**Discussion.**—This is a preliminary study about the hemiplegic posture, limited by a lack of power. The hypothesis of the anteriorisation of COP associated with spasticity is not statistically significant but was found with two patients who were assessed twice: anteriorisation of the hemiplegic side COP in the second pass associated with the development of spasticity. This study should be completed by the inclusion of more patients to look for a correlation between these statistical parameters, medical examination and clinical evolution.

http://dx.doi.org/10.1016/j.rehab.2012.07.298

**P056-e**

**Isokinetic study of the impact of styloid fracture with a volar plate osteosynthesis on pronosupination strength**

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**Hypothesis.**—Recent studies have shown that the presence of an associated ulnar styloid fracture does not adversely affect the clinical and functional outcomes in patients with a distal radius fracture. The purpose of this study was to evaluate a series of patients with an internally fixed fracture of the distal part of the radius to test the null hypothesis that there is no difference in isokinetic evaluation between those patients with an untreated fracture of the unstable styloid base and those with no ulnar fracture or a tip fracture.

**Methods.**—Ten consecutive patients were recruited at 1 year after ORIF with a volar locking plate of the distal radius. The patients were divided in two groups: group 1: patients with a concomitant untreated fracture of the base of ulnar styloid; group 2: patients without fracture of the ulnar styloid or just a tip fracture. A control group (Group 3) was composed of six healthy patients without history of trauma of the wrist. All the patients were tested bilaterally for isokinetic and isometric pronation and supination strength. Clinical outcomes such as grip strength, range of motion, Mayo Clinic Wrist score (MWS), DASH score and Lidstrom classification were evaluated by an independent observer and correlated with isokinetic results.

Statistical analysis was performed with Kruskall-Wallis test and Wilcoxon test ($P < 0.05$).

**Results.**—There were no significant differences in range of motion; grip strength; MWS and DASH scores and isometric strength of pronation and supination. Isokinetic evaluation showed a significant decrease of the supination strength between group 1 compared to group 2 and 3 at 45°/s ($P < 0.01$). The control of force is affected in a general, not just in the affected hand. This was more pronounced at lower hold-forces (5N) than at 10% MVC. Moreover, patients displayed longer release durations, as well in the unaffected hand. This is a preliminary study about the hemiplegic posture, limited by a lack of power. The hypothesis of the anteriorisation of COP associated with spasticity is not statistically significant but was found with two patients who were assessed twice: anteriorisation of the hemiplegic side COP in the second pass associated with the development of spasticity. This study should be completed by the inclusion of more patients to look for a correlation between these statistical parameters, medical examination and clinical evolution.

http://dx.doi.org/10.1016/j.rehab.2012.07.299

**P057-e**

**The control of force is affected in a general, not just in a task-specific manner in writer’s cramp**

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**Objective.**—Writer’s cramp is an acquired task-specific focal dystonia and involves involuntary sustained muscle contractions causing abnormal writing and hand posture. Previous studies have shown that patients with writer’s cramp apply higher than normal forces during writing with the affected hand (Hermsdörfer et al., 2011). This has also been shown for the asymptomatic hand (Serrien et al., 2000). Furthermore, cortical mapping of digit representations in these patients revealed no unilateral but bilateral abnormalities (Meunier et al., 2001). We consequently hypothesized that writer’s cramp affects the control of force in the hand in a non-specific fashion. Therefore the objective was to show that deficits occur in both hands and in tasks other than writing.

**Methods.**—We have developed a grip force task that allows for the quantification of the degree of control (i) during a non-writing task, and (ii) for the writing and the non-writing hand. The task requires visuomotor tracking of isometric power grip force in a ramp-hold-and-release paradigm. We quantified the precision and the variability of the tracking as well as two aspects of timing: force onset and release duration. Two levels of hold-force have been tested: 5N and 10% MVC. This was done in both hands and also in a bimanual force-matching paradigm. Eleven patients were compared to 17 age-matched control subjects.

**Results.**—In the unimanual task and compared to control subjects, patients showed increased tracking error and greater force variability in the affected as well as in the unaffected hand. This was more pronounced at lower hold-forces (5N) than at 10% MVC. Moreover, patients displayed longer release durations, as well in the unaffected hand. This is a preliminary study about the hemiplegic posture, limited by a lack of power. The hypothesis of the anteriorisation of COP associated with spasticity is not statistically significant but was found with two patients who were assessed twice: anteriorisation of the hemiplegic side COP in the second pass associated with the development of spasticity. This study should be completed by the inclusion of more patients to look for a correlation between these statistical parameters, medical examination and clinical evolution.

http://dx.doi.org/10.1016/j.rehab.2012.07.300

**P058-e**

**Effect of formed plantar orthosis on postural control in upright stance**

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**Objective.**—The balance control system depends on basic components concerning biomechanics, and a set of reflexes that triggers equilibrium response based, on visual, vestibular and somatosensory senses [1]. In this study we have examined whether extensive stimulation of a sensory cor to modify postural balance?.

**Materials and methods.**—Two groups of subjectively healthy subjects (21.6 ± 1.0 years) were randomly assigned to posturographic measurements wearing formed plantar orthosis (15 subjects) or flat (not formed but in same material) soles (15 subjects), in condition eyes opened and then eyes closed A similar test was performed in the same conditions after 1 week wearing formed or flat orthosis.

**Introduction.**—The balance control system depends on basic components concerning biomechanics, and a set of reflexes that triggers equilibrium response based, on visual, vestibular and somatosensory senses [1]. In this study we have examined whether extensive stimulation of a sensory cor to modify postural balance?.

**Results.**—In the condition eyes opened, we observed a significant reduction of the area of body sway, and of the medial-lateral amplitude in the group using