

EDUCAÇÃO MULTIDISCIPLINAR AO
CUIDADO
E À REABILITAÇÃO
PÓS-AVC

FISIOTERAPIA
EXERCÍCIOS PÓS-AVC

Beatriz Rangel - Fisioterapeuta Neurofuncional
Tamires Cristine Bitencourt - Fisioterapeuta

Plano de aula

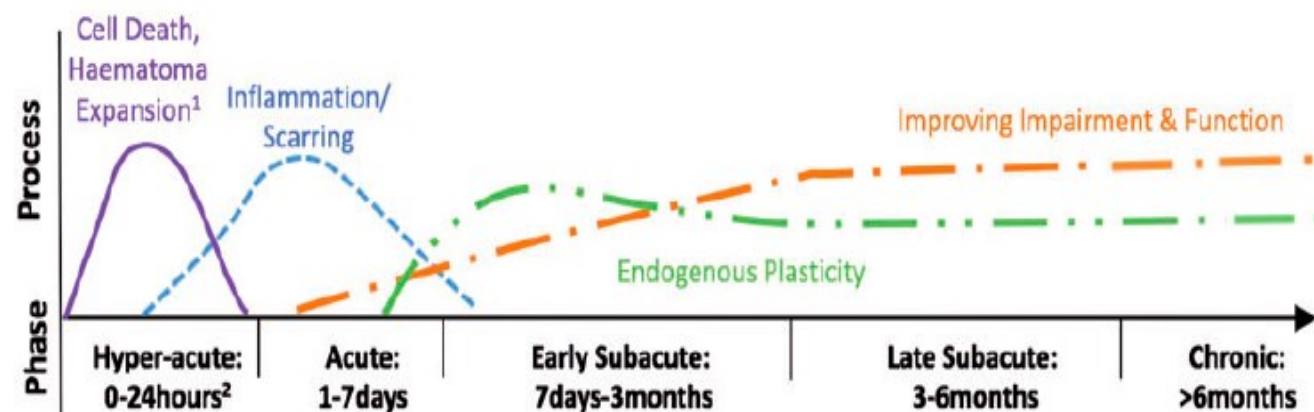
Fisioterapia pós AVC

- Fases da reabilitação pós AVC;
- Quando iniciar tratamento de fisioterapia pós AVC?;
- Qual a dosagem e intensidade do tratamento?;
- CIF e fisioterapia pós AVC;
- Objetivos do tratamento de fisioterapia pós AVC;
- Considerações sobre as intervenções fisioterapêuticas pós AVC.



Fases da Reabilitação pós AVC

Figure 1. Framework that encapsulates definitions of critical timepoints post stroke that link to the currently known biology of recovery.



¹ Haemorrhagic stroke specific. ² Treatments extend to 24 hours to accommodate options for anterior and posterior circulation, as well as basilar occlusion.

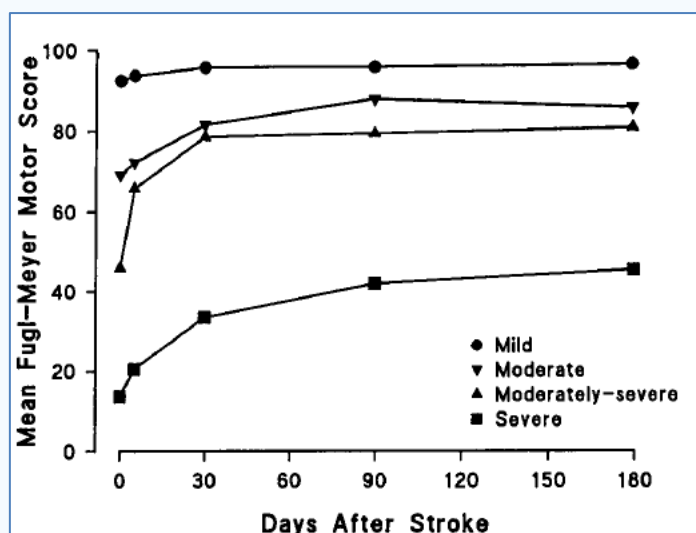
Fonte: Bernhard, International Journal of Stroke. 2017, Vol. 12(5) 444–450



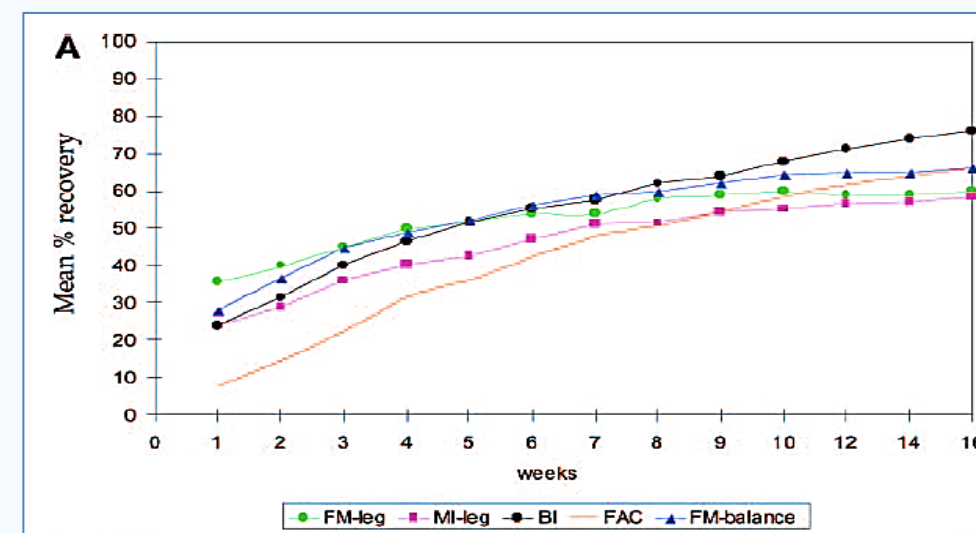
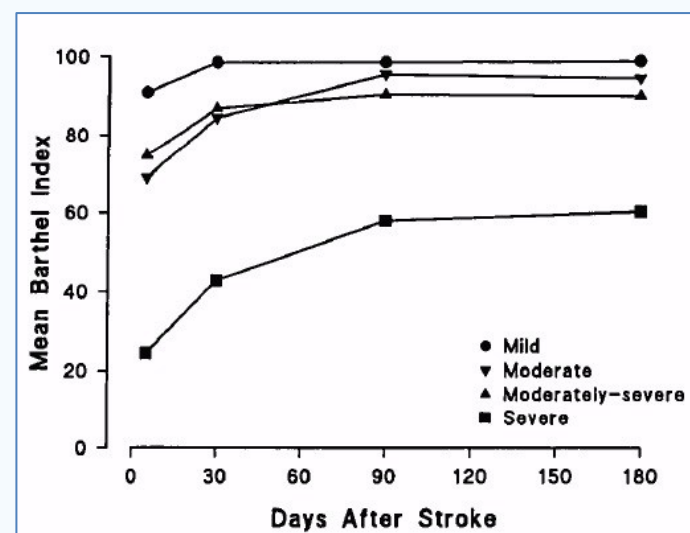
Quando iniciar o tratamento de fisioterapia pós AVC?



A melhora motora e funcional do MS e MI, atinge um platô de recuperação entre 30 e 90 dias pós AVC.



(DUNCAN, et al. 1992)



(KWAKEEL, et al. 2006)



O início do tratamento de reabilitação (fisioterapia), dentro dos primeiros 30 dias pós AVC, está associado a maiores ganhos na atividade.

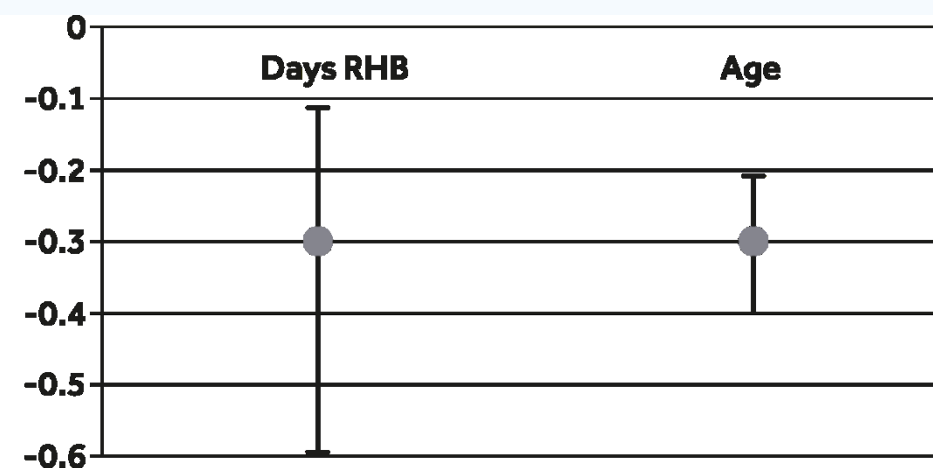
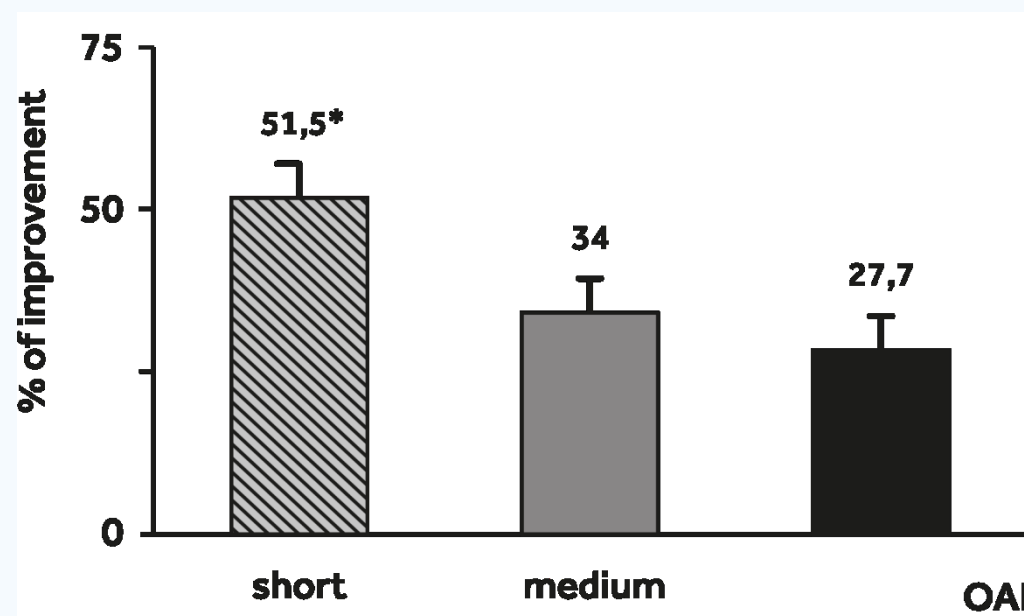


Figure 1 - Loss of FIM (lack of gain in FIM score) per day of delaying neurorehabilitation treatment and per each additional year of life.

Fonte:
(Paolucci, et al. 2000; Murie-Fernandez, et al. 2011; Pollock, et al. 2014)
Índice de Barthel (20, 21-40, 41-60 após o AVE)
(PAOLUCCI, et al. 2000)
(MURIE FERNANDEZ, et al. 2011)



Physical rehabilitation approaches for the recovery of function and mobility following stroke (Review)

Pollock A, Baer G, Campbell P, Choo PL, Forster A, Morris J, Pomeroy VM, Langhorne P



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Analysis 9.1. Comparison 9 Subgroups. Intervention versus no treatment: immediate outcome: motor function, Outcome 1 Time after stroke.

Review: Physical rehabilitation approaches for the recovery of function and mobility following stroke

Comparison: 9 Subgroups. Intervention versus no treatment: immediate outcome: motor function

Outcome: 1 Time after stroke

Study or subgroup	Intervention		No treatment		Std. Mean Difference IV,Random,95% CI	Weight	Std. Mean Difference IV,Random,95% CI
	N	Mean(SD)	N	Mean(SD)			
I < 30 days post stroke							
Deng 2011	50	55.98 (12.52)	50	40.64 (11.64)	→	3.6 %	1.26 [0.83, 1.69]
Fang 2003	50	19.73 (10.03)	78	18.05 (9.92)	→	3.8 %	0.17 [-0.19, 0.52]
Hu 2007 haem	178	44 (27)	174	32 (24)	→	4.1 %	0.47 [0.26, 0.68]
Hu 2007 isch	485	47 (27)	480	37 (26)	→	4.1 %	0.38 [0.25, 0.50]
Huang 2003	25	72.12 (22.34)	25	49.12 (17.69)	→	3.2 %	1.12 [0.52, 1.72]
Liu 2003	60	6.2 (1.3)	60	3.2 (2.1)	→	3.7 %	1.71 [1.29, 2.13]
Ni 1997	34	26.12 (6.26)	34	17.12 (5.7)	→	3.4 %	1.49 [0.95, 2.03]
Wang 2004a	66	68.15 (20.12)	32	58.69 (19.13)	→	3.7 %	0.47 [0.05, 0.90]
Wu 2006	48	71.48 (23.28)	48	59.6 (26.89)	→	3.7 %	0.47 [0.06, 0.87]
Xu 2003a	94	23 (11)	92	18 (12)	→	3.9 %	0.43 [0.14, 0.72]
Xu 2003b	92	21 (16)	88	18 (12)	→	3.9 %	0.21 [-0.08, 0.50]
Yin 2003a (I)	30	4.19 (4.84)	14	2.43 (5.1)	→	3.1 %	0.35 [-0.29, 0.99]

57.2%

57.2%



Qual a dosagem ideal de fisioterapia?

Definição: tempo total de terapia, medido pelo tempo de prática por dia, multiplicado pelo número de dias propostos para a intervenção ou como a quantidade de prática de tarefas/exercícios que o participante é submetido.

Dosagem: tempo x dias/semana

(KWAKKEL, 2006; LOHSE; LANG, BOYD, 2014; POLLOCK et al., 2014c).



2014

Is More Better? Using Metadata to Explore Dose–Response Relationships in Stroke Rehabilitation

Keith R. Lohse, PhD; Catherine E. Lang, PT, PhD; Lara A. Boyd, PT, PhD

2016

Journal of Physiotherapy xxx (2016) xxx–xxx



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Research

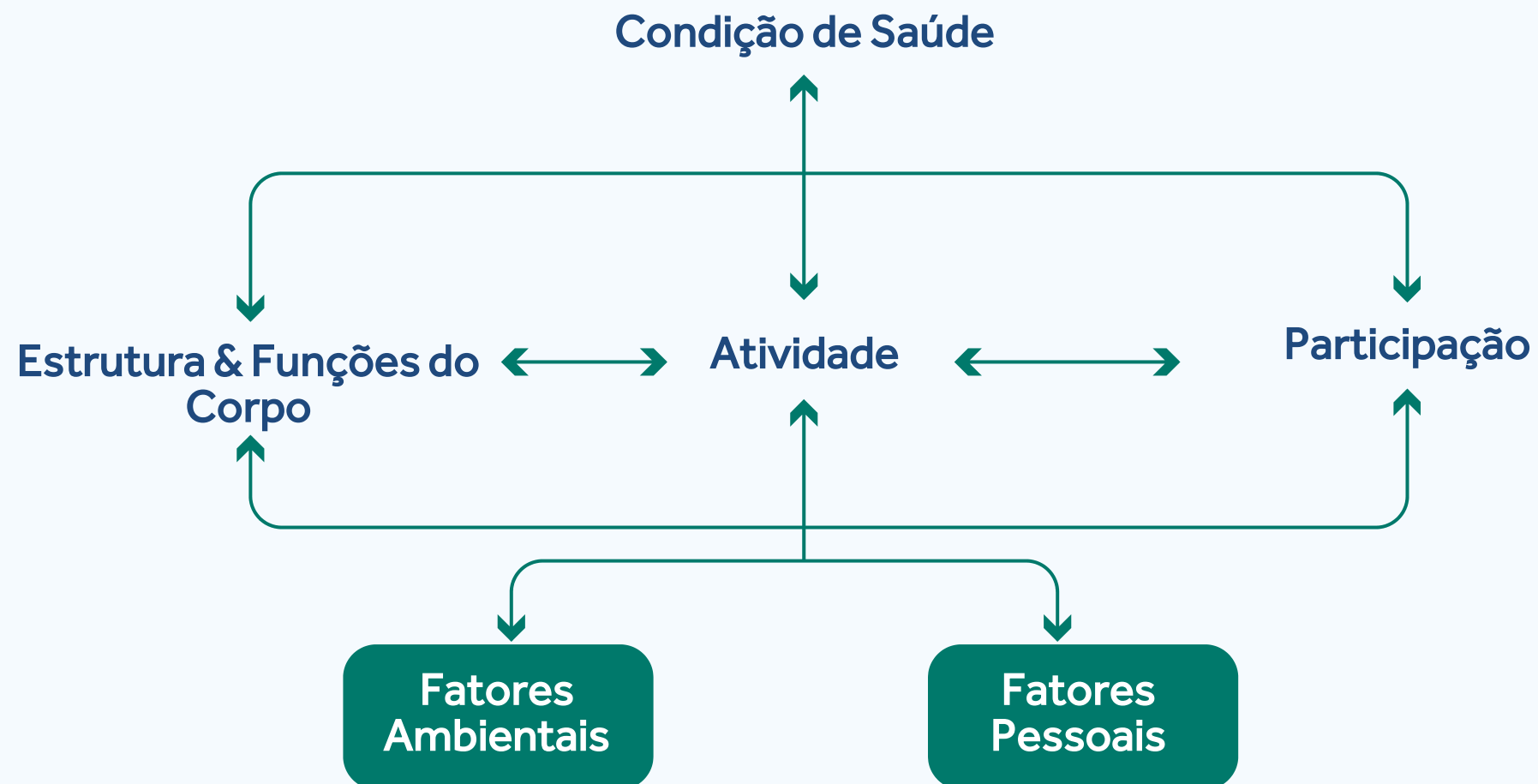
Increasing the amount of usual rehabilitation improves activity after stroke: a systematic review

Emma J Schneider^{a,b}, Natasha A Lannin^{a,b,c}, Louise Ada^d, Julia Schmidt^{a,e}

^a Discipline of Occupational Therapy, School of Allied Health, College of Science, Health and Engineering, La Trobe University; ^b Occupational Therapy Department, Alfred Health, Melbourne; ^c John Walsh Centre for Rehabilitation Research, Sydney Medical School (Northern), The University of Sydney; ^d Discipline of Physiotherapy, Faculty of Health Sciences, The University of Sydney, Sydney, Australia; ^e Department of Physical Therapy, Faculty of Medicine, University of British Columbia, Vancouver BC, Canada



Estrutura conceitual da CIF



Modelo interativo entre pessoa - meio ambiente



Objetivos do tratamento de fisioterapia pós AVC



Qual a melhor intervenção fisioterapêutica para o AVC?



Qual o domínio da CIF que minha
intervenção pretende abordar?

Intervenções de Fisioterapia no AVC

Intervenções direcionadas a modificar comportamentos e não somente sintomas

Intervenções direcionadas muito mais ao domínio de Atividade e Participação da CIF



EXERCÍCIOS PÓS-AVC



Exercícios de fisioterapia pós AVC: deitado



Exercícios de fisioterapia pós AVC: sentado



Exercícios de fisioterapia pós AVC: em pé



Exercícios de fisioterapia pós AVC: caminhando e subindo escadas



Importante:

Sempre faça os exercícios em segurança!

Os exercícios aqui apresentados não substituem a avaliação e o acompanhamento de um profissional fisioterapeuta!

Priorize o tratamento com fisioterapeutas especializados na área neurofuncional!



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