The promise and potential of botulinum toxin-A: national survey of therapy practices

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Abstract
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O50

Australian clinical practice of inpatient stroke rehabilitation and its relationship to patient outcomes

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Background: About a third of Australian stroke survivors receive inpatient rehabilitation.

Aim: To report on associations between recommended stroke rehabilitation processes and patient outcomes.

Methods: National audit data from 68 rehabilitation units, each contributing up to 40 consecutively admitted patients, were analysed to investigate outcomes against adherence to Australian clinical stroke rehabilitation guidelines. Outcomes: discharged home or an increase of ≥22 in Functional Independence Measure (FIM™) scores from admission to discharge. Multivariable logistic regression assessed associations between adherence to recommended management and patient outcomes.

Results: Hospitals contributed 2119 patients with a median age of 75 and 53% male. Rehabilitation units providing evidence based management, for example, mobility training (94%), were more likely to provide better recovery outcomes. A FIM™ score ≥100 was strongly correlated (OR:1.60, CI 95%: 0.93–2.78) with discharged home and patients receiving balance re-training (OR: 0.78, CI 95%: 0.41–1.46) or aged ≥75 years (OR: 0.38, CI 95%: 0.39–0.85) were less likely to achieve a ≥22 increase in FIM™ score.

Conclusion: Using national audit data, this is the first study to demonstrate that adherence to recommended management in stroke rehabilitation improves patients outcomes. The findings demonstrate the clinical significance of a FIM™ score between 80–100 and discharge home.

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Yoga for chronic post-stroke hemiparesis: a pilot randomised controlled trial

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Background: Individuals with chronic post-stroke hemiparesis face limited opportunities for physical and mental health self-management. Yoga might be particularly appealing as a form of adaptive physical activity, stress management and mood enhancement.

Aims: To evaluate program feasibility along with physical function and mental health clinical outcomes for a standardised yoga program for this population.

Methods: Participants were randomly allocated to either yoga (N = 11) or wait-listed control (N=11) groups. The 10-week yoga program involved weekly group sessions and daily home practice including modified yoga-based exercises and guided meditation. Assessment of clinical outcomes was conducted at baseline and post-intervention.

Results: No adverse effects from yoga were reported and adherence to group classes and home practice was 90% and 82%, respectively. No significant differences in adjusted post-intervention scores for movement, balance, gait velocity, depression and trait anxiety were evident. However, the yoga group had significantly lower state anxiety scores and higher Stroke Impact Scale scores after the 10-week period.

Conclusion: A standardised yoga program for chronic post-stroke hemiparesis is feasible, safe and enjoys a high rate of adherence. These preliminary results suggest that short-term yoga participation may not be effective for improving physical function but may be effective for improving state anxiety and quality of life.

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The promise and potential of botulinum toxin-A: National survey of therapy practices

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Background: Botulinum toxin A (BoNT-A) is increasingly used to treat spasticity after stroke. Evidence is accumulating regarding pre- and post-BoNT-A therapy and its augmentative effect. To date little is known about the extent and type of therapy practice in post-stroke BoNT-A regimes.

Aim: To describe the practice experience of rehabilitation therapists who work with post-stroke patients receiving BoNT-A, including triage, assessment, goals and management.

Method: Anonymous survey (fixed choice and open questions) distributed to occupational therapists and physiotherapists through professional associations, and thence snowball sampling. Questions covered pre-injection assessment, clinic policies, post-injection therapy and assessment.

Results: A total of 100 therapists demonstrated limited knowledge regarding goal development and assessment. Sixty percent of clinics did not have protocols for monitoring post-BoNT-A outcomes, or staffing to offer more than one follow-up therapy session. Reported practices were significantly different to NSF published clinical guidelines.

Discussion: Evidence-based professional development is required to increase therapist knowledge and skill regarding assessment, goal-setting, management and outcome evaluation for this patient population. Increased service capacity is critical so that short-term pharmacologic benefits can be harnessed to produce longer term functional outcomes.

O53

Community follow-up of stroke survivors in the Australian stroke clinical registry (AuSCR)

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Background: Although much is known about the outcome of stroke with respect to mortality and morbidity, there has been little research on health-related quality of life (HRQoL) and available studies are limited in terms of representativeness.

Aim: To describe 90-day HRQoL after stroke from a large cross-section of patients registered in the Australian Stroke Clinical Registry (AuSCR).