

Service Priorities and Programmes

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Effect of Physiotherapy Service on Physical Mobility of Multi-disciplinary Day Rehabilitation Patients in North Lantau Hospital

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Introduction

With the increasing trend of population growth in the Lantau Island, there is increasing need for rehabilitation in this district accordingly. To meet this demand, the Day Health Care (DHC) service in North Lantau Hospital (NLTH) has been commenced operation since September 2013. Target groups of DHC are patients suffering from stroke, deconditioning after hospitalization, other neurological conditions such as Parkinsonism and multiple sclerosis.

Objectives

To evaluate the effect of physiotherapy service in patients with physical disabilities in DHC.

<u>Methodology</u>

Patients attended a course of rehabilitation with about 2 sessions per week. All patients were assessed before training. Aerobic training, balance training, strength training have been performed in the sessions and some patients required pain management treatment. After a course of rehabilitation, the assessment was done again and a case conference will be held for deciding the discharge plan of the patient. The functional assessments were performed before and after the intervention with the tools including Modified Rivermead Mobility Index (MRMI), Modified Functional Ambulation Classification (MFAC), Elderly Mobility Scale (EMS), Berg's Balance Scale (BBS), Timed up and Go Test (TUGT) to compare the physical mobility of involved patients. Wilcoxon Signed ranks test was adopted to analyze the result of above-mentioned assessment tools respectively.

<u>Result</u>

From September 2013 to November 2015, 81 out of 256 patients, 40 males and 41 females, completed a course of rehabilitation with full sets of results in pre and post assessments. The mean age of the patients was 71.5 (41-103, SD: 12.5) years old.

The mean value of MRMI improved from 33.8 to 33.65. (p<0.001) The median value of MFAC improved from 5 to 6. (p<0.001) The mean value of BBS improved from 34.4 to 40.4. (p<0.001) The mean value of TUGT improved from 49.3 seconds to 30.8 seconds. (p<0.001) The mean value of EMS improved from 15.6 to 16.9. (p<0.001)