaboration
Corresponding Author:	Julie Bernhardt, PhD Florey Institute of Neuroscience and Mental Health Melbourne, AUSTRALIA
First Author:	Julie Bernhardt
Order of Authors:	Julie Bernhardt Dale Corbett Sean Dukelow Sean Savitz John Solomon Rachel Stockley Katharina Sunnerhagen Geert Verheyden Marion Walker Margit Alt Murphy Anna Katharina Bonkhoff Dominique Cadilhac S. Thomas Carmichael Emily Dalton Numa Dancause Coralie English Erin Godecke Kate Hayward Sureshkumar Kamalakannan Joosup Kim Gert Kwakkel Catherine Lang Natasha Lannin Mindy Levin Elizabeth Lynch Gillian Mead Juan Pablo Saa, PhD/ OTD / MPH Nick Ward
Manuscript Region of Origin:	AUSTRALIA

Title: The International Stroke Recovery and Rehabilitation Alliance (ISRRA)

The global burden of post-stroke disability is increasing¹ despite advances in hyperacute and acute therapies. One-in-four adults will have a stroke and 63% of these will be in people under 70 years of age. Stroke is arguably a bigger global health problem than dementia. Increasing access to effective rehabilitation is a recognised global health priority,² particularly in low and middle-income countries (LMIC), with stroke identified in the top 10 areas for priority action. Optimising recovery requires both new, biologically-informed treatment approaches, as well as enhanced (high-dose, high-quality) delivery of training-based treatments that we already know work. Person-centred research priority setting exercises highlight current knowledge gaps and needs.³ Achieving advances has been difficult because stroke recovery and rehabilitation practice is complex; with multiple, interacting domains (e.g., motor, language, cognitive), disability levels (impairment, activity, participation) and individuals involved (patient, family, multi-disciplinary team). Our shared vision is *a world where global collaboration brings breakthroughs for people living with stroke*. Succeeding will require highly coordinated research efforts by international, interdisciplinary teams.

The Stroke Recovery and Rehabilitation Roundtable (SRRR), first created in 2016, and repeated in 2018, built consensus and aligned efforts for step changes in research and practice towards more ambitious goals. Our approach identified priority areas, created international, interdisciplinary, expert task forces who, together with junior faculty, worked over many months to identify and synthesise key concepts and consensus objectives. The approach worked. The recommendations from SRRR I included our first 2017 position paper⁴ and we have continued to create highly cited and impactful work to help guide research methods, research targets and clinical practice (see <https://journals.sagepub.com/page/wso/srrr>). After SRRR II, the need to transition from being a 'recommendation group' to the 'action group' for stroke recovery and rehabilitation was clear. The international Stroke Recovery and Rehabilitation Alliance (ISRRA) was formally endorsed in 2020.

We believe the greatest impact on the burden of post-stroke disability will come through building strong research partnerships that include people with lived experience of stroke. A key Alliance strategy is the establishment and support of topic-specific, strategic working groups, proposed, formed and run by ISRRA members, overseen by our Scientific Committee. Diverse in scope, examples include establishing the economic case for rehabilitation, creating criteria for Centres of Clinical Excellence. Exercise and frailty task forces are recent additions. Building impactful research Flagship projects in both high and LMIC, are a top priority. All working groups work to meet stated goals and objectives. This approach creates a dynamic Alliance that stays focused on achieving our vision. The roundtable process also continues. Consensus papers from SRRR III will be published in 2023.

Our membership includes the full array of clinicians and researchers with an interest in recovery, including acute stroke physicians and basic scientists from 36 countries. Our next step is to formalise the Alliance and continue to build and advocate for game changing research and innovation and the research funding to support these ambitious projects.

ISRRA is here, our Alliance is open to all, and our work has just begun.

<https://strokerecoveryalliance.com/>

References

1. Wafa HA, Wolfe CDA, Emmett E, Roth GA, Johnson CO, Wang Y. Burden of Stroke in Europe: Thirty-Year Projections of Incidence, Prevalence, Deaths, and Disability-Adjusted Life Years. *Stroke* 2020; **51**: 2418–27.
2. Gimigliano F, Negrini S. The World Health Organization "Rehabilitation 2030: a call for action". *Eur J Phys Rehabil Med* 2017; **53**(2): 155-68
3. Leitch S, Logan M, Beishon L, Quinn TJ. International research priority setting exercises in stroke: A systematic review. *Int J Stroke* 2022; doi.org/10.1177/1747493022109.
4. Bernhardt J, Hayward KS, Kwakkel G, *et al.* Agreed definitions and a shared vision for new standards in stroke recovery research: The Stroke Recovery and Rehabilitation Roundtable taskforce. *Int J Stroke* 2017; **12**: 444–50.

Acknowledgments

We thank the many individuals who have contributed to the work of past SRRRs and to the building of the strategy and work plans for the Alliance to date. We gratefully acknowledge the sponsors of our work through grants; NHMRC (Australia) Centre of Research Excellence in Stroke Rehabilitation and Brain Recovery (APP 1077898), Canadian Partnership for Stroke Recovery, NHMRC (Australia) Centre of Research Excellence in Stroke Trials (APP 2015705), Moleac and Ipsen.