Identifying functional outcomes and parent/child concerns following paediatric stroke

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Objectives
iv) Describe the functional abilities of children post-stroke.

Method
A prospective study was approved by the Ethics in Human Research Committee, The Royal Children’s Hospital (the RCH), Melbourne, Australia.

Participants
Inclusion criteria:
• primary diagnosis of stroke (first presentation at either time of admission or at follow-up).
• All children (with the exception of one child who scored at the highest level in self care) demonstrated clinically significant gains in self care and mobility skills at 3 months post-stroke.

Results
Participants
26 children
• 14 boys
• aged 7 to 16 years
• 22 had ischaemic stroke; 4 had haemorrhagic stroke
• 8 children joined the study at time of acute onset of stroke; 1 was lost to review follow-up (n=7)

Data Analysis
Group 1 (n=7)
Child 1 and Child 23, showed smaller improvements from acute to 3 month follow-up
• For each of the PEDI domains of self-care, mobility and social function one child, Child 21, achieved full scores at time of acute assessment which were maintained at 3 month follow-up assessment.

Summary
i) Investigate the PEDI as a measure of functional abilities in the paediatric stroke population

Recommendations
Based on this preliminary evidence, consistent clinical use of the PEDI at acute and follow-up assessment is recommended.

References

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References