FUNCTIONAL POSSIBILITIES AFTER ISCHEMIC STROKE

I. Rambabova[1], D. Vasileva[1], V. Atanasova-Rambabova[2], M. Rambabova[2]

[1] Faculty of Medical Sciences, University "Goce Delchev" – Shtip, Republic of North Macedonia

[2] Private gynecological clinic Dr.Valentina Rambabova, Shtip, Republic of North Macedonia

Abstract

A stroke is an emergency situation, and the faster the patient receives treatment the better. But what happens in the days, weeks and months after a stroke? At times, the process can be slow and uncertain, and different people recover in a range of ways.

Introduction

Strokes are still the leading cause of disability worldwide and starting rehabilitation as soon as possible after the cause of the stroke is treated is vital in stroke recovery.
Functional status and rehabilitation are also recently identified factors that are significant for recovery.
Functional status refers to the ability of an individual to perform the normal daily activities required to meet their basic needs, fulfill usual roles, and maintain health and well-being.
Functional status subsumes related concepts of interest; functional capacity and functional performance.

While functional capacity represents the capacity of an individual to perform daily activities in the physical, psychological, social, and spiritual domains of life, functional performance refers to the activities that people actually participate in during the course of their daily lives.

Materials

We studied 23 patients of average age of 57.1 ± 8.8 years after supratentorial IS, with severity of paresis according to Chedoke-McMaster - 4th stage and disease duration 1.4 ± 0.5 months. For the purpose of the analysis, functional independence test (FIM) and a Berg balance scale (BBS) were used in the study.

Methodology

The applied kinesitherapy is based on the basic principles of modern neurorehabilitation: to be individual, intensive and specifically oriented; and the principles of motor learning: task specificity, active patient participation, repetition, adaptation of complexity, feedback and variability / contextual intervention.

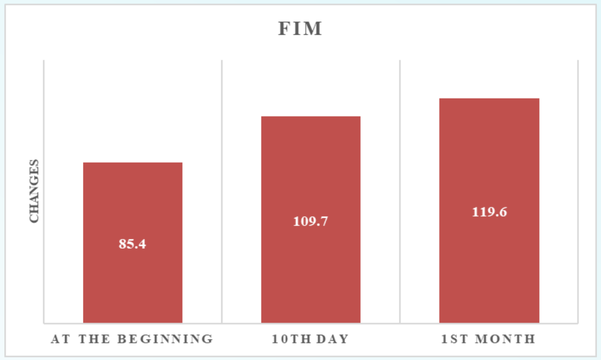

Fig. 1

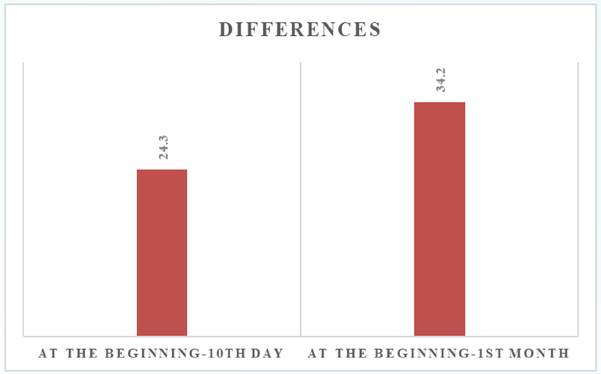

Fig. 2

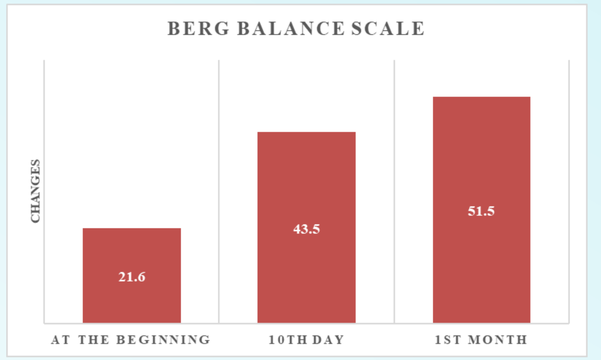

Fig.3

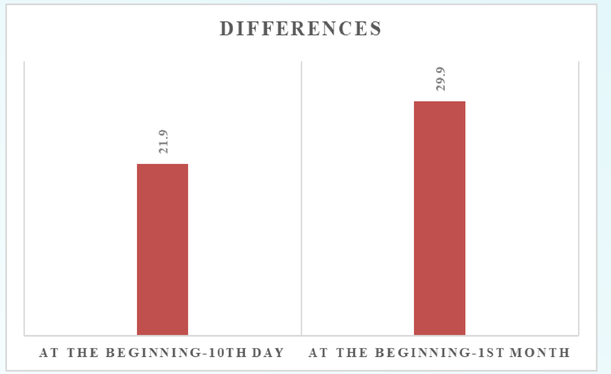

Fig. 4

Results

The study shows that the applied kinesitherapy permanently improves the functional capabilities of patients with IS, and the results are most recognizable in the 1st month of treatment ($p < 0.001$).
The goal of rehabilitation is to restore function as close as possible to prestroke levels or develop compensation strategies to work around a functional impairment.
The goals of treatment are to prevent life-threatening complications that may occur soon after stroke symptoms develop, prevent future strokes, reduce disability, prevent long-term complications and help the patient get back as much normal functioning as possible through rehabilitation.

Conclusion

A key part of rehab is taking steps to prevent a future stroke. To stay in good health, you may need to take medicines and make some lifestyle changes.
You have the greatest chance of regaining your abilities during the first few months after a stroke. So it is important to start rehab soon after a stroke and do a little every day.