Rehabilitation therapy which aids stroke survivors relearn lost dexterity

Health & Medicine

POST-STROKE REHABILITATION Affiliation STROKE REHABILITATION Strokes or Transient Ischemic Attacks (TIA) is vascular damage to the brain. It takes the form of intracerebral or subarachnoid hemorrhage and ischemic stroke with variability in their severities. (Bernhardt, Thuy, Collier, & Legg, p. 39) The former, however, is more lethal and can lead to death while the other could result to permanent or temporary disability. Time is therefore of the essence when handling stroke survivors hence as more time passes the risk of death from stroke is reduced.

Our facility recommends rehabilitation therapy which aids stroke survivors relearn dexterities lost on occurrence of the stroke due to brain damage i. e. synchronizing limb movements to facilitate walking or effecting steps that enable the patient to carry out more intricate activities. Early mobilization of the patient also equips the patients with alternatives to actions they could do initially with ease such as bathing, dressing, driving etc. Recuperative treatment begins in the acute-care hospital unit, within 24-48 hours after the stroke, well after the patient’s condition has stabilized. Firstly, we the therapy involves inducing and promoting autonomous movements because stroke patients are often paralyzed and destabilized. Patients are encouraged to shift their position regularly and indulge reflexive and dynamic array of activity exercises to bolster the action of their TIA-impaired limbs.

With reference to the extent of injury to the brain, the patient’s condition may improve gradually and steadily from sitting up, aided movement between the bed and a chair to standing, bearing their own weight, and walking independently or aided. Staffs at the mobilization unit, nurses and

therapists, help recovering patients to perform more complex and demanding tasks, such as bathing, dressing, and using a toilet, and motivate patients to use their TIA affected limbs.

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