Adolescent idiopathic scoliosis: Impact of a physical rehabilitation program performed at home on the exercise capacity
Thomas Péron*, Raphaëlle Plassat
CM&P Rennes-Beaulieu, kinésithérapie, Rennes, France
* Corresponding author.
E-mail address: peron.tom@gmail.com (T. Péron)
Objective The “Centre médical & pédagogique (CM&P) de Rennes-Beaulieu” prepares adolescents for surgical treatment of their idiopathic scoliosis (IS). This surgery has respiratory short-term consequences to the forefront of immediate complications. Two years after the surgery, the ventilatory status is correlated to pre-operative pulmonary function. The objective of the present work is to evaluate the effects of our preparation program.
Materials/patients and methods Eight teenagers followed our at home preparation program, including aerobic training, inspiratory muscle training and chest mobilizations during 2 months. The patients underwent 6-min walk tests (6MWT) before and after rehabilitation.
Results 6MWT distance increased by 62 ± 22.6 m (p = 0.0547). Forced vital capacity (FVC) increased by 4.73% (p = 0.0298), the forced expiratory volume in 1 second (FEV1) by 5.23% (p = 0.0497), maximal inspiratory pressure (MIP) by 28% (p = 0.0421) and inspiratory (MIP) by 64% (p = 0.0156). The quality of life has not been altered.
Discussion/conclusion With a similar population, V.L. dos Santos Alves et al. [1] showed a 6MWT distance increase of 128 m. Protocol was different: the amount of prescribed physical activity was higher (1080 MET minute/week vs 600) and training was directly supervised by a physiotherapist. This supervision limited compliance problems among adolescents. Our program increases the FVC, FEV1 and respiratory pressures. These parameters are essential in the prevention of immediate postoperative complications and are predicting better respiratory function. We did not show improvement in 6MWT distance. A more intensive and directly supervised aerobic training program would be more effective.
Keywords Adolescent idiopathic scoliosis; Surgery; Chest physical therapy
Disclosure of interest The authors have not supplied their declaration of competing interest.
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Home services in social speech-language pathology for people with aphasia and their family
Claire Croteau
Université de Montréal, chercheur CRIR, centre de réadaptation
Lucie-Bruneau, Montréal, Canada
E-mail address: catherine.croteau@umontreal.ca
Opinion/Feedback People with aphasia (PWA) and their loved ones claim that one of their biggest needs is to develop efficient means to communicate better “together”. Researchers suggest that conversation partner training (CPT), a training for a PWA and a loved one aiming to use communication strategies in conversations, would be most promising regarding this need (e.g. Simmons-Mackie et al., 2010). The purpose of this presentation is to report the development and the home services organisation of the social speech-language pathology part of the “service aux proches d’une personne aphasique” (SAPPA; services to caregivers of a person with aphasia). The SAPPA is a service offered by the Association québécoise des personnes aphasiques (AQPA) and financed by the APPUI aux aidants–Montréal. It allows PWA and their family living on the Montreal Island to receive free home service in CPT given by a speech-language pathologist trained to this approach. The organisation of SAPPA will be briefly described. Criteria used to evaluate public health services in Québec will be employed to evaluate the quality of SAPPA and the issues encountered: services accessibility (accessibility; equity of access), services quality (effectiveness; security; responsiveness; continuity) and resources optimisation (efficiency; viability).
Attuned services to the needs of PWA and their loved ones were developed. Thanks to the support of AQPA–Montréal and our research team, this type of services is now developing elsewhere in Quebec.
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Role of a specialized Alzheimer team in pragmatic analysis of loss of autonomy
Nicolas Auguste 1,* , Marion Moutton 1, Emilie Achour 1, Anne Ribes 2, Régis Gonthier 1
1 CHU de St Étienne, hôpital de la Charité, service NPC, St Étienne cedex 2, France
2 AMV, St Étienne, France
* Corresponding author.
E-mail address: nicolas.auguste@chu-st-etienne.fr (N. Auguste)
Objective Loss of autonomy linked to the existence of a neurodegenerative Alzheimer’s disease weakens living conditions in patients’ homes. The measure 6 of the 2008–2012 Alzheimer’s plan has enabled the creation of specialized teams Alzheimer’s (ESA) to intervene at a stage beginner to moderate disease. This study aims to highlight the loss of autonomy beginners to moderate Alzheimer’s patients and to analyze the population supported by ESA on a 6 months period.
Materials/patients and methods Retrospective analysis of the population supported by ESA Saint Etienne since October 2014 to May 2015. Quantitative analysis, descriptive questionnaire, in a subgroup of patients, loss of autonomy through stock standardized occupational therapy. Ed teams Alzheimer's (ESA) to intervene at a stage beginner to moderate disease. This study aims to highlight the loss of autonomy beginners to moderate Alzheimer’s patients and to analyze the population supported by ESA on a 6–month period.
Results Sixty-nine patients have been supported, with mean age of 81.5 years with a sex ratio of 0.44 and an average MMS to 18.8