Mini-Medical School



Rehabilitation principles of stroke patient

腦中風病人與家屬復健須知(英文)

Stroke incidence in Taiwan is relatively high and it often causes some motor impairment sequela; therefore, rehabilitation is to help these patients improve function recovery, enhance their potential, take care of themselves, and most importantly return to the society.

Our medical team designed a series of physical and occupational therapeutic training programs to help patients recover from stroke sequel via rehabilitation. Our team members include physiatrist, physical therapist, occupational therapist, and speech therapist; our team intends to help patients improve their muscle power and hand function, to help them get out of bed and walk, to improve self-tending capability with their daily life, to maximize residual functions, and to help them restart a normal life.

The earlier the rehabilitation program is started, the better the effect is. The golden time for rehabilitation is within three months of the stroke.

Rehabilitation programs

1. During bed-rest period (from stroke onset to stabilization): after consultation, our therapist will visit patients and assist them to perform rehabilitation programs at bedside several times per week. They intend to instruct patients with correct bed rest postures, joint exercise, muscle strength training, and functional training to prevent joint contracture or stiffness, to prevent muscle atrophy or spasm, and last not the least to reduce complications.

Method: our therapist will direct family members and patients to correctly move the paralyzed limb with the sound limbs at least three times a day and 20 minutes each time.

2. Stabilization period: patients accompanied by family members should visit our rehabilitation center to perform physical and occupational therapy programs every day. Our therapists intend to instruct patients with correct therapeutic exercise, to promote function, and to maximize patients' muscle strength and function.

Method: our therapists will assist patients with upper and lower limb ROM exercise, strength training, balance training, and ambulation training. Through facilitation technique and physical stimulation, our therapists will instruct patients to correctly strengthen their physical capacity and encourage them to use their sound limbs to live more independently.

3. Discharge period: return to the rehabilitation center to continue rehabilitation programs and work on regular follow-ups. Our therapists incline to help patients promote their functions and help them return to their home and the society.

Method: Physical therapist will train patients to improve their strength and walking ability. Occupational therapist will train them to get up from bed, dress themselves, and attend to personal hygiene care and other daily activities to achieve the goal of activities of daily living as independently as possible.

The key roles of stroke rehabilitation depend not only on good medical care but also on the belief and perseverance of the patient himself. As a result, cooperating with out rehabilitation medical team helps patients recover from disability earlier.

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