

Care of The Shoulder Joint

The shoulder joint normally relies on the muscles around it for support and prevention of injury. If these muscles become weak following a stroke, the joint can become very loose, and particularly vulnerable to injury.

Careful handling of the weak shoulder and arm is extremely important in preventing injury and pain.

Therefore:

- NEVER allow the arm to hang by the patient's side. Always support the arm with a pillow.
- NEVER lift the patient under the arm.
- NEVER pull on the weak arm or use it to help the patient to move.
- NEVER encourage or assist the patient in exercising the shoulder or arm, unless the physiotherapist has shown you how to do so.
- NEVER give the patient a ball to squeeze with his/her weak hand, as this may cause the hand to become tight.

What happens if I choose not to carry out the exercises?

Your condition may not improve if you do not carry out the exercises. In some cases your condition may deteriorate leading to permanent loss of function.

You may not need rehabilitation if your stroke was mild or if you recover fully in a short space of time. Recovery tends to be most rapid in the first few weeks after stroke. The treatment you receive will depend on how much movement you have lost as a result of your stroke.

Daisy Hill Hospital

Physiotherapy Department



Physiotherapy Following a Stroke Information for Patients and Relatives

The physiotherapists on the ward are

Physiotherapy Following a Stroke

The role of the Physiotherapist is to help the patient improve their physical ability.

The amount of improvement and the length of rehabilitation depend very much on a number of issues such as:

- The severity of the stroke
- The patient's motivation / participation
- The patient's previous level of fitness

It is very important that each patient is not compared with someone else who has had a stroke.

Everyone has different problems, everyone is an individual.

Physiotherapy Assessment

Physiotherapy involves a full individual assessment to find out:

- The amount of movement, feeling the patient has on their weak side.
- How much help the patient requires to balance in sitting and standing.
- The amount of help needed to move e.g. from sitting to standing, from lying to sitting.
- The patient's ability to walk – this may not be appropriate at the earlier stages of rehabilitation.

Risk of Exercise Post CVA

If you are medically unstable your condition may deteriorate if you exercise beyond your ability. Rehabilitation may be postponed until you are medically fit.

Physiotherapy Treatment

The aim of physiotherapy is to assist the patient to move as normally as possible, prevent stiffness and shortening of muscles in the inactive limb through stretches and careful positioning, improve balance and co-ordination.

Following a stroke, the patient usually has weakness down one side of their body. They will tend to overuse their 'good' side by pushing and pulling with the good arm and leg. If this is allowed to continue, the brain eventually forgets about the weak side making it less likely to recover. As a result, it is possible that the muscles on the weak side may become tight. Physiotherapy is directed at keeping the overuse in the 'good' side to a minimum while promoting the return of 'normal' movements on the affected or weak side.

Careful handling and positioning are essential to ensure you feel secure and protect vulnerable joints. It is therefore very important that the patient and his/her family follow the advice of the physiotherapist to avoid overuse of the 'good' side.

Initially the patient may need a lot of assistance to stand and move to make sure that they are not pushing and pulling with their 'good' side. Progression in therapy may be slow, but it is important that the patient does not do too much too quickly.

If the patient is agreeable, next of kin can contact us if they have any concerns or would like to discuss their relative's progress with physiotherapy. All information will be treated as confidential.

Family members are welcome to attend treatment sessions if the patient is happy for them to do so and if arrangements are made with the physiotherapist beforehand.

