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Longitudinal outcomes following a randomized controlled trial of dynamic splint stretching for carpal tunnel syndrome

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Objective: The purpose of this longitudinal outcome study was to determine if dynamic splint stretching (immediately after diagnosis) had effects on patients' choices for surgical treatment of carpal Tunnel Syndrome (CTS).

Design: A randomized, controlled trial's longitudinal follow up.

Setting: A single surgical hand center in Maryland, USA.

Participants: Fifty patients (10 Men, 40 Women, Mean Age 51.2 ± 12 years) were recruited for this study upon diagnosis of CTS.

Intervention: Dynamic splint stretching was randomly applied to experimental subjects who wore the device for two 30-minute sessions each day with sequential, bimonthly increases in splint tension for 60 days.

Main Measures: Choice of surgery over 12 months.

Results: The final, longitudinal outcome showed a 72% reduction in surgery chosen by the experimental patients (N=25), compared to 38% reduction for control patients (N=25).

Conclusion: Immediate treatment with dynamic splint stretching reduced CTS symptoms and reduced the patients' choice for surgery, with abundant financial savings.

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Physical therapy intervention for post shunt hemiplegic cerebral palsy: A case study

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Sari is a boy, his age is 3 years old, diagnosed as cerebral palsy in form of right hemiplegia with a history of hydrocephalus (with a shunt device at the age of one week). Using practice pattern 5C as it was determined that deficits in motor function and sensory integrity. It reveals that he suffered from delayed motor development (rolling, sitting, standing and walking) with limited use and lack of awareness of right arm for self care activities. Results of the Pediatric Evaluation of Disability Inventory (PEDI) in social function domain indicated difficulty with expressive communications, ability to report self and safety within the community. After engaging an especially designed physical therapy program for 12 months, five times weekly with family education for his home program in the first 4 months after that physical therapy was decreased to three times every week for the next 4 months, then 3 times every 2 weeks for the last 4 months, the child showed significant improvement in motor functions and sensory integrity with higher level of daily living in home and outdoor activities (ADL). So our finding confirmed the need for the physical therapy, rehabilitation services in the treatment of cerebral palsied children in order to reach our goals and expected outcomes.

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