

The Role of Multidisciplinary Care in Stroke Rehabilitation: A Holistic Approach

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Abstract

Stroke rehabilitation involves general and special treatment, because it is an extremely complex disorder and can only be addressed by using an interdisciplinary approach that includes different treatments for patients with this disease. This paper aims to explain the importance of the involvement of healthcare specialists including physical therapists, occupational therapists, speech and language therapists, psychologists, and social workers during stroke rehabilitation. The goal is to explain how integrated and team-based care with professionals from various fields helps lessen dependency and disability, increase patients' quality of life, and minimize chances of further strokes. Data indicates that individuals who undergo multidisciplinary care services are more likely to achieve faster and better treatment outcomes in comparison to those undergoing traditional rehabilitation methods. The conclusion stresses that the patient-oriented approach and concentration on the patient's individual needs should be the main focus when it comes to the choice of rehabilitation strategies and tactics; thus, efforts should be continued to develop and improve stroke rehabilitation approaches. This approach not only improves on patient satisfaction but also demonstrates a strong commitment to addressing the individual needs and desires of each patient, focusing on the big picture of overall health.

Keywords

Multidisciplinary Care, Stroke Rehabilitation, Holistic Approach, Patient-Centered Care, Functional Recovery

Introduction

Stroke continues to account for a significant percentage of disability globally, which highlights the importance of proper rehabilitation to minimize disability and optimize the quality of life of the affected individuals. Combining the multifaceted approach of various specialists working with the stroke patient is essential, as it addresses multiple facets of impaired bodily functions, cognition, mood, and interactions. This paper aims to describe the meaning of multidisciplinary care approach in stroke rehabilitation in order to emphasize the importance of this approach in enhancing patient outcomes.

Main Body

Role of Multidisciplinary Teams:

1. Physical therapists: They enhance the well-being of the musculoskeletal system by developing exercise programmes to be used by patients with neurological disorders in order to reduce muscle weakness and slowness of movement coupled with increased falls risk and poor coordination.
2. Occupational Therapists: They assist patients to regain functionality and perform basic activities by integrating adaptive measures and devices where it is necessary.
3. Speech and Language Therapists: They evaluate whether patients have difficulties with speaking, swallowing or understanding words, gestures, symbols, pictures, or signs. They advise on how your child can do things differently in order to manage to eat or speak.
4. Psychologists: They conduct patients education and support patients' psychological status when it comes to stroke concerns such as depression, anxiety, or vision problems and learn their ways of dealing with the same matters.
5. Social Workers: They engage patient/family as needed, such as identifying and linking them to other resources within the community, and assessing and addressing the Social Determinants of Health.

Benefits of Multidisciplinary Care:

1. Enhanced Functional Recovery: Collaborative efforts is very important as they lead to comprehensive rehabilitation plans, targeting multiple facets of recovery to maximize functional gains.
2. Improved Quality of Life: Listening to patients' needs for meaningful conversation, for comforting presence

and addressing these requirements make patients feel improved and more satisfied with care.

3. **Reduced Risk of Recurrent Stroke:** it facilitates in handling risk factors, promotes healthy lifestyle changes as well as enhances patient compliance with clinical advice.
4. **Patient-Centered Care:** Multidisciplinary teams prioritize individual patient needs and preferences. They foster personalized and effective rehabilitation experiences.

Case Study: Multidisciplinary Stroke Rehabilitation Program

A detailed case study is presented on a multidisciplinary stroke rehabilitation program at The First Affiliated Hospital of Zhengzhou University in which the clinical programs are described and the impact of the intervention is assessed. Patients are treated individually according to their needs and are offered an individualized plan which includes a team of physical therapists, occupational therapists, speech and language therapists, psychologists, and social workers. Regular team meetings ensure that patients get coordinated care and their treatment plan is constantly being reviewed as the patients progress through their treatment regimens.

The program measures outcomes by using validated tools such as the Modified Rankin Scale (mRS), Barthel Index, and Stroke Impact Scale (SIS). The outcomes and measurements demonstrate a positive impact on functional recovery, speech and language improvement of the patient, patients' satisfaction and quality of life.

Strategies for Implementing Multidisciplinary Care:

1. **Team Coordination and Communication:** Meaningful communication and good patient relations ensure that all patient needs are addressed effectively and care delivery is efficient.
2. **Integrated Care Plans:** Individualized care plans, which incorporate input from all team members ensure a holistic approach to rehabilitation.
3. **Patient and Family Engagement:** Engaging the patients and their families as part of the rehabilitation process helps in the compliance to treatment and care plans; it also yields better results.
4. **Ongoing Professional Development:** Training and education on a regular basis for healthcare professionals promote best practices and innovative rehabilitation strategies.

Conclusion

Multidisciplinary care in stroke rehabilitation leads to significant benefits, including functional recovery, improved quality of life, and patient satisfaction. By using inputs from different specialists in comprehensive care, multidisciplinary teams are able to deal with comprehensively patient needs to help those who have had a stroke. Thus, it is evident that a complex care approach with multidisciplinary team members in stroke rehabilitation yields better client outcomes; further efforts to discourage multidisciplinary work and innovation in this field should be avoided.

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Appendices

Abbreviations and Terminology

1. mRS (Modified Rankin Scale): It is an assessment tool for quantifying the level of disability or dependence in the activities of the affected individuals with stroke.
2. Barthel Index: It is an index which was previously used to assess the rehabilitation outcomes focusing on activities of daily living (ADL).
3. SIS (Stroke Impact Scale): They are patient reported outcome measures that aim to identify the effect of stroke on different aspects of health and function.

Detailed Case Study

Case Study: Multidisciplinary Stroke Rehabilitation Program at The First Affiliated Hospital of Zhengzhou University

Patient Demographics:

1. Age range: 45-80 years
2. Gender distribution: 60% male, 40% female
3. Stroke type: Ischemic (70%), Hemorrhagic (30%)

Intervention Details:

1. Physical Therapists: They tried to enhance the patient's muscle endurance and allied movements by providing specific fitness regimes.
2. Occupational Therapists: They helped patients in regaining functionality, or at least attempted to do so with the assistance of adaption and assistive products.
3. Speech and Language Therapists: They assisted patients with speech, swallowing and other communication therapy.

4. Psychologists: They attempted to treat depression, also made efforts to counselling for anxiety and managing cognitive problems.
5. Social Workers: They addressed social determinants of health and also facilitated access to community resources.

Outcome Measures:

1. Modified Rankin Scale (mRS)
2. Barthel Index
3. Stroke Impact Scale (SIS)

Results:

1. Significant improvements in mRS scores. It indicates a reduction in disability.
2. Enhanced ADL performance which was measured by the Barthel Index.
3. Positive patient-reported outcomes on the SIS. It reflects improvement in quality of life.

Roles and Responsibilities of Multidisciplinary Team Members:

1. Physical Therapists: Being responsible for musculoskeletal health and using exercises which are personalized according to each patient's condition.
2. Occupational Therapists: Focusing on activities that the patients needed to do in their daily lives and using adaptive strategies.
3. Speech and Language Therapists: Providing highly focused interventions to support with communication and swallowing difficulties.
4. Psychologists: trying to support the patients' mental health through using therapeutic techniques and coping strategies.
5. Social Workers: Connecting the patients with necessary community resources and support systems.

Implementation Strategies for Multidisciplinary Care:

1. Team Coordination and Communication:
 - a) Managing regular interdisciplinary care meetings to review the patients' progress and update the health care plans.
 - b) Implementing Electronic Health Records (EHR) so it can easily transfer information.
2. Integrated Care Plans:
 - a) personalizing rehabilitation programs according to feedback from all of the team members.

- b) Keep monitoring and updating care plans according to patients' progress.
- 3. Patient and Family Engagement:
 - a) Placing patients and families in goal-setting and decision-making processes.
 - b) Holding educational sessions for patients and caregivers about stroke recovery and it's management.
- 4. Ongoing Professional Development:
 - a) Regular training workshops and seminars for healthcare professionals.
 - b) Encouraging staff to attain stroke-rehabilitation certifications and higher education.

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