CO42-002-e

Questionnaire survey of prolonged disorder of consciousness rehabilitation service provision

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Keywords: Consciousness; Assessment tools; Questionnaire; Stimulant medications

Objective.– To ascertain current service delivery for patients in a prolonged disorder of consciousness (PDOC) in the UK.

Methods.– A postal questionnaire was developed and piloted in Ireland. After revision for the UK, it was posted to 230 UK based consultant members of the British Society of Rehabilitation (BSRM).

Results.– Sixty responses (26%) were received: 36 units did not provide services for PDOC, but 28 did: 4 questionnaires excluded due to incomplete data, leaving n = 24. Thirteen (54%) had established admission criteria, but 20 (83%) had no formal care pathway. Thirteen (54%) units cared for 52 weeks. The most frequently used assessment tools were the WHIM (71%); GCS (56%); and SMART (14%). Fourteen (58%) respondents routinely used medications to stimulate increased wakefulness, including Amantadine (46%); and Zolpidem (94%). Only 6 (26%) provided routine follow-up reviews for patients with PDOC.

Discussion.– This first large-scale UK survey of current practice for PDOC patients is thought likely to represent most units in the UK that deliver a PDOC service. Service consistency may be better achieved through the establishment of a network specialising in PDOC, with a uniform approach to assessment, management and follow-up care.

http://dx.doi.org/10.1016/j.rehab.2014.03.1578

CO42-004-e

Rehabilitation of hemispatial neglect. Utility to combine prism-adaptation and methylphenidate. RITAPRISM study

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Keywords: Stroke; Hemispatial neglect; Prism adaptation; Methylphenidate

Background.– After a right hemisphere stroke, non-spatially lateralized attentional and hemispatial dysfunctions may worsen the disability of patients with hemispatial neglect.

Objective.– The purpose of this study was to assess the utility to combine prism adaptation (PA) and methylphenidate.

Methods.– We performed a randomized-controlled-trial comparing two groups of patients with left hemispatial neglect: a group treated by PA and methylphenidate and a group treated by PA and a placebo. The treatment lasted five days. The primary outcome was the autonomy gain on the functional independence measure (FIM) one week after the treatment was discontinued. The effects of the treatment on non-spatially lateralized and spatially lateralised cognitive functions were also assessed with classical computer and paper and pencil tests.

Results.– Twenty-four patients were enrolled. The model showed a significant improvement of the FIM score with time and a significant difference according to the group. Neglects tests did not change differently in the two groups. By contrast, the number of omitted responses on the sustained attentional computerized test decreased with a trend toward a difference between groups.

Discussion.– Results suggest that there is an advantage to combine treatments directed to non-spatially lateralized attention and spatially lateralized cognitive functions in hemineglect patients.

http://dx.doi.org/10.1016/j.rehab.2014.03.1580

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