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Role of phosphodiesterase (PDE) inhibitors and TNF alpha blocking agent with goal based physical therapy in functional recovery of stroke patient: a case studySoniya Shah¹, Deepak Goel¹¹Max Healthcare, India

Objective: To investigate the neuronal recovery pattern of a massive MCA infarct after administration of neuroprotective-NP agents along with goal based physical therapy.

Method: We tried to modify the outcome with help of combination of NP agents for which we have given cerebroprotein inj., Edaravone inj. for 7 days, PDE 1 inhibitors (Vinpocetine) for 1 month, Eterncept inj. (TNF alpha blocking agent) within 7 days of stroke along with intensive physical therapy as per stroke protocol from day 2.

Scales used for measuring clinical improvement: MMSE, MRC Grading, Barthel index-BI, Motor Assessment Scale (MAS) and Modified Rankin Scale (MRS) on day 0, day of discharge, at 4 and 8 weeks post stroke for examine cognitive status, limbs voluntary strength, basic ADLs and overall degree of disability respectively.

Result: We took a case of post massive MCA infarction (right) which was not suitable for thrombolysis at that time because the patient was out of window period when we received in emergency unit of our hospital. After selection of drugs by our neurologist and physical exercises as per stroke protocol by PT, analysis yielded significant differences in these outcome measures within first 15 days of therapies in hospital stay; then progresses was continued in term of limbs voluntary movements (lower limb>upper limb), basic ADLs, gait pattern and overall improvement in degree of disability or dependence within first 2 months of therapies which we had selected for observation in our research. However, arm function (gross and fine motor movement), accuracy in gait cycle were still not much modulated, it could be selection of short term follow up period (initial 8 weeks). Here, we had mentioned significant improvement in numerical form on various scales such as MRC, MRS, BI, MAS, have been listed in table1, table2 and table3.

Conclusion: Combination of neuroprotective agents with goal based intensive physical therapy can lead to significant improvement in massive infarction. Further, large scale, and multicenter studies along with long term follow up are required to validate the current hypothesis.

Biography

Soniya Shah, completed master in physiotherapy MPT (Neurology) from Garhwal Central University, Srinagar India on 2012. She is working with max healthcare India in max super specialty hospital Dehradun unit under max institute of neurosciences Dehradun (MIND) team. As a consultant Neuro-physical therapist and coordinator of neuro physiotherapy services for out and in-patient care deals with the various brain and spine related disorders. She do examination of client physical ability using functional ability testing, impairment scales, other tests and procedures, observe and review physician/surgeon referrals and patient medical records to formulate an accurate diagnosis and best course of treatment. Also, manage all documenting related progress notes, discharge summaries, home therapy plan of in-patients and do volunteer duties on in-house seminars and conferences. Routinely, provides comprehensive training/ academic sessions in PT techniques to nursing and other medical personnel as well as family members of patients. Lastly, keep current on literature and research in the field, provides up to date best practice information.

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