

EFFECTS OF COMBINED SKILLED AQUATIC AND LAND BASED THERAPY COMPARED TO LAND THERAPY ALONE ON BALANCE AND GAIT IN ADULTS AFTER A STROKE: A SYSTEMATIC REVIEW

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Acknowledgements

Background¹

Risk factors for stroke

Medical conditions including:

Hypertension

High cholesterol

High blood glucose/diabetes

Lifestyle behaviours:

Physical inactivity

Poor diet

Smoking

High alcohol consumption



Background

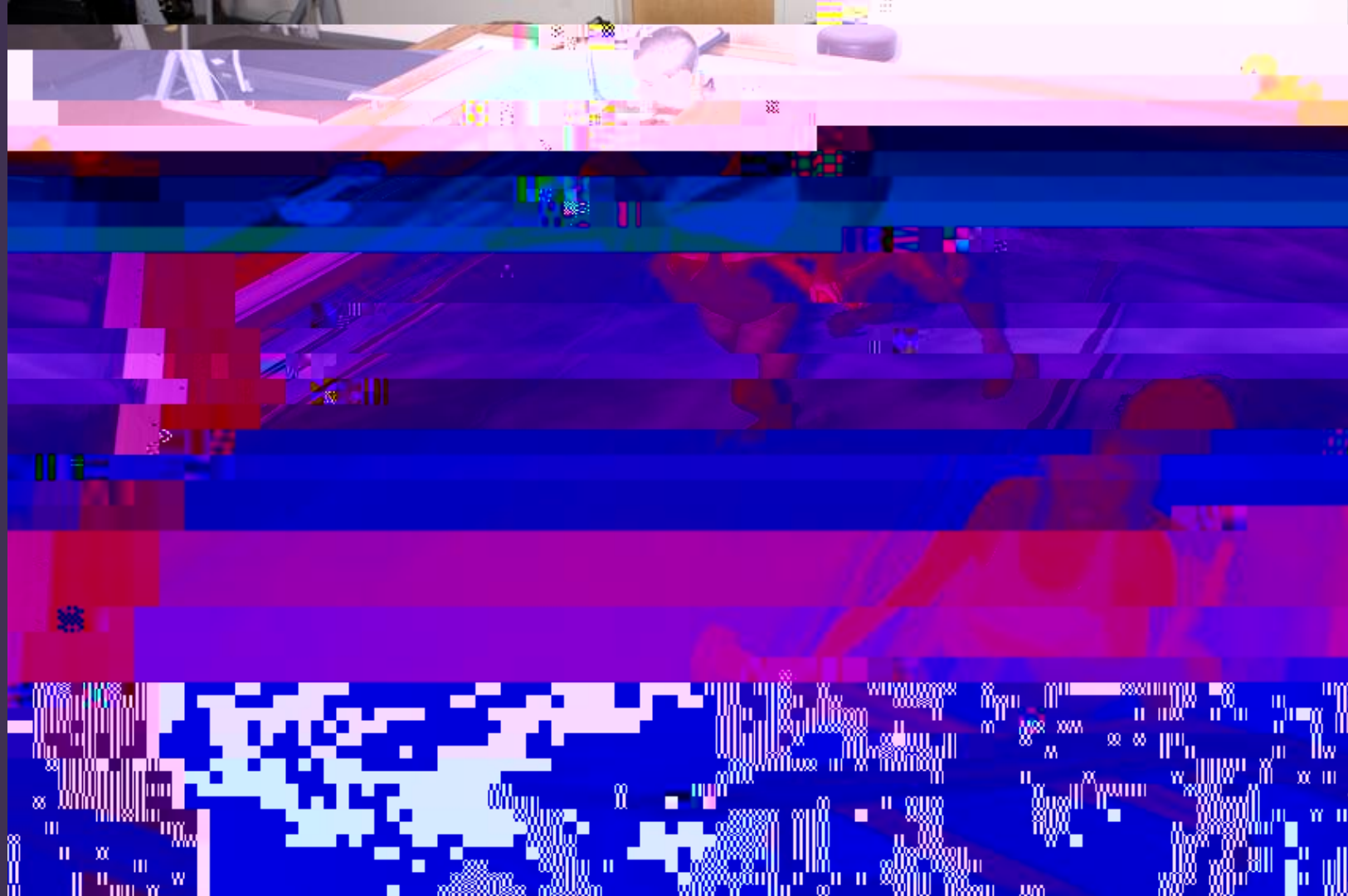
Stroke is the second leading cause of death worldwide¹
Leading cause of acquired disability in adults¹
Affects 795,000 people per year in U.S.¹

65% of patients who have suffered a stroke experience loss of tactile sensation, the protection reaction, and proprioception, which is closely correlated with balance ability.²



Defined Inclusion Criteria





Purpose

The purpose of this systematic review is to compare the effects of skilled aquatic therapy combined with land based therapy (AT/LBT) to land based therapy (LBT) on physical function in adults that have experienced a cerebrovascular accident (CVA).



Methods

Databases:

MEDLINE/PubMed, CINAHL, ProQuest, Cochrane Library
and hand-searching

Two reviewers independently assessed each article for methodological quality and came to a consensus using PEDro guidelines.

Search Terms

a a c a a a a
a -ba a a c a a c

Search Limits

Humans

Peer reviewed articles

English language

Articles from 2011-2018



Selection Criteria

Adults at least 18 years old

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Records Identified through database searching: 380

Additional records identified through other sources: 3

Records after duplicates removed: 372

Records screened by title and abstract: 324

Full-text articles assessed for eligibility: 11

Studies involved in synthesis: 5

Records excluded (n = 339)

- Not quantitative study: 70
- Not conducted by certified PT or OT: 108
- Excluded diagnoses: 107
- Younger than 18 years old: 16
- Not aquatics-based: 6
- Other neurological conditions (besides stroke): 32

Full-text articles excluded, with reasons (n = 6)

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	Y	Y	Y	Y	N	N	Y	Y	Y	Y	N	7/10
	Y											



Results

A total of 372 articles were screened for eligibility

Five articles met selection criteria

PEDro scores ranged from 4 to 7/10

Average score: 6

Individual samples ranged from 20-120 participants



Results- Gait Outcomes

All studies with AT/LBT found greater improvements in outcome measures compared to the LBT groups

Three of five articles focused on gait^{3,4,6}

All found significant improvements in outcome measures including cadence, speed, and 10MWT



Conclusions

Moderate to strong evidence supports both short and long term therapy combining aquatic and land based interventions on improving balance and gait in adults following a CVA.

S c a c b c a
of life and independence in regards to mobility after AT/LBT.



Clinical Relevance

It is a safe intervention to improve aspects of mobility needed for community ambulation and activities.

Evidence suggests AT/LBT, compared to LBT alone, better prepares patients with CVA for functional community participation and should be implemented into treatment.





Take Home Message

Patients with deficits in gait or balance after a cerebrovascular accident can benefit from an aquatic therapy supplement to their conventional therapy. It can also improve patients quality of life and independence in regards to mobility.



References

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Thank you!

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Questions?

