

2nd Annual Conference on

ORTHOPEDICS, RHEUMATOLOGY AND OSTEOPOROSIS

April 15-16, 2019 | Milan, Italy

Maurizio Falso et al., J ortho Rehab Surg. 2019, Volume 3 | DOI: 10.4066/2630-4473-C1-002

TRIA-MF PROTOCOL AS AN INNOVATIVE TOOL IN THE COMPREHENSIVE TREAT-MENT AND OUTCOME EVALUATION OF LOWER LIMB AMPUTEES BEFORE AND AFTER PROSTHESIS USE

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•he aim of this study was to define the efficacy and outcome value of an innovative procedure tool (TRIA-MF protocol) in the treatment of lower limb amputees before and after prosthesis use with the purpose to quantify the quality of the procedure and its economic impact on the clinical patients' recovery. 12 patients (4 women and 8 males) subjected to lower limb amputation and admitted according to the principles of inclusion criteria of the TRIA-MF protocol at the Rehabilitation Department of the Clinical Institute Città di Brescia were recruited in this study. All patients were included in an integrated and task-specific management protocol of the amputee, which allow to follow the rehabilitation process from amputation to the final restoration, for a period of 6 months for each patient. Patients were evaluated five times during the study, collecting their degree of pain (VAS), their independence profile (Barthel Index) and the cirtometry of their amputation stump. Data on the duration of their admission to the rehabilitation unit, the inter-time between the amputation and acquisition of the temporary prosthesis, and between temporary prosthesis acquisition and the final prosthesis acquisition were also reported. Patients of our sample, at the end of their hospitalization, highlight a significant modification of the temporal data at first month and sixth month from their hospital discharge. A statistical significant increase of the Barthel Index value was observed in all patients recruited in this study proceeding from time T0 to time T4; in the same way, a statistical significant decrease of the VAS scale was observed in all patients recruited proceeding from time T0 to time T4; the cirtometry of the amputation stump (expressed in cm) showed a statistical significant decrease in all patients recruited proceeding from time T0 to time T4. We haven't observed a statistical significant correlation between the duration of the rehabilitative hospitalization and the clinical data; no statistical significant correlation was observed between the amputation stump cirtometry time-related modification and the intertime data.

BIOGRAPHY

Maurizio Falso received his Degree of Medicine in 1999 and his specialization in Physical Medicine and Rehabilitation from the University of Medicine of Verona, Italy in 2004 followed by a post-specialization research on the management of spasticity and movement disorders at the Department of Neurological Sciences and Vision of the University of Verona, Italy by using botulinum toxin and baclofen pumps and analyzing motor patterns with video-surface EMG. He is a Professor at the Physiotherapist School of the Medicine University of Brescia, Italy and a past-member of the Italian Consensus Table on the use of xeomin in adult spasticity. In his career he also promoted the use of innovative dynamic carbon-kevlar custom made AFO (DAFONS), innovative postural devices in patients affected by neurological complex postural needs, the device treatment of idiopathic scoliosis by using an innovative dynamic carbon kevlar foot insole called "PRODYNAMIC".

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Ortho Congress 2019

Journal of Orthopedic Surgery and Rehabilitation | ISSN: 2630-4473 | Volume 3

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