

Stroke Recovery Tips

www.stroke-rehab.com

Recovering Balance After Stroke

Examples of balance exercises can be viewed at <http://www.stroke-rehab.com/balance-exercises.html>

Here are the steps I take with my stroke patients to regain balance. First, one must have sitting balance. Just like an infant must learn to sit before standing so must an individual who has had a stroke. Here is a simple sequence to follow:

1. Work on static sitting balance with hand support—just holding oneself sitting upright without moving allowing patient to hold on as necessary.
2. Work on static sitting balance without hand support—same as above except patient is not allowed to hold on with hands.
3. Work on dynamic sitting balance with hand support—this involves adding movement as you are sitting such as shifting weight side to side, forward and back, and lowering oneself down on an elbow and back up.
4. Work on dynamic sitting balance without hand support—same as #3 but neither hand is used for support.
5. Work on sit to stand, leaning the body forward and coming to full stand as able. One can use an elevated mat to make it easier to stand.
6. Static standing with hand support (standing in place with no movement).
7. Static standing without hand support.
8. Dynamic standing (shifting weight side to side, forward/back, reaching, etc.) with hand support.
9. Dynamic standing without hand support.



Inside this issue:

- Recovering Balance After Stroke **1**
- Exercise Tip of the Month—Scapular Mobilization **1**
- Adaptive Clothing **2**
- Caregivers Corner—Take Care of Yourself **2**
- Edema in the Hand **2**

Exercise Tip of the Month

When trying to improve shoulder range of motion, many patients may not realize that they need to make sure their scapula (shoulder blade) is moving correctly. In order for the arm to raise above shoulder height properly, the scapula has to rotate upward and out away from the spine. If the scapula does not rotate, then the patient will most likely feel shoulder pain when attempting to bring the arm up. To make sure your scapular muscles are strong, one can work on moving the scapula through various exercises

such as shoulder blade squeezes and shoulder rolls. If the scapular muscles are tight, one can mobilize their own scapula by rolling over the scapula. This is done by lying on one's back with the knees bent toward the ceiling & feet flat, the affected arm is lying out to the side. The patient then rolls toward the affected side and gently rocks back and forth over the shoulder blade. Repeat 3-4x and then proceed to shoulder range of motion exercises which are often less painful after scapular mobilization.



There are several adaptive clothing retailers.

Check out www.silverts.com for examples of adaptive clothing that can be purchased and to get dressing tips for the disabled.

Adaptive Clothing for Stroke Patients

Adaptive clothing is available for stroke patients who have difficulty dressing themselves due to weakness, immobility, or poor coordination. Adaptive clothing is also designed to allow caregivers ease of access when assisting a patient in getting dressed.

Do you have trouble putting on a bra or button down shirt? Is tying your shoes too difficult? Do you avoid going out because it's a

chore to get your pants off to go to the bathroom? Adaptive clothing uses solutions such as Velcro or snap closures rather than buttons to make dressing easier, can be applied from a seated position, accommodates problems like swelling or poor circulation, and allows for quick changes when incontinence is an issue. Even pants can be changed from a seated position with no standing.

Adapted clothing offers other conveniences such as zipper front dresses or robes, comfortable shoes with Velcro, front closing bras, open back clothing, wrap skirts, side opening pants, and more. You can also find accessories that help improve safety and cleanliness such as non-skid socks, arm protectors, and protective bibs. Search adaptive clothing online to find various retailers.

CAREGIVER'S CORNER-TAKE CARE OF YOURSELF!

According to www.caregiver.org, about 60% of caregivers show signs of clinical depression. They also take more prescription medicines, including those for anxiety and depression, than others their age who are not caregivers. Unfortunately, many caregivers do not take the time to take care of themselves and often isolate themselves from friends and family. Here are some steps that caregivers can take to protect their own health and emotional well-being:

1. Make time for yourself.

Schedule time away from your loved one each week to do something you enjoy. Have a friend, other family member, church member or paid caregiver watch your loved one while you enjoy a dinner, movie, shopping trip, or maybe just time alone to read a book.

2. Accept help from others. When someone asks if they can help, say yes! Others can help with meals, getting groceries, yardwork, watching your loved one, running errands, etc.

3. Get enough sleep.

4. Join an online or in person support group so you can vent frustrations or get informative caregiver tips that can help you.

5. Don't isolate yourself from family and friends.

6. Seek counseling if needed.



Edema in the Hand

Edema can be a problem with a hemiparetic or hemiplegic arm especially in the hand. This edema can affect sensation as well as the patient's ability to move the hand. One solution for hand edema is a compression glove worn at night along with elevating the hand above the heart. One can also try a cold pack to help reduce swelling or try retrograde massage. Retrograde massage

involves gently massaging the arm moving upwards from fingertips to elbow as if pushing the edema up and out of the fingers (never push down toward the fingers as this can increase swelling). In my experience, compression gloves work best, however, check first with your MD before using gloves or retrograde massage as these may be contraindicated for some individuals (e.g. those with



volume overload, congestive heart failure, and some other conditions).