## Participant Information Form

**Project Title**

***Feasibility and Acceptability of Inspiratory Muscle Training in People with Parkinson’s Disease***

**Researcher**

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**Project Aim**

The aim of this project is the investigate whether breathing training (inspiratory muscle training) is a feasible option for people with Parkinson’s disease, and if it is acceptable to people with Parkinson’s disease. The study also aims to see if there is a relationship between any breathing muscle weakness that is found and shortness of breath, quality of life or grip strength.

**Benefits of the Project**

The information gained from this research will help inform the basis of larger trials of breathing training to determine its effectiveness as a treatment. It is important to establish whether this type of training is acceptable by the intended recipients before attempting a larger research project.

**General Outline of the Project**

This project will involve a member of the research team measuring your inspiratory muscle strength (breathing strength), your experience of shortness of breath, your quality of life and grip strength. We will then ask you to participate in 6 weeks of breathing muscle training in your own home. This will require you to do 30 breaths ‘in’ against a resistance, 5 days a week, for 6 weeks. During your 6 weeks, we ask you to fill out a diary of the days you complete the training and how much training you did. We will speak with you once a week to monitor your training and adjust your training level if necessary. At completion of the 6 weeks, we will have a final consultation and re-measure the same elements from the beginning of the trial, and ask you to fill out a questionnaire about your opinions on the breathing training.

If it is not possible to do initial and final consultations face to face due to government Covid19 restrictions, these will be performed via telehealth. We will gather a predicted breathing muscle strength score, and omit the grip strength test. The remaining part of the research will remain the same.

We ask that you participate in all consultations and breathing training sessions in the “ON” period of your medication – about one hour after you have taken the medication.

**Participant Involvement**

Participants who agree to participate in the research will be asked to:

1. Participate in initial consultation: measure maximum inspiratory pressure, shortness of breath, quality of life and grip strength
2. Do daily breathing training sessions at home for 6 weeks (5x6breaths – approximately 10 minutes, 5 days per week) and fill in a diary
3. Speak with a Physiotherapy student once a week about your training
4. Participate in a final consultation: acceptability questionnaire, measure maximum inspiratory pressure, shortness of breath, quality of life and grip strength

Participation in the research is completely voluntary and participants may, without any penalty, decline to take part or withdraw at any time without providing an explanation or refuse to answer a question.

**Confidentiality**

Only the researcher/s will have access to the individual information provided by participants. Privacy and confidentiality will be assured at all times. The research outcomes may be presented at conferences and written up for publication. However, in all these publications, the privacy and confidentiality of individuals will be protected.

**Anonymity**

All reports and publications of the research will contain no information that can identify any individual and all information will be kept in the strictest confidence.

**Data Storage**

The information collected will be stored securely on a password protected computer throughout the project and then stored at the University of Canberra for the required five year period after which it will be destroyed according to university protocols.

**Ethics Committee Clearance**

The project has been approved by the Human Research Ethics Committee of the University of Canberra (HREC – insert number here).

**Queries and Concerns**

Queries or concerns regarding the research can be directed to the researcher and/or supervisor.

Contact details are at the top of this form.

If you have any complaints or reservations about the ethical conduct of this research, you may contact the University of Canberra’s Research Ethics & Integrity Unit team via telephone 02 6206 3916 or email [humanethicscommittee@canberra.edu.au](mailto:humanethicscommittee@canberra.edu.au) or [researchethicsandintegrity@canberra.edu.au](mailto:researchethicsandintegrity@canberra.edu.au)

If you would like some guidance on the questions you could ask about your participation please refer to the Participants’ Guide located at <http://www.canberra.edu.au/ucresearch/attachments/pdf/a-m/Agreeing-to-participate-in-research.pdf>

# Consent Form

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**Consent Statement**

I have read and understood the information about the research. I am not aware of any condition that would prevent my participation, and I agree to participate in this project. I have had the opportunity to ask questions about my participation in the research. All the questions I have asked, have been answered to my satisfaction.

Please indicate whether you agree to participate in each of the following parts of the research (please indicate which parts you agree to by putting a cross in the relevant box):

□ Complete a questionnaire.

□ Participate in two interview and testing sessions (inspiratory muscle strength and grip strength) with the researcher

□ Participate in 6 weeks of breathing training

□ Agree to the information being used in future research

Name……………………………………………………………………….……………………........…

Signature………….........................................................………………………………

Date ………………………………………………………….

A summary of the research report can be forwarded to you when published. If you would like to receive a copy of the report, please include your mailing (or email) address below.

Name…………………………………………………………………………….…………………………

Address……………………………………………………………………………………………………

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