TITLE: Dynavision D2 Device for Pediatric Visual-Motor Assessment and Rehabilitation: Clinical and Cost-Effectiveness

DATE: 17 June 2015

RESEARCH QUESTIONS

1. What is the clinical effectiveness of the Dynavision D2 device for pediatric visual-motor assessment?

2. What is the clinical effectiveness of the Dynavision D2 device for pediatric visual-motor rehabilitation?

3. What is the cost-effectiveness of the Dynavision D2 device for pediatric visual-motor assessment or rehabilitation?

KEY FINDINGS

No relevant literature was identified regarding the clinical or cost-effectiveness of the Dynavision D2 device for pediatric visual motor assessment or rehabilitation.

METHODS

A limited literature search was conducted on key resources including PubMed, The Cochrane Library, University of York Centre for Reviews and Dissemination (CRD) databases, ECRI, Canadian and major international health technology agencies, as well as a focused Internet search. No filters were applied to limit the retrieval by study type. Where possible, retrieval was limited to the human population. The search was also limited to English language documents published before June 11, 2015. Internet links were provided, where available.

The summary of findings was prepared from the abstracts of the relevant information. Please note that data contained in abstracts may not always be an accurate reflection of the data contained within the full article.
SELECTION CRITERIA

One reviewer screened citations and selected studies based on the inclusion criteria presented in Table 1.

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<th>Table 1: Selection Criteria</th>
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<td><strong>Population</strong></td>
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<td><strong>Intervention</strong></td>
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<td><strong>Comparator</strong></td>
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| **Outcomes**                | Q1: effectiveness as a visual-motor assessment (e.g., reaction time)  
|                             | Q2: clinical effectiveness (e.g., return to activity after concussion etc.)  
|                             | Q3: cost-effectiveness |
| **Study Designs**           | Health technology assessments, systematic reviews, meta-analyses, randomized controlled trials, non-randomized studies, economic evaluations |

RESULTS

Rapid Response reports are organized so that the higher quality evidence is presented first. Therefore, health technology assessment reports, systematic reviews, and meta-analyses are presented first. These are followed by randomized controlled trials, non-randomized studies, and economic evaluations.

No relevant health technology assessments, systematic reviews, meta-analyses, randomized controlled trials, non-randomized studies, or economic evaluations were identified regarding the clinical or cost-effectiveness of the Dynavision D2 device for pediatric visual motor assessment or rehabilitation.

References of potential interest are provided in the appendix.

OVERALL SUMMARY OF FINDINGS

No relevant literature was identified regarding the clinical or cost-effectiveness of the Dynavision D2 device for pediatric visual motor assessment or rehabilitation; therefore, no summary can be provided.
REFERENCES SUMMARIZED

Health Technology Assessments
No literature identified

Systematic Reviews and Meta-analyses
No literature identified

Randomized Controlled Trials
No literature identified

Non-Randomized Studies
No literature identified

Economic Evaluations
No literature identified

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APPENDIX – FURTHER INFORMATION:

Randomized Controlled Trials – Post-Stroke Assessment and Rehabilitation


Non-Randomized Studies

Post-Stroke Assessment and Rehabilitation


Post-Concussion Assessment in Athletes


Validity and Reliability of Dynavision D2


Review Articles – Driving Rehabilitation in Seniors

Additional References

