See discussions, stats, and author profiles for this publication at: https://www.researchgate.net/publication/316753706

### Effect of Dynavision™ Training on King-Devick Test® Performance

Conference Paper · April 2017

citations 0

5 authors, including:



All content following this page was uploaded by Scott L. Bruce on 08 May 2017.

reads **21** 

# WRIGHT STATE UNIVERSITY

### EFFECT OF DYNAVISION<sup>TM</sup> TRAINING ON KING-DEVICK TEST<sup>®</sup> PERFORMANCE

Morgan A. McArthur, ATC, Ryan C. Schultz, ATC, Tracey W. Watkins, ATC, Matthew M. Ommert, ATC, Scott L. Bruce, EdD, AT, ATC

### **BACKGROUND AND PURPOSE** • The Dynavision<sup>™</sup> is a visual-motor & neurocognitive rehabilitation training device to improve & develop reaction time, central & peripheral vision, used by medical, athletic & tactical patients<sup>1</sup> (Figures 1 & 2) • Dynavision<sup>™</sup> is a large board with 64 buttons that randomly illuminating red or green lights, subjects are instructed to quickly strike<sup>2</sup> and has been found to be reliable in clinical research testing and evaluation<sup>3</sup> • The unit is able to challenge psychomotor abilities with cognitive challenges provided through the Tachistoscope<sup>1</sup> • The small screen, Tachistoscope (T-scope), is able to flash numbers, letter, words, icons or display scrolling text • Dynavision<sup>™</sup> has also been used to assess, manage and aid in the return-to-play decisions of concussions <sup>3,4</sup> • Clark et al., have shown Dynavision<sup>™</sup> training to be beneficial in the prevention of concussion occurrence<sup>3,4</sup> • The King-Devick Test<sup>®</sup> is a validated, accurate, and objective sideline concussion screening test, executed by having patients rapidly read different arrays of numbers<sup>5</sup> • King-Devick Test Inc. (K-D) has been used as an evaluation instrument in the assessment of concussion<sup>6</sup> • K-D test has been found to be a very good concussion management tool with sensitivity of 86% & specificity of 90%<sup>7</sup> • The purpose of this study was to determine if 6-weeks of Dynavision<sup>™</sup> training has a positive affect upon King-Devick Test<sup>®</sup> performance PARTICIPANT CHARACTERISTICS • This study utilized a randomized-control trial (RCT) design • We had 34 college-aged students volunteers: 21 females, 13 males; 14 in the treatment group, 20 in the control group • There were no statistical differences btw genders ( $p \le 0.05$ ) (Table 2.) • There were no statistical differences btw control & treatment groups on the K-D test ( $p \le 0.05$ ) • Gender: Independent samples t-test<sub>(30)</sub> = 1.98, p = 0.057• Control vs. Treatment Group: Independent samples t-test<sub>(30)</sub> = -0.381, p = 0.706Table 1.

| Mean (± sd)      | Age (years)    | Ht (cm)         | Wt (kg)         | BMI            |
|------------------|----------------|-----------------|-----------------|----------------|
| Overall (N = 32) | 21.4 (± 3.72)  | 171.7 (± 10.39) | 76.69 (± 19.19) | 25.82 (± 4.91) |
| Males (n = 12)   | 20.83 (± 1.27) | 181.61 (± 6.80) | 88.45 (± 20.49) | 26.64 (± 5.01) |
| Females (n = 20) | 21.78 (± 4.71) | 165.10 (± 6.69) | 68.84 (± 13.92) | 25.27 (± 4.91) |

| ETHODS  |
|---|
| The K-D test is a timed test administered for baseline (BL) assessment and post-injury test comparison  |
| <ul> <li>Participants were given an example card &amp; permitted to practice one time</li> </ul>  |
| <ul> <li>This was followed by three K–D test cards, with random, single-digit numbers</li> </ul>  |
| <ul> <li>Participants are asked to read the numbers from left to right across the card as quickly as possible</li> </ul>  |
| <ul> <li>A BL test must be clean, i.e., free of any errors</li> </ul>   |
| Baseline Dynavision™ testing is a series of 10 different tests, each test lasting 1-minute  |
| <ul> <li>Subjects stood 14" from the unit, the height of the unit is adjusted for each individual</li> </ul>  |
| <ul> <li>Dynavision<sup>™</sup> test battery includes:<sup>4</sup></li> </ul>   |
| • A* test: a 60 sec. warm-up using all lights on the board, subjects react by hitting illuminated buttons   |
| <ul> <li>Reaction Time Tests: consisted of 3 different tests, assessing reaction time for each arm</li> </ul>   |
| <ul> <li>Test A: subject holds a starting light &amp; reacts to an illuminated button on an adjacent horizontal line</li> </ul>   |
| <ul> <li>Test B: subject holds a starting light &amp; reacts to an illuminated button on a semi-circle of buttons</li> </ul>  |
| <ul> <li>Test C: subject holds a starting light &amp; reacts to a single adjacent, illuminated button</li> </ul>  |
| <ul> <li>Concussion Test 1: subjects react to illuminated buttons while reporting digits seen on the T-scope</li> </ul>   |
| <ul> <li>Concussion Test 2: similar to Test 1, subjects react to illuminated buttons, report the 1st digit on T-scope, then<br/>sum the 1<sup>st</sup> digit with the 2<sup>nd</sup> digit observed, then repeat summing pairs of digits</li> </ul> |
| <ul> <li>Concussion Test 3: similar to Test 2, subjects react to strike red illuminated buttons, summing digit pairs, &amp; react to strike &amp; call out green lights as they illuminate</li> </ul>   |
| Following all BL testing subjects were randomly assigned to a treatment or to a control group   |
| The treatment group completed a series of 3, 1-minute training exercises on the Dynavision™, done 3 X's / week  |
| <ul> <li>Each treatment group member performed the training exercises for 6 weeks</li> </ul>  |
| <ul> <li>Control group members participated in no training</li> </ul>   |
| Following 6-wk training period, both groups were post-tested (PoT) on the same tests performed at baseline testing  |
|   |
| Figure 1. Figure 2.   |
|   |

## Kinesiology Health

### JLTS

- ed samples t-test were performed to the K-D BL data paired with the K-D PoT
- Tests were performed on all subjects and then by gender
- All tests were statistically significant at p < 0.001 (Table 1,2.)
- the 32 participants improved on their K-D test times from BL to PoT
- Mean ( $\pm$  sd) differences between the 2 K-D test administration were:
- Overall: -3.08 (± 4.45); Males: -2.99 (± 3.40); Females: -3.13 (± 5.06)

se values shows the Dynavision<sup>TM</sup> training had a positive affect on King-Devick test scores

| Table 2. |                  |                 |      |    |                            |
|----------|------------------|-----------------|------|----|----------------------------|
|          | Mean ( $\pm$ sd) | Std. Error Mean | t    | df | <i>p</i> -value (2-tailed) |
| Overall  | 3.08 (± 4.45)    | 0.79            | 3.91 | 31 | 0.001                      |
| Males    | 2.99 (± 3.40)    | 0.98            | 3.05 | 11 | 0.001                      |
| Females  | 3.13 (± 5.06)    | 1.13            | 2.76 | 19 | 0.001                      |

### **ENCE-BASED RECOMMENDATIONS / CLINICAL RELEVANCE**

experiment demonstrated 6 weeks of Dynavision <sup>™</sup> training had a positive affect on King-Devick Test<sup>®</sup> Performance

menting Dynavision<sup>™</sup> training clinically would have significant benefits for injured athletes.

Devick Test<sup>®</sup> improvements show saccadic and cognitive influences from the Dynavision<sup>™</sup>

### RENCES

- ence the proven power of Dynavision! Available at: http://www.dynavisioninternational.com/ Accessed April 7, 2016.
- AJ, Hoffman JR, Beyer KS, et al. Reliability of the Dynavision™ D2 for assessing reaction time performance. J Sport Sci Med. 2014; 13:145 150. 3. Joseph F. Clark P, Pat Graman M, Gregory D. Myer P, et al. An exploratory study of the potential effects of vision training on concussion incidence in
- football. Optometry Visual Perf. 2015;3(2):116-125.
- . Clark JF, Ellis JK, Bench J, Khoury J, Graman P. High-performance vision training improves batting statistics for University of Cincinnati baseball players. *PloS one*. 2012;7(1):e29109. doi:10.1371/journal.pone.0029109
- 5. Rizzo J, Hudson T, Rucker J, et al. Objectifying eye movements during rapid number naming: Methodology for assessment of normative data for the King-Devick test. J Neurol Sci. 2016;362:232-239.
- . Galetta K, Mengling, Liu, Leong D, Ventura R, Galetta S, Balcer L. The King-Devick test of rapid number naming for concussion detection: Meta-analysis and systematic review of the literature. Concussion. 2015;1(2). DOI 10.2217/cnc.15.8
- Seidman D, Burlingame J, Shaw M, Yousif LR, Donahue XP, Krier J, Rayes LJ, Young R, Lilla M, Mazurek R, Hittle K, McCloskey C. Evaluation of the King–Devick test as a concussion screening tool in high school football players. J Neurol Sci. 2015;356:97-101.