Contribution of occupational therapy intervention with stroke patients
E. Sorita a,*, A. Tarraula b, C. Bossard b, J. Criquillon b, A. Cook c, B. Pelegris d, P. Dehail a, P.A. Joseph a, J.-M. Mazaux a

a EA 4136 handicap et système nerveux, SMPR Tastet-Giraud, CHU Pellegrin, place Amélie-Raba-Leon, 33076 Bordeaux cedex, France
b SMPR Tastet Giraud, CHU Pellegrin, Bordeaux, France
c Unité neurovasculaire, CHU Pellegrin, Bordeaux, France

*Corresponding author.

Keywords: Client-centered approach; Occupation of daily-life; Occupational therapy; Stroke

Rationale.– Kristensen et al. (2010) published a review about the use of activity of daily life (ADL) and client-centered approach with stroke patients in occupational therapy. Indeed numerous articles highlight the importance of activity limitations (personal or instrumental) and participation restrictions among this population (Aas et al. 2007). It correlates with patients’ level of dissatisfaction after returning home (Hartman-Maier et al. 2007). Improving the engagement of patients in ADL is identified as a core principle of occupational therapy interventions (Richards et al. 2005; De Witt et al. 2007). Actively involving patients and relatives in the elaboration of program organized within a perspective of the project of everyday life is another core principle of these interventions (Maitra et al. 2006; Leach et al. 2010).

Aim.– To study the effectiveness of occupational therapy interventions centered on the project of everyday life and occupations to improve the independence of stroke patients on ADL.

Method.– From the work of Kristensen et al. (2010), we conducted an additional search of the literature carried out for the period from 2007 to 2011 using Medline, OT Seeker, ODBase and Cochrane Library with the following terms: stroke, occupational therapy, client-centered, rehabilitation, occupation-based, activity-based.

Results.– We selected 32 articles from 2000 to 2011 for analysis: 13 randomized controlled trials (RCT), 15 reviews including 3 recent Cochrane reviews, and 4 meta-analyses. The results claimed in favor of the association of active patients and relatives’ implication to determine the OT intervention goals and of occupation centered approach. The occupational therapy expertise level targeting identification of occupations and its analysis of interactions activity–environment–impact of deficiencies were successful factors of the interventions whose some principles need to be specified.

Discussion.– This evidence of efficiency is useful for thought in public health policy making concerning the issue of dependence. Notably, we will discuss the usefulness of evolution of OT intervention in the home setting and daily life environment. We will discuss the singular OT contribution within the multidisciplinary team, and relatively to the traditional biomedical approach focused on deficiency and disability.


CO38-005–EN

Importance of assessing manual wheelchair skill in disabled persons
W. Harissi*, F.Z. Ben Salah, S. Mtaouaa, S. Lebib, I. Miri, I. Aloulou, C. Dziri

Service de médecine physique réadaptation, institut Kassab d’orthopédie, Ksar-Saïd, 2010 Manouba, Tunisia

*Corresponding author.

Keywords: Skills; Wheelchairs; Persons with disabilities

Introduction.– Providing wheelchairs tailored to personal needs, not only increases the mobility of the disabled person, but initiates the process of accessing the world of education, work and social life. Wheelchair skills increase the autonomy and self-esteem of disabled persons who learn how to use their wheelchair as an extension of their body.

Subjects and methods.– We recruited 100 wheelchair users in the region of Manouba, we asked them to complete a questionnaire that bears on several aspects (age, sex, disease, satisfaction with their wheelchairs and skills). We calculated the score of abilities using the Wheelchair Skills Program (WSP) in which 17 items of evaluation among 57 were studied. Satisfaction was assessed by the scale of satisfaction with technical assistance.

Results.– The average age of the wheelchair users was 19.5 years. The sex ratio was 1.5. The deficiencies reported requiring the use of wheelchairs were tetraplegia (52%), paraplegia (34%) and hemiplegia (4%). The average duration of use of wheelchairs was 4.2 years, ranging from one to 20 years. The WSP score showed that 16% of users had a skills score better than 50%, 14% of them had a score from 30% to 50%, 70% of users had a score under 30% and one user felt he did not have find any difficulty while using his wheelchair. The satisfaction evaluation showed that 50% of users were dissatisfied with their wheelchairs.

Discussion and conclusion.– The use of wheelchairs is a complex combination of skills that seem to determine the overall functioning of persons with disabilities of the lower limbs. Our work shows a severe limitation of wheelchair skills, highlighting the importance of a Wheelchair Skills Training Program to improve the use of wheelchairs and favor better social inclusion of disabled persons.


CO38-004–EN

Determining efficient places for grab bars in public toilets for disabled persons
S. Loyer*, G. Le Pape

Service d’ergothérapie, UGECAM centre, CRF Le clos saint-Victor, 3, rue Chanteple, 37304 Jout-lès-Tours, France

*Corresponding author.

Grab bars, most usually used to facilitate the transfer of elderly people on the toilet seat, consist of a bar presenting a nearby horizontal part at arm-rest level. There is no normalized grab bar position known to efficacy help disabled people to stand up.

The aim of this study is the search for standard places where grab bars are more effective than those which are generally used. In a first experiment, 34 disabled patients were invited to get up from the toilet seat, using suction grab bars placed according to their spontaneous movement. Anthropometrics and hand positions were measured. Final grab bars were positioned according to the results of the statistical analyses. In a second experiment used as control, 20 of the patients with the same profile were invited to use these new bars for their transfer and to get up again. The level of their difficulties was recorded. Patient comments were also noted. The results were analyzed by nonparametric tests using the exact method of permutations (StatXact® software). Multivariate descriptive statistics were implemented with SPAD® software.

The analysis results make it possible to suggest positions better adapted to rising: firstly in places accessible to the public, secondly in private places depending on the orthopedic or neurological pathology, and also on the corpulence of the individuals.

References

– Jones F. Strategies to enhance chronic disease self-management: How can we apply this to stroke? Disability and Rehabilitation 2006;28:84:1847.