E-Poster

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Post-Stroke Hemiplegia and Foot Dysfunction: Impact on Mobility and Rehabilitation Strategies

Topic: Complications/Sequelae (ie Spasticity, Immobilization and Frailty)

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BACKGROUND

Gait recovery is a major challenge for individuals with post-stroke hemiplegia, as foot dysfunction can delay ambulation or compromise stability. This study aims to characterize foot deformities and dysfunctions in stroke survivors and assess their impact on walking ability.

METHODS

We conducted a descriptive cross-sectional study involving 40 patients with post-stroke hemiplegia who attended the physical medicine and rehabilitation department between June 2022 and June 2024. Clinical evaluation focused on foot deformities, gait impairments, and rehabilitation strategies.

RESULTS

The study population had a mean age of 49.5 years (range: 38-79), with a male-to-female ratio of 1.27. Hypertension (56%) and diabetes (64%) were the most common risk factors. The mean time since stroke onset was between three and six years. The most prevalent foot deformity was spastic equinovarus (55%), followed by foot drop (40%), circumduction gait (50%), and toe clawing (15%). Regarding mobility, 15 patients were able to walk independently, while 21 required assistive devices, including Canadian canes (n = 15), walkers (n = 5), and tripod canes (n = 1). Management strategies included pharmacological treatment for spasticity and pain, physical rehabilitation, local spasticity treatment, and prescription of orthotic devices and customized footwear.

CONCLUSION

Foot dysfunction in post-stroke hemiplegia presents complex challenges with a high risk of deterioration, necessitating continuous monitoring and a multidisciplinary rehabilitation approach to optimize mobility and prevent complications.

Statement of Disclosures

None

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