



# Psychosomatic recovery in post stroke rehabilitation practice

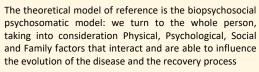


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### Biopsychosocial approach





It includes Physiatry, Internal Medicine, Physiotherapy, Nursing Science, Neuropsychology, Speech Therapy and Clinical Psychology. Different processes of measures and evaluations, either in admission or discharge, are conduced to arrange tailored and personalized treatments. The interprofessional team is the core instrument of integration in clinical practice and research.



# Integrating psychological approach

A targeted, personalized and integrated psychological support is provided to patients and caregivers during the rehabilitation process. Numerous individual and bio-psycho-social factors exert an influence on patient's psychological distress: premorbid personality structure, possible unresolved loss, attachment style, adaptive strategies, hemispheric lesion location, clinical conditions, previous lifestyle, family structures and social network.

An early diagnosis for environmental/rehabilitation treatments combined with individual support facilitate the patients reorganization of the self through a supportive and interactive relationship in agreement with the rehabilitation team

**Conclusions** 

## Backaround

The rehabilitation consept implies an interaction of many factors. Stroke specific deficits interplay with the effect of the sudden traumatic event and previous features and functioning. Meanwhile, the availability of many resources predisposes to recovery. The rehabilitation should be considered as a complex plastic process focused on the patient-family dyad which acquires a crucial issue whithin the interprofessional team. The purpose in to highlight a clinical approach aimed at the global care of the patiens and caregivers which considers the multiple components that interact in recovery and psychosocial reintegration (Fava, G.A. et al., 2022; Fava, G.A. et al., 2012)

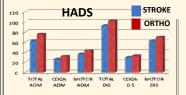
# Post Stroke Rehabilitation in Villa Bellombra

- Assessment by all services for framing and drafting rehabilitation plan.
- Specific multidisciplinary clinical activity
- in-depth testing
- Involvement of caregiver for in-depth medical history and liaison on
  - Team case discussion
- Extended team with family member
- Ongoing assessments with possible rehabilitation program modification
- Focus on post-discharge continuity
- Assessment at discharge

At Villa Bellombra hospital we use the Hospital Anxiety and Depriession Scales-HADS (Zingmond and Snaith,1983) self-report questionnaire and the Functional Independence Measure-FIM (Dodds et al., 1993) to evaluate anxiety, depression and functional independence in our patients.

From the research conducted at Villa Bellombra

Sample: 235 post-stroke and 381 orthopedic patients (Rif: Farinelli M.et al., 2020; Gestieri L. et al., 2019)



- Psychological distress is higher in stroke patients (36% HADS anxiety and 56.5% HADS depression)
- In both groups the psychological distress decreases at discharge

## The degree of functional recovery (FIM) was

FIM

statistically significant (p<.00) when admission and discharge were compared.

Stroke patients had significantly lower scores than orthopaedic patients on both admission and discharge

#### **CORRELATIONS**

- The extent of FIM gain is correlated with depression gain (r=.129\*) for stroke patients and anxiety gain (r=.085\*) for orthopedic patients.
- In both groups, patients with psychological distress show lower scores in functional independence scores (p≤.05).

In rehabilitative practice the recovery of patients and caregivers results from the multidisciplinary and interprofessional integration. It is important to include promt evaluations of the patient's psychological distress and recovery resources in order to implement therapeutic strategies of intervention in the integrated psychosomatic rehabilitation approach including psychological support to patients and caregivers.

## Clinical Psychological Service Evaluative and supportive intake of pts through appropriate

pecific individual and joint interviews with pts and family

Integration of environmental support through permanent observation of pts and family members and daily liaison with operators and Services

Modulation of psychopharmacological therapy Accompaniment during rehabilitation treatments Participation in teams and discharge letter Discussions with internal/external Services and associations Internal/external training

Integrated research and publication of work

### Psychosomatic recovery

The Multidomain assessments, carried out in admission, showed an impairment of health and functional indices that significantly improve at the discharge. The observations of clinical practice and the studies 🔞 conduced in the rehabilitation context denote that the psychosomatic approach is advantageous for the recovery of health and well-beeing of patients and family members.



