Dependency and autonomy evaluation after stroke

N. Gadera, H. Ben Aicha, W. Kessoamtini, S. Younes

*Unité MPR, CHU Tahar Sfar, 5111 Mahdia, Tunisia

Service de neurologie, CHU Tahar Sfar, Mahdia, Tunisia

E-mail address: nadra.gd@gmail.com

Keywords: Stroke; Autonomy; Dependency

Introduction. Strokes are sources of functional disabilities affecting the patient’s autonomy. The main objective of this study was to evaluate autonomy of stroke victims before and after rehabilitation.

Patients et methods. This is a prospective study including 70 patients suffering from stroke attacks and addressed for rehabilitation. We evaluated their autonomy before, at the end of treatment and 6 month after. This evaluation was based on KATZ autonomy scale of activity of daily living and by the MIF scale.

Results. The three patients did not present adverse effect of magnetic stimulations. Initially, before rTMS, all the patients presented a pharyngeal residue of all the bolus, without any efficient swallowing with an increase of superior oesophageal sphincter. This was responsible of bronchial aspirations. After three sessions of rTMS, 18 months later, one patient could have a partial oral feeding, one patient recovered a pharyngeal peristaltism with an opening of the superior oesophageal sphincter, and one patient did not improve the swallowing function.

Conclusion. This study showed that transcranial rTMS could be an original treatment of oropharyngeal dysphagia in brainstem infarction and should be evaluated.

http://dx.doi.org/10.1016/j.rehab.2013.07.062

Discussion. Many autonomy scales are exposed in literature, but MIF remains a reference scale to evaluate dependency. In this study, it is clear that the stroke deteriorate considerably the autonomy of the patient especially in the presence of complications or comorbidity. An early rehabilitation is essential to minimize the functional after-effects and to improve autonomy of stroke victims.

http://dx.doi.org/10.1016/j.rehab.2013.07.063

P066-e

Depression after stroke: What characteristics?

K. Layadi, A. Abderrahim, M. Kahli, N. Douba, M. Moulay, M. Rémaoun

Service de médecine physique, CHU d’Oran, 1, boulevard Benzerjeb, 31000 Oran, Algeria

*Corresponding author.

E-mail address: layadikhaled@gmail.com

Objective. The main aim of this study is to seek the depression within a population of stroke hemiplegics and to secondarily identify possible relations between this disorder and the factors associated. prognoses.

Method. It is an exploratory study which concerned 214 adult hemiplegics stroke victims, admitted in the Department of Physical Medicine of the CHU Oran over one 26 months period. Were evaluated subjects that do not have important vigilance disorders, a state of insanity or a major aphasia. We based ourselves on the criteria of the DSM-IV to diagnose depression. Autonomy in the activities of everyday life is somewhat limited (P < 0.0001). A correlation between the depression and the presence of sexual dysfunctions (P < 0.05), of orthopedic disorders (P < 0.05) or of cognitive deteriorations. A correlation between the depression and the presence of sexual disorders is established (P < 0.0001).

Discussion and conclusion. The depression was found in 56.1% of the cases. This result is in the broad interval reported in the literature. The severity of the disability and the deterioration of certain functions are many elements supporting and/or worsening the occurrence of the depression in poststroke hemiplegics.

http://dx.doi.org/10.1016/j.rehab.2013.07.064