E-Poster

EP-973

Frequent Early Occupational Therapy Interventions in an Adult Critical Care Unit in Chile

Topic: Miscellaneous

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BACKGROUND

The role of occupational therapy (OT) in the intensive care unit (ICU) has gained recognition in the post-pandemic era, as early rehabilitation strategies have become essential for reducing delirium incidence and duration, functional impairment at discharge, and ICU and length of stay. This has led centers like Clinica Davila to increase the number of OTs for the care of hospitalized patients. This study aims to identify the interventions most frequently performed by OTs on adult ICU patients undergoing an interdisciplinary rehabilitation program in a leading private hospital of Santiago, Chile.

METHODS

Inclusion criteria were adult ICU patients admitted to an interdisciplinary rehabilitation program led by Physiatry, between February and April 2023. The OT team made weekly reports on a digital form created by the authors, to indicate all the interventions they were executing. Interventions were patient specific and did not follow an institutional protocol. After three months of weekly reports the data was collected and analyzed.

RESULTS

Thirty two patients were admitted to the program during the period. Causes of ICU admission were mainly respiratory sepsis and neurologic, average age was 59 (27-78) and 84.6% were totally independent on activities of daily living (ADLs) before hospitalization. The reported OT interventions were: 81.3% fabrication of positioning aids (support cushions, foot-drop preventers, shoulder support brace) and 25% of an adaptive therapy table. 100% received delirium prevention and management (environmental, reality orientation therapy), 94% joint mobilization (passive to active-assisted), 59.4% edema management (postural drainage, compression therapy), 78.1% functional training of upper extremities (active-assisted to active range of motion exercises, activities of daily living training), 71.9% cognitive training (global or area-specific), 75% were involved in interdisciplinary therapy sessions (with respiratory/physical therapist, speech language pathologist, and/or neuropsychology) and 5% in educational or co-treatment sessions with family members.

CONCLUSION

Frequent early OT interventions in the ICU were focused on positioning, delirium prevention and management, joint mobility, functional training and interdisciplinary collaboration. Despite the small sample, findings highlight essential therapeutic approaches for critically ill patients, emphasizing the need for structured OT protocols to enhance rehabilitation strategies at our center.

Statement of Disclosures

None

Doi: 10.5606/archisprm.2026.EP-973

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