

MEETING ABSTRACT

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Home-based carer-assisted therapy for people with stroke: findings from a randomised controlled trial

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From 6th Postgraduate Forum on Health Systems and Policies
Melaka, Malaysia. 21-22 May 2012

Background

The benefits of engaging carers in the rehabilitation of people with stroke have not been well-researched despite emphasis on shared responsibility between healthcare providers and the stroke patient's family. This study aimed to assess the effectiveness of a task-oriented training assisted by carer for stroke patients living at home following hospital rehabilitation.

Materials and methods

A single-blinded randomised controlled trial was conducted on 91 stroke patients. In all, 76.5% males with mean age of 58.9±10.6 years and median stroke duration of 13.0 months (range 6-84) completed intensive rehabilitation at a tertiary hospital. The control group received outpatient group exercise led by therapists while the experimental group was assigned to a home-based family-assisted task-oriented training. Primary outcomes were mobility (Rivermead Mobility Scale), balance (Berg's Balance Scale), lower limb strength (5-Times-Sit-to-Stand Test) and gait speed. Secondary outcome was health-related quality of life as measured using EQ5D-Visual analogue Scale. All assessments were carried out at baseline and at week twelve of intervention. An intention-to-treat analysis was used to evaluate outcome of the interventions.

Results

No statistical differences were found between the experimental and the control group in all outcomes (all $p > 0.25$) at completion of the trial. Both groups improved significantly in all the measures of function; mobility

($p < 0.01$), balance ($p < 0.01$), lower limb strength ($p < 0.01$), gait speed ($p < 0.05$), and in the quality of life score ($p < 0.05$). The study participants showed meaningful progress in gait speed (mean gain > 8.0 m/min) after twelve weeks of intervention irrespective of the therapy group.

Conclusion

The home-based carer-assisted therapy is as effective as the outpatient therapist-led training in improving post-stroke functions and quality of life. The programme may be considered as part of a discharge or long-term care plan for stroke patients following hospital rehabilitation.

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Published: 27 November 2012

doi:10.1186/1471-2458-12-S2-A2

Cite this article as: Nordin et al.: Home-based carer-assisted therapy for people with stroke: findings from a randomised controlled trial. *BMC Public Health* 2012 **12**(Suppl 2):A2.

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