

Tips for Physiotherapists

Taken from the South Alberta PPSG Newsletter - PP Echoes

- Most polio survivors are over achievers.
- With the onset of the late effects of Polio, they are having to cope with new feelings and conditions from the renewed pain, muscle fatigue etc.,
- Case histories are very important as 75% of all Polio Survivors are non visible. Unless asked, a history of Polio may not be taken under consideration and could lead to unexplained problems that could be avoided.
- 'No pain, no gain' is out. 'Conserve it to preserve it' is in.
- Therapy must be individualized. Even from day to day, as study has shown, Polio Survivors have unexplained day to day fluctuations in strength. Overuse may not show up until the next day. Periodic rests are needed to avoid fatigue.
- Polio Survivors do not like the cold. Their muscles do not perform as well in a cold room versus a warm one.
- If a patient requires therapy three days a week, Monday, Wednesday and Friday are best with rest periods on the days in between. Morning appointments may be better than afternoon.
- Try to schedule testing for the same period of the day or document the time and the results.
- Polio muscles fatigue easily. Stronger on the first repetitions, weaker after five or six tries. Grades should be assigned after the first or second try or document that you had to do it six times to assess the patient's strength.
- Surgical procedures are common in Polio Survivors, i.e. joint fusion, muscle-tendon transfers. Therapists should be familiar with these procedures so the muscle that they want to be testing is the right one. A muscle that should be doing one movement may be doing another.
- Video taping the patient's gait allows the therapist to review and examine without fatiguing the patient.
- Remember that any physical change is accompanied by emotional change and some patients with the late effects of Polio may have difficulties adapting to new disabilities.



The Lincolnshire Post-Polio Network

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