PO08

Functional and socio-professional outcome of lower limb amputees:
About 101 cases
Houda Migou Miled∗, Hichem Ben Brahim, Yafa Hadj Hassine, Soumaya Boudokhane, Aymen Haj Salah, Nesrine Abdelkafi, Sana Salah, Anis Jellad, Zohra Ben Salah Frih
Hôpital Fattouma Bourguiba Monastir, Médecine Physique, Monastir, Tunisia

∗ Corresponding author.
E-mail address: houdamigaw@hotmail.fr (H. Migou Miled)

Objective The objective of this study was to assess the functional and socio-professional future of lower limb-amputated patients.
Patients and methods This is a 3-year-approach study of lower limb-amputated patients, followed at the Physical Medicine and Rehabilitation department of the University Hospital of Monastir. The data analyzed were epidemiological, clinical, functional [the index of locomotion (ICL), the score “Special interest group of the amputee physician” (SIGAM)] and socio-professionals.
Results We collected 101 patients with a mean age of 61.3 years with a male predominance (75.2%). Sixteen patients (15.8%) were initially braced and 58 (57.4%) had their device during the study period. Seventy-two patients had a job and only 8 amputees initially had a driving license. Forty-nine patients (48.5%) were initially able to help them. After fitting, the rates have improved from 74.13% to 82.75 as well as the walking ability.

For the device-fitted patients, ICL averaged 28.09. The average value of the non-ICL fitted patients initially increased from 25.89 to 31.25 (at least 6 months after being fitted). The SIGAM score assessment for all fitted patients showed that the most represented clinical grade was grade B for 20 patients (27.02%), followed by the degree F for 18 patients (24.32%). Forty-five patients (44.5%) had a professional outplacement and one remained able to drive after fitting.

Discussion/Conclusion The device acquisition is a significant change for patients on the functional and professional levels. It allows a significant improvement in various activities of daily life with greater autonomy.

Disclosure of interest The authors declare that they have no competing interest.

http://dx.doi.org/10.1016/j.rehab.2016.07.072

PO09

Quality of Life and psychological profile of the Tunisian lower limb amputees
Houda Migou Miled∗, Hichem Ben Brahim, Yafa Hadj Hassine, Soumaya Boudokhane, Nesrine Abdelkafi, Aymen Haj Salah, Sana Salah, Anis Jellad, Zohra Ben Salah Frih
Hôpital Fattouma Bourguiba Monastir, Médecine Physique, Monastir, Tunisia

∗ Corresponding author.
E-mail address: houdamigaw@hotmail.fr (H. Migou Miled)

Objective Evaluate the quality of life and psychological state of the lower limb amputees.
Patients and methods Prospective study on the lower limb amputees followed at the Physical Medicine and Rehabilitation department of the University Hospital of Monastir. The variables analyzed were epidemiological, clinical with an assessment of the patients quality of life using the quality score of life “Short form 36” (SF_36) and a psychological evaluation by the score “Hospital Anxiety and Depression scale” (HAD).

Results Our population consisted of 101 patients, including 16 (15.8%) initially device-fitted and 58 (57.4%) who had their devices during the study period. The mean age was 61.3 years with a male predominance (75.2%). The vascular etiology of amputation was the most frequent (37.6%). The most represented level of amputation was transtibial (73.3%). The SF36 physical component score was initially more affected than the mental component with an average score of 32.53 PCS and MCS average 36.84. These scores were significantly higher among patients initially fitted. For 74 device-fitted patients, we observed a statistically significant improvement after device MCS scores (P = 0.001) and PCS (P = 0.002), as well as all the elementary scores of the SF-36 score. This improvement was slightly higher for the mental component. The HAD-A score was 9.28 with the presence of anxiety symptoms in 47 patients (46.6%). The HAD-D score was 10.26. Forty-five patients (44.5%) had depressive symptoms. For the fitted patients there was a statistically significant difference between the HAD-A scores (P = 0.002) and HAD-D (P < 0.001) from the initial psychological state and those after being fitted.

Discussion/Conclusion The impairment of quality of life, anxiety and depression are very common among amputees. The device allows a statistically significant improvement of the HAD and the physical and mental components of the SF 36.

http://dx.doi.org/10.1016/j.rehab.2016.07.073

PO10

Tunisian lower limb amputees and satisfaction lower their prostheses:
About 74 cases
Houda Migou Miled∗, Hichem Ben Brahim, Yafa Hadj Hassine, Soumaya Boudokhane, Nesrine Abdelkafi, Aymen Haj Salah, Sana Salah, Anis Jellad, Zohra Ben Salah Frih
Hôpital Fattouma Bourguiba Monastir, Médecine Physique, Monastir, Tunisia

∗ Corresponding author.
E-mail address: houdamigaw@hotmail.fr (H. Migou Miled)

Objective Assess satisfaction of lower limb amputees towards their device.
Patients and methods Prospective study of device-fitted lower limb amputees followed at the Physical Medicine and Rehabilitation department at the University Hospital of Monastir. Epidemiological and clinical parameters were assessed with evaluation of fitted patients’ satisfaction towards their prosthesis (survey on the satisfaction of patients with lower limb amputations towards their prosthesis) (SAT-PRO).

Results We collected 74 lower limb amputees including 16 initially fitted and 58 who had their device during the study period. The average age of our patients was 62 years with a male predominance. The most frequent amputation level was transtibial (71%). The average delay of the device compared to the surgery was 10.08 months with extremes of 2–60 months. The age of the device for already fitted patients averaged 22.73 months with a range of 1–360 months.

The calculated score of satisfaction towards the prosthesis (SAT-PRO) for fitted patients averaged 32.41 with extreme varying from 18 to 51. This assessment showed an improvement in the satisfaction of our prosthesis patients. SAT-PRO means within this group was increased from 32.77 to 38.31 (P = 0.002) with an average gain of 5.54 ± 5.38. Satisfaction towards the prosthesis was positively correlated with the urban origin, high socioeconomic level, the age less than 65 years, the absence of disease history, the traumatic etiology, the level of distal amputation, the age of the device, the quality of life and the functional outcome score (ICL).

Discussion/Conclusion The level of satisfaction of lower limb amputees towards the prostheses depends on several factors. It is very important for its impact on the quality of life and autonomy.