



Plaxtreme Clinical Trial

Single-center feasibility study in inpatient hand rehabilitation

REUTH TLV Rehabilitation Hospital
Post-stroke and post-TBI participants

Randomized, open-label, two-arm design with Plaxtreme and standard rehabilitation vs. standard rehabilitation only

ARAT improvement

184%

compared to control group
(10.25 vs. 5.57 points)

Pinch strength improvement

100%

compared to control group
(+1.01 kg; no meaningful change in control)

Introduction

- Single-center study at REUTH TLV Rehabilitation Hospital.
- Conducted during inpatient rehabilitation.
- Focused on post-stroke and post-TBI hand rehabilitation.

Objective

- Evaluate the safety, usability, and efficacy of Plaxtreme.
- Assess whether Plaxtreme added to standard rehabilitation improves hand function.
- Compare outcomes with standard rehabilitation alone.

Method

- **Design:** Randomized, open-label, two-arm study.
- **Groups:** Plaxtreme plus standard rehabilitation vs. standard rehabilitation only.
- **Dose:** 12 Plaxtreme treatment sessions.
- **Training:** Hand-opening and hand-closing practice with error augmentation.
- **Session time:** About 20 minutes of practice plus setup, calibration, and breaks.
- **Visits:** Baseline, interim, end of treatment, and 4-week follow-up.
- **Measures:** ARAT, Box and Block, pinch strength, grip strength, pain, Fugl-Meyer, and VAS.



Experience The Difference

info@bioxtremerobotics.com
www.bioxtremerobotics.com





Conclusions

- **Nearly 200% greater ARAT improvement:** The study group improved by 10.25 points vs. 5.57 in control.
- **Clear pain advantage on VAS:** Pain decreased in the study group and increased slightly in control.
- **Device-specific functional signal:** Findings support a meaningful Plaxtreme effect on hand-specific function and pain.
- **Functional pinch range achieved:** Pinch strength increased by about 1 kg in the study group, bringing patients into the 3-5 kg range associated with functional pinch use.
- **Careful interpretation of broader tests:** Fugl-Meyer and Box and Block assess functions not directly aligned with Plaxtreme hand opening and closing training.

Key Takeaways



Plaxtreme showed stronger ARAT improvement than standard rehabilitation alone.



The study group showed lower pain at end of treatment, while pain increased slightly in control.



Pinch strength improved in the study group and remained unchanged in control.



Broader functional measures should be interpreted in the context of Plaxtreme's hand-specific treatment mechanism.



Read more about our science backed devices and our neurorehabilitation therapeutic solutions

info@bioxtremerobotics.com
www.bioxtremerobotics.com

