

Nothing to disclose

Stroke is a leading cause of disability worldwide*



* Feigin VL et al Global Burden of Diseases, Injuries, and Risk Factors Study 2010 (GBD 2010) and the GBD Stroke Experts Group. Global and regional burden of stroke during 1990-2010: findings from the Global Burden of Disease Study 2010. Lancet. 2014 Jan 18;383(9913):245-54.



Why stroke Rehabilitation Matters ?

Rehabilitation has given my husband a life to live. It has improved both his

mobility and his communication. Slowly at first, then dramatically, and even

today there is still improvement in his communication.

This gives me a little more hope for tomorrow.

How to achieve good functional potential in

Post-Stroke rehabilitation ?

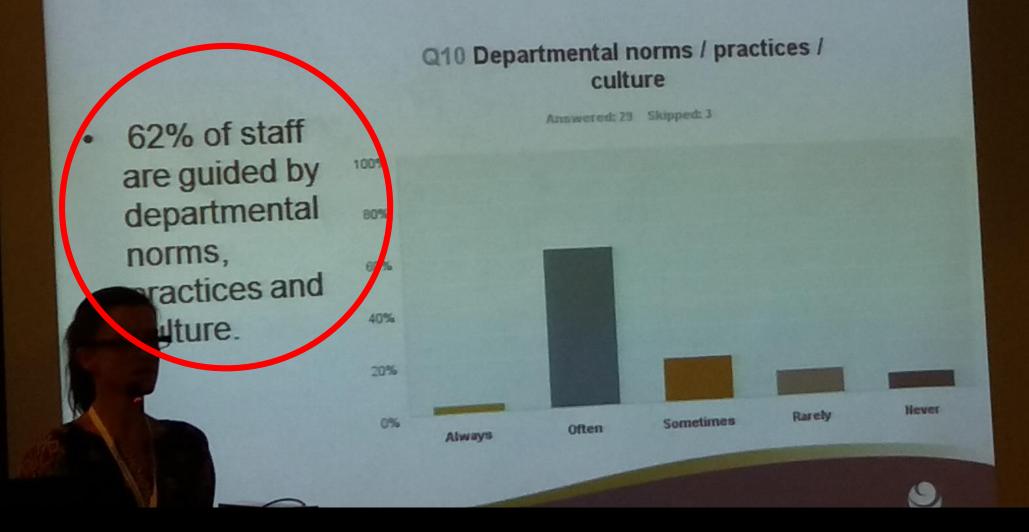
Dr Farooq Azam Rathore MBBS, FCPS , MSc (Pain Medicine)

- Head of Department, Rehabilitation Medicine, Shifa Hospital, Karachi
- Assistant Professor, Rehabilitation Medicine, Bahria University Medical and Dental College, Karachi
- **Executive Board Member and LMIC representative , Cochrane Rehabilitation**

EVIDENCE-BASED MEDICINE

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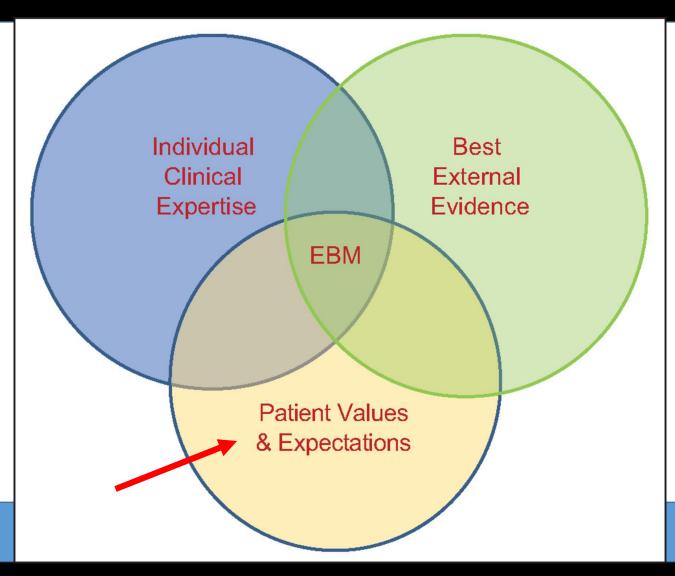
Barriers to knowledge use



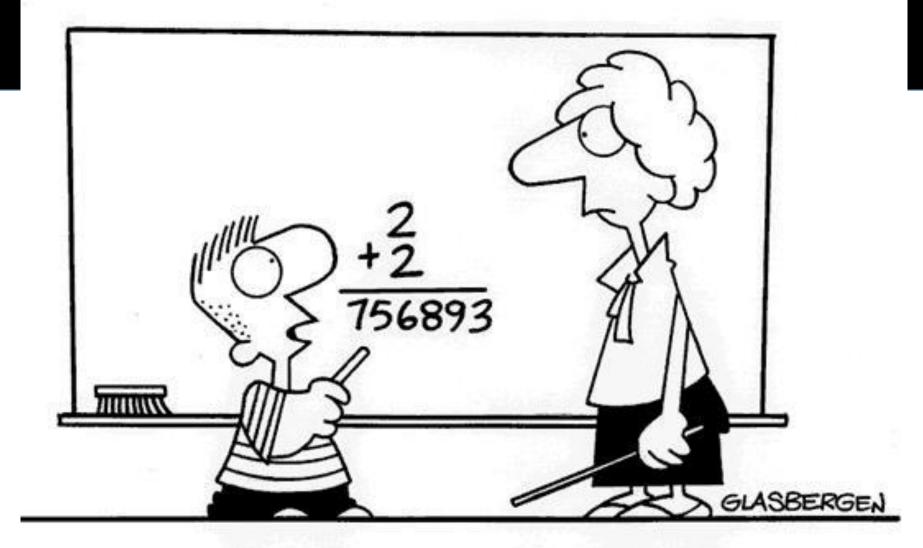
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Is literature search enough for EBM?

Evidence based Medicine



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"In an increasingly complex world, sometimes old questions require new answers."

The simple things matter most

- Start early
- Multi-disciplinary team approach
- Patient centered rehabilitation and goal setting
- Positioning, counselling and discussing outcomes and prognosis









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Predicting functional outcomes in stroke

Prediction of upper limb function within 72 hours after stroke

- Finger extension and shoulder abduction.
- Patients with some finger extension and shoulder abduction on day 2 after stroke onset had a 98% probability of achieving some dexterity at 6 months.
- Patients lacking this voluntary motor control had a probability of 25%.
- 60% of the patients with some finger extension within 72 hours had full recovery of upper limb function according to the action research arm test (ARAT) at 6 months.

Nijland RH, van Wegen EE, Harmeling-van der Wel BC, Kwakkel G; EPOS Investigators. Presence of finger extension and shoulder abduction within 72 hours after stroke predicts functional recovery: early prediction of functional outcome after stroke: the EPOS cohort study. Stroke. 2010 Apr;41(4):745-50.

Shoulder subluxation as a predictor

• The presence of shoulder subluxation at the early stage of stroke can be a

predictor of motor outcome of the affected upper extremity and the degree of shoulder subluxation can be a predictor of the motor function of the affected hand.

Infections adversely affect the outcomes in stroke

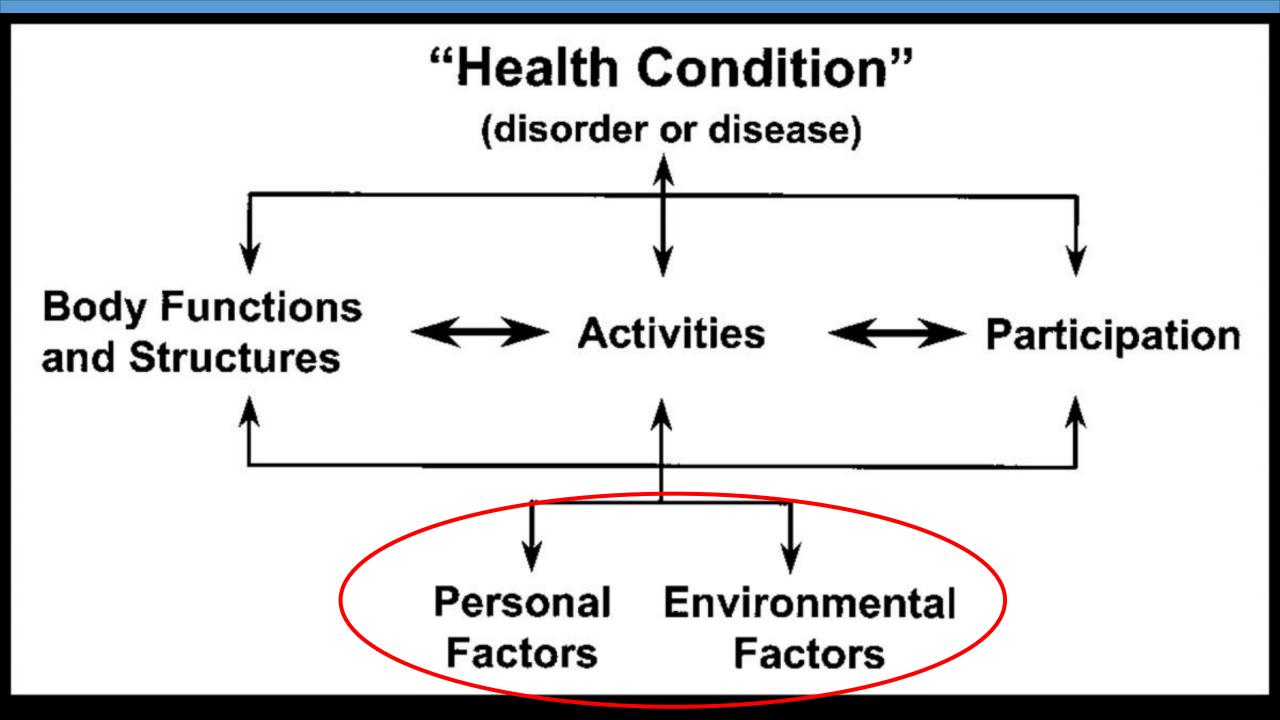
- Are delayed infections (up to 76 days post-stroke) associated with poor outcome at 90 days ?
- Severe post-stroke infections, whether occurring early or late after stroke, are associated with an increased risk of death and poorer functional outcome, independent of differences in baseline characteristics or treatment.
- Strategies to reduce the risk of infection immediately and first 3 months poststroke.

OSA affects functional outcomes

• Menon D, Sukumaran S, Varma R, Radhakrishnan A. Impact of obstructive sleep

apnea on neurological recovery after ischemic stroke: A prospective study. Acta Neurol Scand. 2017 Nov;136(5):419-426. doi: 10.1111/ane.12740.

- 60% had OSA, 1/4th had severe OSA
- Ischemic stroke patients with OSA tend to have <u>poor neurological and functional</u> <u>recovery</u>, across all segments of stroke and OSA severity.



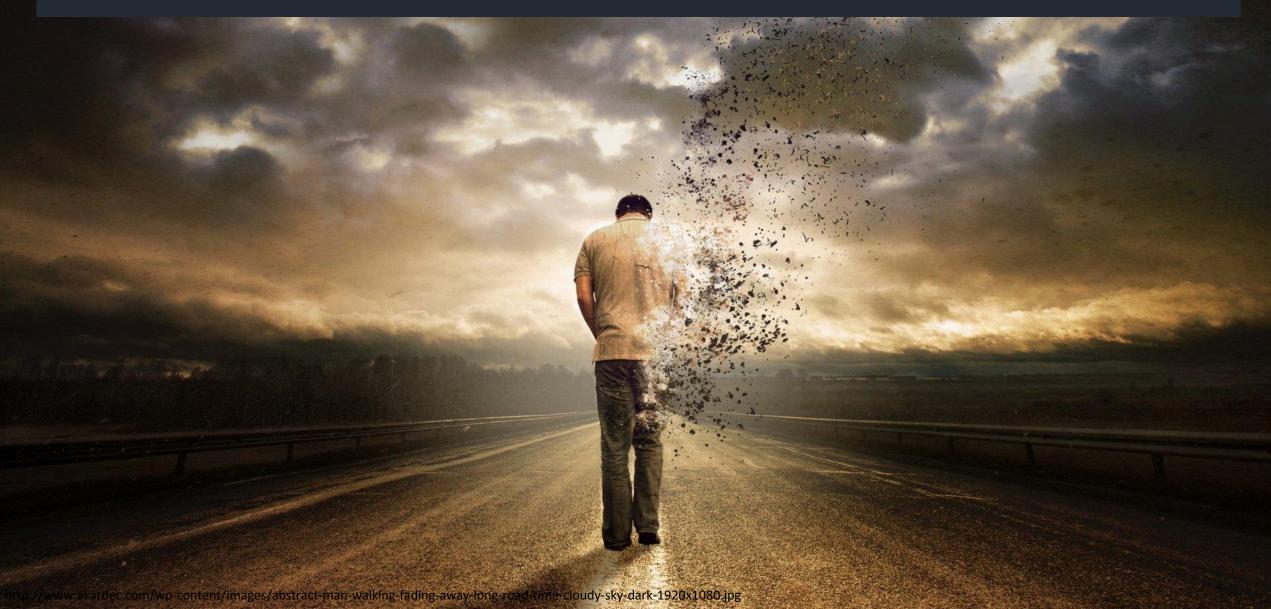
Role of care givers in improving functional outcomes

There is very <u>low- to moderate-quality</u> evidence that <u>care giver mediated</u>
 <u>exercises</u> (CME) <u>may be a valuable intervention</u> to augment the therapeutic

options for stroke rehabilitation.

• Future high-quality research should determine whether CME interventions are (cost-)effective.

Improving functional outcomes in chronic stroke



Balance training in Chronic stroke

- Tally Z, Boetefuer L *et al.* The efficacy of treadmill training on balance dysfunction in individuals with chronic stroke: a systematic review.
 Top Stroke Rehabil. 2017 Oct;24(7):539-546
- van Duijnhoven HJ *et al.* Effects of Exercise Therapy on Balance
 Capacity in Chronic Stroke: Systematic Review and Meta-Analysis.

Stroke. 2016 Oct;47(10):2603-10.

Role of Virtual reality

• Laver KE, George S, Thomas S, Deutsch JE, Crotty M. Virtual reality for stroke

rehabilitation. Cochrane Database Syst Rev. 2015 Feb 12;(2):CD008349

 Conclusions: Evidence that VR and interactive video gaming may be beneficial in <u>improving upper limb function and ADL function</u> when used as an adjunct to usual care (to increase overall therapy time)

Role of Virtual reality

- Ballester BR *et al.* Domiciliary VR-Based Therapy for Functional Recovery and Cortical Reorganization: Randomized Controlled Trial in Participants at the Chronic Stage Post Stroke. JMIR Serious Games. 2017 Aug 7;5(3):e15. doi: 10.2196/games.6773.
- Conclusions: Remote delivery of customized VR-based motor training promotes functional gains that are accompanied by neuroplastic changes

Role of Long term electrical stimulation

 Home-based active <u>repetitive peripheral nerve stimulation</u> associated with motor training was <u>feasible, safe</u>, and led to <u>long-lasting enhancement</u> of paretic arm performance in the chronic phase after stroke.

Case 1

- A 33-year-old male with complete weakness of the right extremities due to corona radiata infarct.
- Regular OT and PT in the outpatient clinic until 2 years after onset.
- Neuromuscular electrical stimulation for the right finger extensors continuously until 4 years after onset.
- Combined with transcranial magnetic stimulation

Case 2

- 30 years old Caucasian male, hemorrhagic AVM stroke with bilateral impaired motor control, severe spasticity, vertigo and fear of fall.
- A novel approach combining traditional child motor-learning techniques, play, and proprioceptive-building activities in addition to current stroke rehabilitation techniques.
- Three years intensive program

Case 2

- Patient regained the ability to free-walk in small bouts.
- Progressed from the use of a walker to canes.
- Regained use of his hands and vertigo improved.
- Progressed from using a walker to driving, returning to school, and starting a family.

Take home message

- Determine functional goals for each individual patient.
- Functional potential/outcome in stroke can be predicted
- Simple interventions do make a difference
- Counselling and prognostication of outcome
- Embrace technology
- Beware of the Contextual factors and environmental barriers



Copy of the presentation !

farooqrathore@gmail.com