The Impact of Outpatient Therapy After Stroke

According to the American Heart Association, over 795,000 Americans are impacted by stroke each year, meaning on average a stroke occurs every 40 seconds. With a number this high, it is not surprising that stroke is the leading cause of adult disability. The experience can be scary for patients as well as their families, because of the major impact a stroke can have on physical, emotional, work and personal aspect of life. Rehabilitation after stroke can help patients restore function, confidence, and a sense of well-being. Depending on the severity of stroke, there are different levels of rehabilitation services available through our organization including acute, long term care, inpatient, skilled nursing and outpatient.

As an outpatient physical therapist at Penn Therapy & Fitness Rittenhouse, I often work with patients who have completed their inpatient stroke specialty therapy program at Penn Rehab, and have returned home. Often times, patients recuperating from a stroke are seen for outpatient physical, occupational and speech therapy. When treating with a patient, I create a physical therapy program concentrated on their personal goals through treatment appropriate for their capabilities. Education is an important part of post-stroke therapy to help patients learn how to feel more comfortable in their homes and community. This can include fall prevention, adaptive resource training, and modified ways of doing routine task.

For many patients in outpatient therapy after a stroke, a common goal is to improve walking. In order to meet that goal, gait training is often incorporated in their physical therapy sessions. Depending on the current mobility, overall health and abilities, gait training can be approached in a variety of ways.

If you want to walk then you must practice walking and a lot of it. One way I help my patients achieve their goal is incorporate body weight supported gait training into sessions. It uses a harness system to support patients as they walk on the ground or on a treadmill without their full body weight. By de-weighting a patient by 30-40% during body weight supported gait training, allows for easier movement while focusing on walking. The overall goal is for the patient to maximize steps as their capacity to support more of their own body weight as walking increases. While undergoing body weight supported gait training, a high number of steps during
each session are the goal. The goal of the high numbers of steps is to help what has been learned in therapy to continue after therapy ends. The best improvements in walking ability after stroke involve combining a variety of step-focused training activities with higher cardiovascular intensities (within a safe level).

Gait training involves much more than walking. Many of us do not think about the complex movement patterns involved in walking. Each session, I review the last session’s progress and challenges with the patient to see how to adjust parts of their treatment program. Each session involves breaking down the complex movement of walking into smaller parts to allow for easier learning.

Every patient’s needs and treatment program will differ from patient to patient, but the overall focus on increasing independence post-stroke is universal. Talk with your neurologist and primary care physician to see how outpatient physical therapy can be incorporated into your post-stroke recovery treatment plan. To learn more about neurological rehabilitation available at Penn Therapy & Fitness, click here.

About the Blogger:

Elena Newland, DPT, received her Physical Therapy degree from Thomas Jefferson University in 2001. Her clinical expertise is in the treatment of individuals with spinal cord injury and dysfunction. She is one of the lead therapists for the spinal cord injury and dysfunction program planning team and acts as a mentor for Penn Therapy & Fitness. Elena is an active member of the American Physical Therapy Association. She coordinates professional educational symposiums for the health system, has published on the subject of pressure ulcer prevention, and participates in research related to spinal cord injury.

Citations:


