

Orthotic intervention following stroke: A survey of stroke therapists' practice and views

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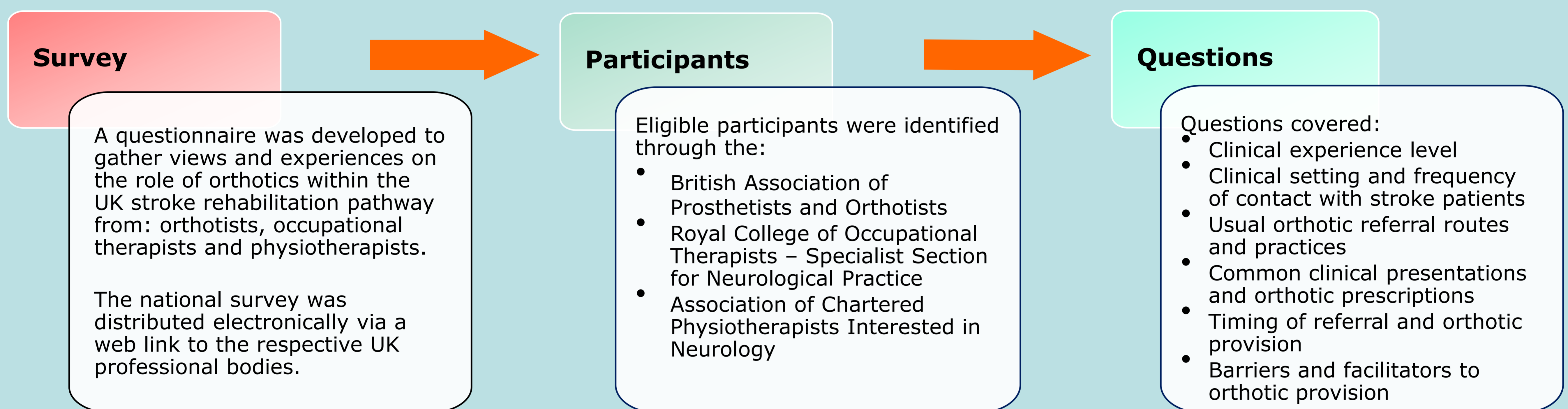
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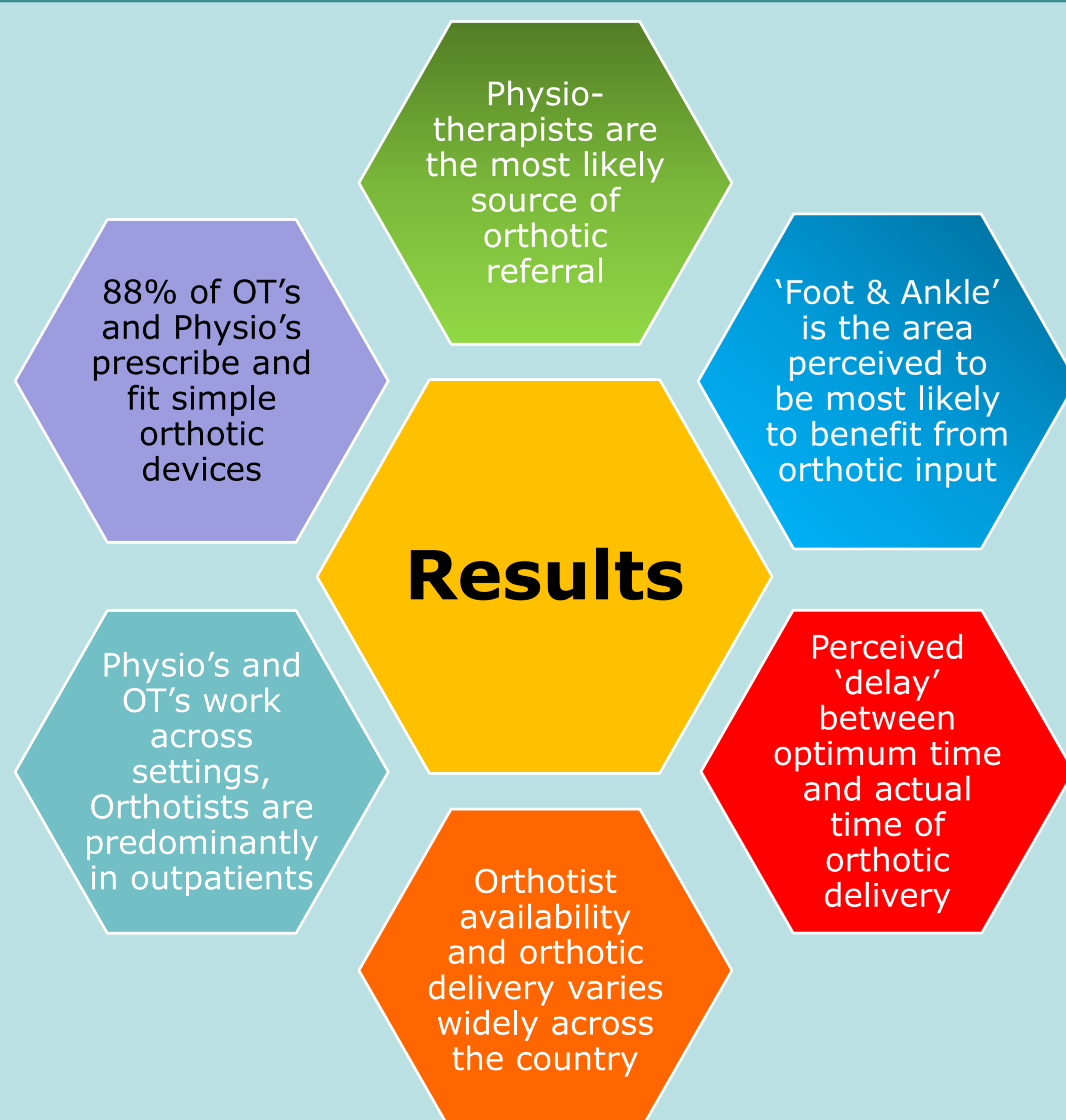
Background

- Many stroke survivors have difficulty with weak or paralysed muscles making standing and walking difficult, and putting them at risk of developing secondary complications [1].
- Orthotic splints can help address physical difficulties post stroke by increasing independence in motor activities, preventing or reducing the development of secondary complications such as contracture [2].
- Stroke guidelines recommend 'access to' orthotic intervention [3], yet the orthotist is not included in the stroke rehabilitation Multi-Disciplinary Team (MDT). Therefore it is other health care staff who have no specialist orthotic skills, who act as the gateway to orthotic intervention for stroke patients.
- A survey to collate the perspectives of orthotists and other stroke therapists on orthotic intervention after stroke was warranted.

Methods



Results



Conclusion

- Orthotics is perceived to be an important aspect in the stroke rehabilitation pathway with physiotherapists and occupational therapists playing a significant role in the referral for and delivery of orthotics following stroke. Timing of orthotist and orthotic involvement after stroke is of key interest, with joint orthotist assessment with other members of the stroke rehabilitation MDT desirable.
- Current barriers to orthotic provision for stroke patients were; poor awareness and understanding of orthotic interventions, lack of resources, and deficiency of orthotist workforce availability.

References

1. Stroke Association, "State of the nation: stroke statistics," London, 2018.
2. International Society for Prosthetics and Orthotics, *Report of a consensus conference on the orthotic management of stroke patients*. Copenhagen, 2004.
3. Intercollegiate Stroke Working Party. National clinical guideline for stroke. Royal College of Physicians; 2016.