paresia; complete extension of the hips was impossible (50° resistance when one tried to extend her limbs. On examination, there was no oral side, she remained constantly with her lower limbs in triple flexion, and opposed that she refused to sit, her legs flexed whilst seated. Since the same time, on bed-with horizontal footrests. For several years, the institution team had remarked problems, and also myopia, renal lithiasis, and lower limb fractures. She lived in a obtaining a new wheelchair. The patient had very severe communication pro-

Case report

Female patient, 37 years old, was referred to the rehabilitation clinic for the purpose of case report, from the Clinique MPR, CHU de Grenoble, hôpital Sud, avenue de Kimberley, 38434 Échirolles, Grenoble, France. She was born in application and treated to the age of 15 months) was referred to the rehabilitation clinic for the purpose of rehabilitation; Epidemiology

Keywords: Cerebral palsy; Pain; Non-communicant

Case report – A 57-year-old woman with severe cerebral palsy (cerebral anoxia at age of 15 months) was referred to the rehabilitation clinic for the purpose of obtaining a new wheelchair. The patient had very severe communication problems, and also myopia, renal lithiasis, and lower limb fractures. She lived in a specialized institution. She arrived at the consultation on a manual wheelchair, with horizontal footrests. For several years, the institution team had remarked that she refused to sit, her legs flexed whilst seated. Since the same time, on bed-side, she remained constantly with her lower limbs in triple flexion, and opposed resistance when one tried to extend her limbs. On examination, there was no oral communication possible with the patient; there was a moderately spastic paraparesia; complete extension of the hips was impossible (50° permanent flexion) seemed to be very painful for the patient. Radiographies were therefore made and revealed typical syndesmophytes, with ankylosis of the dorsolumbar sac; sacroiliitis and coxitis. The radiological signs are typical of ankylosing spondylitis. An initial treatment by using non-steroidal anti-inflammatory drugs is instituted. Biotherapy will be discussed in case of inefficacy. Discussion – This case report reveals the difficulty to find and evaluate pain in non-communicating patients. This difficulty can explain late diagnosis in these patients.

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References


P030–EN Late diagnosis in a non-communicating patient

A. Marquer a,*, P. Davoine b, A. Chrispin b, D. Pérenou b

a Clinique MPR, CHU de Grenoble, hôpital Sud, avenue de Kimberley, 38434 Échirolles, Grenoble, France
b CHU de Grenoble, Grenoble, France

*Corresponding author.

Keywords: Cerebral palsy; Pain; Non-communicant

Case report – A 57-year-old woman with severe cerebral palsy (cerebral anoxia at age of 15 months) was referred to the rehabilitation clinic for the purpose of obtaining a new wheelchair. The patient had very severe communication problems, and also myopia, renal lithiasis, and lower limb fractures. She lived in a specialized institution. She arrived at the consultation on a manual wheelchair, with horizontal footrests. For several years, the institution team had remarked that she refused to sit, her legs flexed whilst seated. Since the same time, on bed-side, she remained constantly with her lower limbs in triple flexion, and opposed resistance when one tried to extend her limbs. On examination, there was no oral communication possible with the patient; there was a moderately spastic paraparesia; complete extension of the hips was impossible (50° permanent flexion) seemed to be very painful for the patient. Radiographies were therefore made and revealed typical syndesmophytes, with ankylosis of the dorsolumbar sac; sacroiliitis and coxitis. The radiological signs are typical of ankylosing spondylitis. An initial treatment by using non-steroidal anti-inflammatory drugs is instituted. Biotherapy will be discussed in case of inefficacy. Discussion – This case report reveals the difficulty to find and evaluate pain in non-communicating patients. This difficulty can explain late diagnosis in these patients.

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P031–EN Dual tasking and gait in people with Mild Cognitive Impairment according to amnestic and non-amnestic subgroups, preliminary results

B. Auvinet a,*, P. Touzard b, D. Chaleil c, C. Touzard c, D. Delafond d, C. Foucher d, F. Multon b

a Polyclinique du Maine, 4, avenue des Français-Libres, 53010 Laval, France
b Laboratoire M2S, université de Rennes 2, Rennes, France
c Faculté de pharmacie, université d’Angers, Angers, France
d Médecine interne gériatrie, hôpital Laval, Laval, France

*Corresponding author.

Keywords: MCI; Gait; Dual-task

Objective – The large number of subjects suffering from mild cognitive impairment (MCI) who evolved towards a state of dementia, and more specifically Alzheimer’s disease, require identifying the preliminary risk factors. Amongst the latter, gait abnormalities in single and dual tasking have been proposed by several authors [1,2,3]. The aim of this study was to assess gait characteristics during simple and dual tasking in patients with MCI according to non-amnestic and amnestic subgroups (na-MCI, and a-MCI respectively).

Methods – Gait analysis provided by an accelerometric method (Locometrix®) was carried out under single-task and dual-task conditions (counting backwards from 50) in nine patients (F = 7, M = 2; age 73 ± 8 years; height 165 ± 13 cm; weight 68 ± 9 kg) with na-MCI (n = 3) and a-MCI (n = 6), according to neuropsychological tests. Gait parameters were walking speed (WS), stride frequency (SF) and stride regularity (SR).

Results – No significant difference between subgroups during single task was noted. A significant decrease in WS (P < 0.02), SF (P < 0.02) and SR (P < 0.04) in a-MCI patients was noted.

Conclusion – This preliminary data is in accordance with the fact that musculoskeletal abnormalities were predominant in a-MCI, and suggests that dual tasking gait analysis could represent a supportive argument for distinguishing between na-MCI and a-MCI. These results have to be confirmed by a larger study. The value of such results in predicting the risk of Alzheimer’s disease has to be confirmed by further research.

References


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P032–EN Epidemiological study of musculoskeletal injuries in elderly patients attending physical medicine and rehabilitation consultations

A. Jellad a,*, M.A. Bouaziz c, S. Salah c, H. Migau d, Z. Ben Salah
CHU Fatouma-Bourguiba, rue 1er Juin, 5019 Monastir, Tunisia

*Corresponding author.

Keywords: Musculoskeletal injuries; Aged; Physical medicine and rehabilitation; Epidemiology

Objective – To study the epidemiological characteristics of musculoskeletal traumatic injuries in elderly patients (≥ 65) in physical medicine and rehabilitation (PMR) consultation.

Patients and methods – Retrospective study of medical records kept between 2007 and 2010. The variables analyzed are epidemiological, clinical and developmental.

Results – Of 5411 consultants, 328 (6%) patients aged ≥ 65 years. 126 (38.4%) of them had a traumatic injury of the musculoskeletal system. They are composed of 65 men and 61 women with a mean age of 72.6 ± 5.9 years. The circumstances of injury were a fall of mechanical origin in 107 cases (84.9%) and secondary...