

3rd International Conference and Expo on

Physiotherapy

October 13-15, 2016 Kuala Lumpur, Malaysia

Keynote Forum

Day 1



Physiotherapy 2016

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Faris Alshammari

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Promising Intervention to Reduce Body Sway in Elderly People

One out of three people who are 65 years or older fall every year. Studies have shown a direct relationship between increased body sway and the incidence of falling in the elderly. Body sway increases with aging due to age related degenerative changes or higher incidence of diseases such as diabetes. The purpose of this study was to examine the effect of tactile feedback (novel intervention) compared to visual feedback on body sway in elderly with or without diabetes. Twenty eight normal healthy elderly people and 23 elderly with Type 2 Diabetes were assigned randomly to either tactile feedback or visual feedback intervention. Body sway was measured using a balance platform while standing on platform with eyes open then eyes closed and standing on foam with eyes open then eyes closed. There was no significant difference between groups using visual feedback or tactile feedback. However, there was a significant reduction in body sway using tactile feedback in elderly while standing on foam with eyes open ($1.0 \pm .31$ vs. $1.9 \pm .8$, $p=.006$) and eyes closed ($1.8 \pm .7$ vs. 3.3 ± 1.5 , $p=.001$). In the elderly with diabetes, there was a significant reduction in body sway using tactile feedback while standing on foam with eyes closed ($1.4 \pm .5$ vs. $2.3 \pm .8$, $p=.045$) but not with eyes open. There was significant reduction in body sway in elderly with diabetes using visual feedback while standing on foam with eyes open ($1.3 \pm .5$ vs. 2.1 ± 1.1 ; $p=.018$) and eyes closed ($2.0 \pm .8$ vs. 3.1 ± 2.1 ; $p=.003$). There was significant reduction in body sway using visual feedback in the elderly while standing on foam with feet apart and eyes open ($1.4 \pm .7$ vs. $1.8 \pm .9$; $p=.023$), and eyes closed ($1.9 \pm .9$ vs. 3.4 ± 1.8 ; $p=.002$). This study offers a novel technique to improve body balance in elderly with or without diabetes.

Biography

Alshammari Faris has a BSc in Physical Therapy from the Hashemite University, Jordan. He pursued his higher education in USA at Loma Linda University where he achieved a Master's degree in Physical Therapy in 2010 and PhD in Rehabilitation Science in 2015. He is an Assistant Professor at the Hashemite University, Physical and Occupational Therapy Department, Jordan. He has published more than 23 papers in reputed journals. He invented new intervention (Tactile Feedback System) to improve body balance in elderly. He received many Excellence Awards and Full Scholarship to finish his Master's and PhD.

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Mahboob ur Rahman

Pakistan Physiotherapy Association, Pakistan

Effective tool in polio management “Mahboob Power Evaluation and Therapeutic (MPET) chart” original research article by Mahboob ur Rahman

Background: Elimination of disease of Polio is the top most priority of the Govt. of Pakistan as well as all the provincial governments. Each year polio eradication efforts are made on regular basis in which various governments, non-government organizations, INGOs, International donors and civil society takes active part. But despite all these enormous efforts still a considerable number of polio affected children emerge throughout the country. The province of Khyber Pakhtunkhawa is especially very vulnerable in this regard due various reasons; the migrants and refusals are the two most common causes. Thus, the people especially the children when get affected by the polio and become paralyzed then they need special and long treatment at home and the at the health facilities. There are various treatment and rehabilitation measures for treatment of polio and use of MPET chart is one of them.

Objectives: The aim of our study was to use and see the utility of the redesigned Mahboob Power Evaluation and Therapeutic chart in the treatment of polio affected children.

Methods: The study was under taken in a controlled environment in Habib Physiotherapy Complex, Peshawar. Physical Observation method was used for treatment and assessment of results of the Physiotherapy tool. In the treatment muscle assessment was done, reviewed after 4 months. The improvement in Muscle power is noted and new plan given. Data was collected through recording results from the Muscle chart. The participants were selected random on the basis of as and when came to HPC for treatment. The whole polio affected population of Khyber Pakhtunkhawa was the population of the Study and 30 number of polio affected people was the sample size.

Conclusion: The MPET Chart is an effective tool in Post Polio Paralysis Management.

Key Words: Key words used were:-Physiotherapy, MPET Chart, Redesigned MPET Chart, Therapeutic Regime, Oxford Muscle Testing Chart

Results: Improvement Status of Polio Patients after Implementation of MPET Chart (n=30). The Response percentage is 63% (19) and the Non Response percentage is 36% (11). Followed is n= 13 and the Not Followed is n= 6. The Improvement Status is 61% (08) Yes and 38% (05) No, whereas the Non Improvement Status is 0% (0) Yes and 100% (06) No. Thus the Success rate is 61% as responded by using the MPET Chart.

Conclusions: MPET chart is an effective tool in post polio paralysis Management.

Biography

Mahboob ur Rahman graduated in Physiotherapy from Karachi University, Pakistan. In 1997, Habib Physiotherapy Complex was established whereas Mahboob ur Rahman the founder and Chairman for the same. It's first ever Rehabilitation Complex in the country focusing on stroke rehabilitation, polio, cerebral palsy with facilities as Physiotherapy, Speech, Audiology, Orthotics, Prosthetics, Orthopedic and Neuro Consultants. In 2007, Mahboob School of Physiotherapy, the Pioneer Institute in the province was established; where now it offers Doctor of Physiotherapy (D.P.T.), Post Graduate Courses as M. S. Physiotherapy and Post Professional Doctor of Physiotherapy. I, Mahboob ur Rahman have been awarded with recommendation by Government of Pakistan as Quid e Azam Gold Medal and King Abdullah Gold Medal. I have been member of Pakistan Bait ul Mal Khyber Pakhtunkhawa Province for 3 years. My research oriented M. P. E. T. Chart for the Rehabilitation of the Polio affected children has been very positive impact in Polio Children Rehabilitation. Recently, I have been elected Chairman, Board of Directors; Pakistan Physiotherapy Association (PPTA) for next two years. Besides the publication of research papers, my book Chest Physio for the War Wounded has been published by National Book Foundation, Islamabad.

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Muhammad Jamil Sabit

Pain & Physical Therapy CME Academy, Pakistan

The effects of spinal epiduroplasty with and without physical therapy rehabilitative program in patients with low back pain due to Failed Back Surgery Syndrome (FBSS)

Objective: Low back pain is one of the leading causes of musculoskeletal problem. 70% to 80% patients visit health care setups having acute or chronic low back pain. The objective was to find the effects of spinal epiduroplasty with and without exercises rehabilitative program in patients with low back pain after failed back surgery syndrome.

Method: 50 low back pain patients after failed back surgery syndrome, who were rehabilitated at Pain & Physical Therapy CME Academy Lahore Pakistan from 16th November 2015 to 1st April, 2016 with variable duration of pain after failed back surgery syndrome, were treated with spinal epiduroplasty and exercises rehabilitative program. The patients were divided into 2 groups according to the treatment plans. Group-I was treated with spinal epiduroplasty. Group-II was rehabilitated with combination therapy (spinal epiduroplasty plus exercises regime). The effects of treatment in both groups were assessed with visual analog scale (VAS), before the treatment, at day 1 & 10th day after the treatment.

Results: VAS of all patients after spinal procedures was decreased but the results were more significant in Group II ($p < 0.05$).

Conclusion: Exercises rehabilitation plus spinal epiduroplasty is one of the best treatment options for the patients suffering from low back pain due to failed back surgery syndrome.

Biography

Muhammad Jamil Sabit has the honor of being first Pakistani Pain Physician who was awarded Fellow of Interventional Pain Practice (FIPP) credentials by the World Institute of Pain (WIP) on his brilliant success in 2013 FIPP exam. He is Official Mentor of WIP for the training of fellow physicians in interventional pain practice as well as FIPP faculty & examiner. After completion of his MBBS, he pursued the field of Anesthesiology as Diplomate since 1992 at Mayo Hospital Lahore, a tertiary care teaching hospital, affiliated with King Edward Medical University, Lahore, Pakistan. His field of interest remained chronic pain management services. He did his MSc (Pain Medicine) and became pioneer of advanced pain management services in Pakistan. He is President of Pain & Physical Therapy CME Academy, Lahore, Pakistan & Director of Pain Management Services Al Razi Health Care, Lahore, Pakistan.

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Afsaneh Nikjooy

Iran University of Medical Sciences, Iran

Accurate differentiation of dyssynergic defecation patients from normal subjects based on abnormal anorectal angle in MR defecography

We aimed to study the differences between the dynamic indices of the pelvic floor, i.e. anorectal angle and perineal descent, in dyssynergic defecation patients in comparison with healthy controls, based on MR Defecography. 22 constipated patients with dyssynergic defecation and 14 healthy asymptomatic subjects were included in the study. 4 MR Defecography dynamic indices, including paradox (abnormal anorectal angle change), perineal descent during straining, perineal ascent and narrowing of anorectal angle at squeeze were measured in patients and healthy subjects. Paradox index had the highest sensitivity (95.45%) and specificity (92.86%) for detection of dyssynergic defecation, with an R2 value of near 1 (0.902). The sensitivity and specificity of other indices were not high; therefore, no significant improvement could be achieved using other indices along with paradox index. Negative predictive value (92.85%) and Positive predictive value (95.45%) were only high in paradox index. Paradox index was indicated to be the best finding of MR Defecography for identifying dyssynergic defecation patients from healthy controls. Hence, MR Defecography could be exploited as a reliable tool to show the patients the paradoxical function of their pelvic floor muscles, which could enhance their imagination of the correct defecation pattern during their therapy.

Biography

Afsaneh Nikjooy, PhD, is an Assistant Professor of Physical Therapy in Department of Physical Therapy, Iran University of Medical Sciences, Tehran, Iran. She is a member of International Continence Society as well as the Iranian Continence Society. She has worked in pelvic floor physiotherapy for more than 12 years and has managed several courses of pelvic floor physiotherapy for Master's students in this field in the Faculty of Rehabilitation, Iran University of Medical Sciences.

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