TACSM Abstract

Implementing Stroke Impact Scale as an indicator of Stroke Survivor Recovery

ADAM C. AVALOS, JOE PRIEST, CALVIN D. SMITH

Laboratory for Wellness and Motor Behavior; Health and Human Performance; Tarleton State University; Stephenville, TX

Category: Masters

Advisor / Mentor: Priest, Joe, (Priest@Tarleton.edu)

ABSTRACT

Rehabilitation testing efforts for stroke survivors (SS) have either been generalized or restricted to the physical domain. Conventional testing lacks the capability to accurately identify a wide range of resulting morbidities. **PURPOSE:** Rehabilitation efforts for stroke survivors (SS) has been generalized and are not specific to the wide range of resulting disabilities. Use of the Stroke impairment Scale (SIS) provides categorical insight into the impact of stroke on individuals. The purpose of the present study was to identify specific categories of impairments in order to develop optimal rehabilitation strategies for each individual. **METHODS:** Subjects were asked to self-evaluate their recovery prior to training in the Lab for Wellness and Motor Behavior (LWMB) using the SIS self-report measure to asses 8 domains (hand function, ADL/IADL, mobility, communication, emotion, memory, participation, and strength). Subjects (n=11) aging from (45 to 84 yrs.) all had prior history of stroke (>1-year). Training in the LWMB would include various rehabilitation protocols tailored to the individual in order to ensure that subjects were treated accordingly to their deficiency. Following the six weeks in the LWMB the individuals were asked again to self- evaluate their recovery through the SIS self-report measure to measure any change in the individual. The scores from the SIS self- report measure were input into MS Excel for pre-post analysis via T-Test. **RESULTS:** Percent difference within the domains revealed an increase in average SS perception of Strength, Memory, Mobility, Meaningful Activities and Recovery (1.50%, 4.00%, 4.22%, 2.00%, 4,00%; respectively) and a decrease in the average SS perception of Emotions, Communication, Activity and AAA (-5.56%, -2.29%, -0.15%, -1.20%; respectively). In regard to pre- and post-testing normalized values, there was no significant difference ($p > 0.05$) **CONCLUSION:** Percent Increases within several domains suggest an overall progression in recovery of the individual. By providing a way for stroke survivors to effectively and systematically voice their opinions of their own recovery, rehabilitation protocols can start being further tailored to maximize the recovery process.