Results Table Body Weight Supported Treadmill Training

STROKE ENGINE

Author, Year PEDro Score, Country	Sample size	Intervention	Outcome and significance: (+) significant (-) not significant
Ada et al. 2010 PEDro score: 8	8	BWS treadmill training (n=64) vs. Assisted overground walking (n=62) (control) Treatment details : Both groups received 5 x 30-minute sessions per week for up to 6 months	 Within 6 months: (-)* Number of patients to achieve independent walking (-)* Time until independent walking (+) Number of patients who were discharged home * Although no significant differences were found for independent walking, important nonsignificant differences were found in favour of the BWS group.
Barbeau and Visintin, 2003 PEDro score: 6	6	Treadmill training with 10-40% BWS vs. Treadmill training with 0% BWS Patients in the two groups walked for 20 minutes, 4 x per week for 6 weeks.	At post-treatment and at 3 month follow-up: Patients with pre-training overground walking speed of ≤ 0.20 m/s (more impaired): (+) Berg Balance Scale (+) Stroke Rehabilitation Assessment of Movement (STREAM)- lower extremity subscale (+)Over-ground walking speed - 3 metres (+) Over-ground endurance Patients with a pre-training overground walking speed of > 0.20 m/s (less impaired): (-) Berg Balance Scale (-) STREAM- lower extremity subscale (-) Over-ground walking speed - 3 metres (-) Over-ground walking speed - 3 metres (-) Over-ground endurance
da Cunha IT Jr et al. 2001 PEDro score: 4	4	BWS treadmill training vs. over-ground gait training during conventional physiotherapy Both groups received their	At post-treatment: (-) Functional Ambulation Category (-) Gait speed

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		respective interventions for 20 minutes, 5 X per week, 2-3 weeks.	(-) Walking distance (-) Gait energy expenditure
Danielsson et al. 2000 PEDro score: No score	No score	Treadmill walking with 0% and 30% BWS at self-selected speed and maximum speed Trials were performed twice and patients were required to walk for 6 minutes to record VO2 and heart rate.	During intervention : VO2 was lower when walking with 30% BWS as compared to 0% BWS for stroke patients and controls. Heart rate was lower when walking with 30% BWS as compared to 0% BWS for stroke patients and controls
Dean et al. 2010 PEDro score: 8	8	BWS treadmill training (n=64) vs. Assisted overground walking (n=62) (control) Treatment details : Both groups received 5 x 30-minute sessions per week for up to 6 months	At 6 months: (+) 6-Minute Walk Test (-) 10-Meter Walk Test (walking speed and stride length) (-) Self-rated walking perception questionnaires (including Adelaide Activities Profile)
Franceschini et al., 2009 PEDro score: 6	6	Gait training using body weight support on a treadmill (n=52) vs. Conventional overground gait training (n=45) Treatment details : Both groups received 60-minute sessions, 5 days a week for 4 weeks, in addition to conventional rehabilitation	At 2 weeks (mid-treatment): (-) Motricity index (-) Trunk Control Test (-) Barthel Index (-) Functional Ambulation Categories (-) 10-meter Walk Test (-) 6-minute Walk Test (-) Walking Handicap Scale At 4 weeks (post-treatment): (-) Motricity index

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Author, Year PEDro Score, Country	Sample size	Intervention	Outcome and significance: (+) significant (-) not significant
			 (-) Trunk Control Test (-) Barthel Index (-) Functional Ambulation Categories (-) 10-meter Walk Test (-) 6-minute Walk Test (-) Walking Handicap Scale
			At 6 weeks (follow-up): (-) Motricity index (-) Trunk Control Test (-) Barthel Index (-) Functional Ambulation Categories (-) 10-meter Walk Test (-) 6-minute Walk Test (-) 6-minute Walk Test (-) Walking Handicap Scale At 6 months after stroke onset: (-) Motricity index (-) Trunk Control Test (-) Barthel Index (-) Functional Ambulation Categories (-) 10-meter Walk Test
			(-) 6-minute Walk Test (-) Walking Handicap Scale
Hesse et al. 1995 PEDro score: No score	No score (pre-post study)	A-B-A single subject design: BWS treadmill training, regular physiotherapy, then BWS treadmill training again. Patients received 30 minutes of treadmill training and 45 minutes of physiotherapy on a daily basis for 3 weeks.	At post-treatment: (+) Functional Ambulation Category Scale (-) Modified Ashworth Spasticity Scale (-) Rivermead Motor Assessment (RMA-gross function and leg/trunk sections)

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Author, Year PEDro Score, Country	Sample size	Intervention	Outcome and significance: (+) significant (-) not significant
			 (+) Walking speed (-) Muscle strength (-) Ratio of cadence to stride length Both groups improved on RMA at post- assessment but there were no significant differences between them
Kosak et al. 2000 PEDro score: 4	4	BWS treadmill training vs. aggressive bracing assisted walking (ABAW) Treatment sessions consisted of up to 45 minutes, 5 days per week as tolerated for the duration of the inpatient stay or until the patient could walk over- ground unassisted.	At post-treatment: (-) Over-ground walking endurance (-) Over-ground walking speed In a subgroup of patients with poor ambulatory status: (+) Over-ground walking endurance (+) Over-ground walking speed
Ng et al.(2008) PEDro score: 6	6	BWS Electromechanical gait trainer with functional electrical stimulation (GT-FES,n=16) or BWS Electromechanical gait trainer (GT,n=17) vs. Conventional over ground gait training (CT, n=21) All subjects underwent a 20 minute gait training program 1x/day, 5 days per week for 4 weeks in addition to their regular occupational, speech and psychological therapy.	At 4 weeks and 6 months post intervention for GT and GT-FES as compared to CT: (-) Motoricity Index (-) Balance Berg Scale (-) Barthel Index (-) Functional Independence Measure (+) Gait speed (+) Elderly Mobility Scale (+) Functional Ambulatory Category scale (Note: GT showed significance at 6 months only)
Nilsson et al. 2001 PEDro score: 7	7	BWS treadmill training vs.over-ground walking. Treatment for both groups were for 30 minutes, 5 times per week for	At discharge and at 10 month follow-up: (-) Functional Independence Measure (-) Walking speed- 10 meters

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		between 2-19 weeks, depending on when patient was discharged from therapy	 (-) Functional Ambulation Categories (-) Fugl-Meyer Stroke Assessment (-) Berg Balance Both groups improved on all outcome measures at discharge and 10 month follow-up, but there were no significant differences between groups.
Visintin et al. 1998 PEDro score: 6	6	Treadmill training with 10-40% BWS vs. Treadmill training with 0% BWS Patients in the two groups walked for 20 minutes, 4 x per week for 6 weeks	At post-treatment: (+) Berg Balance Scale (+) Stroke Rehabilitation Assessment of Movement (STREAM)- lower extremity subscale (+) Over-ground walking speed - 3metres (+) Over-ground endurance At 3 month follow-up: (-)Berg Balance Scale (+)(STREAM)- lower extremity subscale (+) Over-ground walking speed - 3metres (-) Over-ground endurance
Werner et al. 2002 PEDro score: 7	7	Both groups received BWS with the "gait trainer" (A) and BWS treadmill training (B). Group 1 treatment order was A-B-A and Group 2 treatment order was B-A-B. Intensity and duration of each therapy: 15-20 minutes, 5 times a week, for 2 weeks.	At post-treatment and at 6 month follow-up: (+ post-treatment) Functional Ambulation Categories (for Group 1 but no significant differences at 6-month follow-up) (-) Walking speed- 10 meters (-) Rivermead Motor Assessment: gross function, trunk and leg subscales (-) Modified Ashworth Spasticity Scale

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Author, Year PEDro Score, Country	Sample size	Intervention	Outcome and significance: (+) significant (-) not significant
			Both groups improved on all outcome measures at post-assessment but there were no significant differences between groups