either only on the clinical intuition or observational studies. The medicine based on
the evidence crosses today all the disciplines of rehabilitation. We never needed
to show the efficiency and to compare the costs/benefit of the TPE programs [1–3].
If the TPE efficiency programs cannot be compared between them in term of costs/
effectiveness, the authorities and the professionals of health will be unfocused.
Poorer, that will strengthen the chronically sick patients to expect a miracle
treatment and to refuse to take part in the TPE programs considering them as
“optional”. From this perspective of proof demonstration the first work showed
that the adapted physical-activities will produce a crucial role in the aim to
maintain the behavioral changes induced by the TPE programs [4].

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CO07-002-e

Educational needs of post-stroke patients and their caregivers
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Keywords: Patient therapeutic education stroke
Objective.– Show the importance of educational needs of the post-stroke
patients and of their caregivers.
Methods.– Retrospective study on 62 patients supported by our multi-
disciplinary mobile team of post stroke outpatient (HEMIPASS) in 2012. We
classified the different actions in eight domains: taken back by occupation,
research of adapted transport, developments of the domicile, self-government
in AVQ, administrative files, coordination of care, support of the patient
and aidants and actions of education they the same divided into four
groups. Different domains could concern the same patient.
Results.– Different undertaken actions were: help to return to work (6%),
research of adapted transport (24%), home adaptations (13%), rehabilitation in
activities of daily living (35%), local authorities/support services (38%),
coordination of care (43%), psychological support in patient (40%) and in
caregivers (45%) and actions of education (100%). This actions of education
concerned four main topics: cognitive and communication problems (50%),
physical care/moving (18%) and exercise and staying active (16%).
Discussion.– This work confirms the importance of educational needs of post
stroke patients and their caregivers [1–3]. In our study, needs and concerns of
the patients and caregivers are those habitually brought back [2,3].
Situations taken care by the mobile teams for post stroke patients are
advantageous for the creation of programs of Therapeutic Education of Patient
(ETP) according to recommendations of HAS [1–3].

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CO07-003-e

Organization of a multi centered therapeutic education programme (TEP) for patients after a
stroke
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Keywords: Therapeutic Education Programme; Stroke; Programme; Chain
Objective.– Legislation being favourable (loi HPST, Plan AVC 2010-2014) and
following the publication of guidelines by the SOFMER and the SFNV on post-
stroke Therapeutic Patient Education (TPE), three structures of aftercare and
rehabilitation (SSR) and a health network formed a steering committee (COPIL).
Its main mission is to develop and structure the educative practice for
patients after a stroke following two ways:
– prevention of cardio-neuro-vascular risks;
– physical and cognitive consequences after a stroke.
Materials and methods.– The COPIL, created on December 5th, 2011, gathers
competent professionals for stroke reeducation (PRM doctors, health care
managers and physiotherapist) or for TPE (master or university degree). The
COPIL develops a general methodology following the evaluation of
professional practice:
– description of the current situation (questionnaire for SSR professionals);
– choice of improvement axis and an action plan;
– evaluation.
Among the actions of the plan, the COPIL develops an interview guideline for
educative diagnosis, constitutes eight multidisciplinary work groups in SSR
wards, distributes the different themes, coordinates and synthesizes works,
anticipates evaluation tools and prepares the authorization file for the
programme for the Regional Health Agency.
Results / Discussion.– Results show that professionals have a poor knowledge on TPE.
The improvement axis emerging wes to form professionals, to develop a
TPE programme on eight themes dealing with secondary prevention and frequent
consequences after a stroke, following learned societies’ recommendations.
The COPIL meets once a month. The drawing up of the programme on the eight
themes is actually in its final stage. Each working group is directed by two
experts, one on the theme and the other on TPE. Patients and their caregivers
were involved. The authorization request for the programme is planned for
September 2013.
The methodology’s main interests consist in its overall vision of sequelae of
stroke and its regional use by the coordination team of the stroke chain.
Further reading
www.sofmer.com/ Eléments pour l’élaboration d’un programme d’Education
Thérapeutique spécifique au patient après AVC.
http://dx.doi.org/10.1016/j.rehab.2013.07.301

CO07-004-e

Education and chronic back pain
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