



Reply to letter to the editor



Dear Editor

We appreciate the pertinent comments by Shah and colleagues [1] on our paper pertaining to the use of tDCS in acute stroke patients [2]. We hope that this letter will help bring clarification to our paper.

Regarding their first comment on the Lin et al., citation (number 21), we agree that there has been a typo. Lin and colleagues had published two similarly titled papers, one on the Minimal Detectable change for the Wolf Motor Function Test [3], and one for the Stroke Impact Scale [4]. The latter is the one that should have been cited.

Their second comment on using the NIHSS is pertinent, and we agree that this is an important prognostic tool for stroke recovery. We did not use the NIHSS scores in this paper, as the primary goal of the study was not to see if there was a correlation between the initial NIHSS score and the potential recovery effects of tDCS, though we do believe that would have been an interesting analysis. Concerning their comment more specifically, we did not use the NIHSS score as a baseline comparator to ensure homogeneity between the two groups, as we believed our exclusion criteria ensured all patients were conscious as well as being able to comprehend and follow our instructions. The other elements of the NIHSS pertained to motricity and sensory functions, which were tested separately, and the NIHSS would have been redundant.

Another unfortunate typo was, as mentioned, the intensity of stimulation. The intensity was 2mA for all of the sessions. We agree that studies to compare the effects of higher dosages should be continued. It is our personal belief that there is a lot more research to be done on tDCS in the acute stage stroke.

Concerning the adverse effect measurements, we understand the lack of clarity. What we meant by the sentence "Overall, 40 patients (80%) felt a slight tingling([...] "did not require treatment to stop" was that patients reported at least once during the 20 sessions the aforementioned sensations.

Finally, for the last comment, we would like to clarify that only the one mentioned patient had a recurrence of stroke, and therefore was excluded from the final two evaluations. No other patients had recurrent strokes.

We would like to thank the authors again for their meticulousness and help in improving the quality and awareness of our paper. Just as they do, we firmly believe that tDCS has a place in routine stroke rehabilitation alongside conventional therapy, and that the field of acute stroke tDCS is exciting and requires further research.

Declaration of competing interest

The authors declare that there is no conflict of interest. The authors declare that the results of the study are presented clearly, honestly, and without fabrication, falsification, or inappropriate data manipulation.

References

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12 April 2020

Available online 18 April 2020