Material and methods. – A retrospective study covering a population of 22 patients followed in pediatric functional rehabilitation unit during the period May 2010 to April 2011.

Assessment of shoulder impairment was based on the listing of deltoid, biceps and external rotators of the shoulder and on the study of passive mobility. Functional assessment made according to the Mallet classification.

Results. – The analysis showed a complete recovery of the deltoid and biceps in 22.7% of cases at 12 months of evolution. In functional terms and with a mean of 2.6 years, 57.1% of children recovered a Mallet stage III.

Three children underwent surgery (nerve relocation). This surgery has improved functional status in all cases.

Discussion and conclusion. – Muscle spontaneous recoveries remain low after a year, but the percentage of functional recovery increases with time and also after nerve reimplantation surgery.

Further readings


P060–EN
Assessment of functional independence according to the WeeFIM score in children with cerebral palsy after postoperative rehabilitation

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Keywords: Cerebral palsy; Operation; Functional independence

Objective. – To determine whether rehabilitation after orthopedic-surgical treatment of the lower extremities has an influence on functional independence in children with cerebral palsy (CP).

Subjects and methods. – A historical-prospective study included 44 treated children with CP that were treated from May 2000 until June 2009 at the Department of Physical Medicine and Rehabilitation University Clinical Centre Tuzla. The main criteria for entering the study were diagnosed CP and performed orthopedic-surgery of the lower extremities during rehabilitation treatment. Assessment of the functional independence score was performed according to the functional independence measure for children (WeeFIM).

Results. – In our study, functional independence were improved, the average value of total score according to WeeFIM before the operation was 42.9 ± 23.4, and after the postoperative rehabilitation it was 69.7 ± 27.7, with an average difference from 26.9 (% 95 CI = 21.0 to 32.6) which had a high statistical significance (P<0.001).

Conclusion. – Surgical intervention performed on the lower extremities in children with cerebral palsy along with intensive rehabilitation can improve functional independence.