

# Intensive Goal-Directed Treatments in Enriched Environments Augments Patient Outcomes Post-Stroke



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## OBJECTIVE

- Previous research indicates that patients post-stroke take an inadequate amount of steps (400-800 steps per session)<sup>1</sup> and work at inadequate intensities (24-35% of HR Max)<sup>2</sup> to promote neuroplastic changes and maximize recovery<sup>3,4,5,6</sup>.
- Research indicates that medically stable individuals can safely begin gait training earlier after a stroke and have better outcomes than individuals that start training later<sup>7,8</sup>.
- The goal of this study was to examine feasibility and outcomes of high-intensity, high-dosage stepping practice for individuals after stroke in the inpatient rehabilitation setting.

## METHODS

- 21 patients post sub-acute stroke (<6 months)
- Standardized outcomes assessed weekly:
  - 6-Minute Walk Test (6MWT)
  - 10-Meter Walk Test (10MWT)
  - Berg Balance Scale (BBS)
  - Postural Assessment Scale for Stroke (PASS)
- Steps were collected with step activity monitors, and intensity was monitored and collected with heart rate monitors and Borg Rate of Perceived Exertion Scale (RPE).
- Target intensity was defined as:
  - Heart rate values of 70-85% of HR Max and RPE values of 14-20.
- Each subject was scheduled for 1-2 hours of physical therapy per day.

## Results of High-Intensity, High-Dosage Gait Training

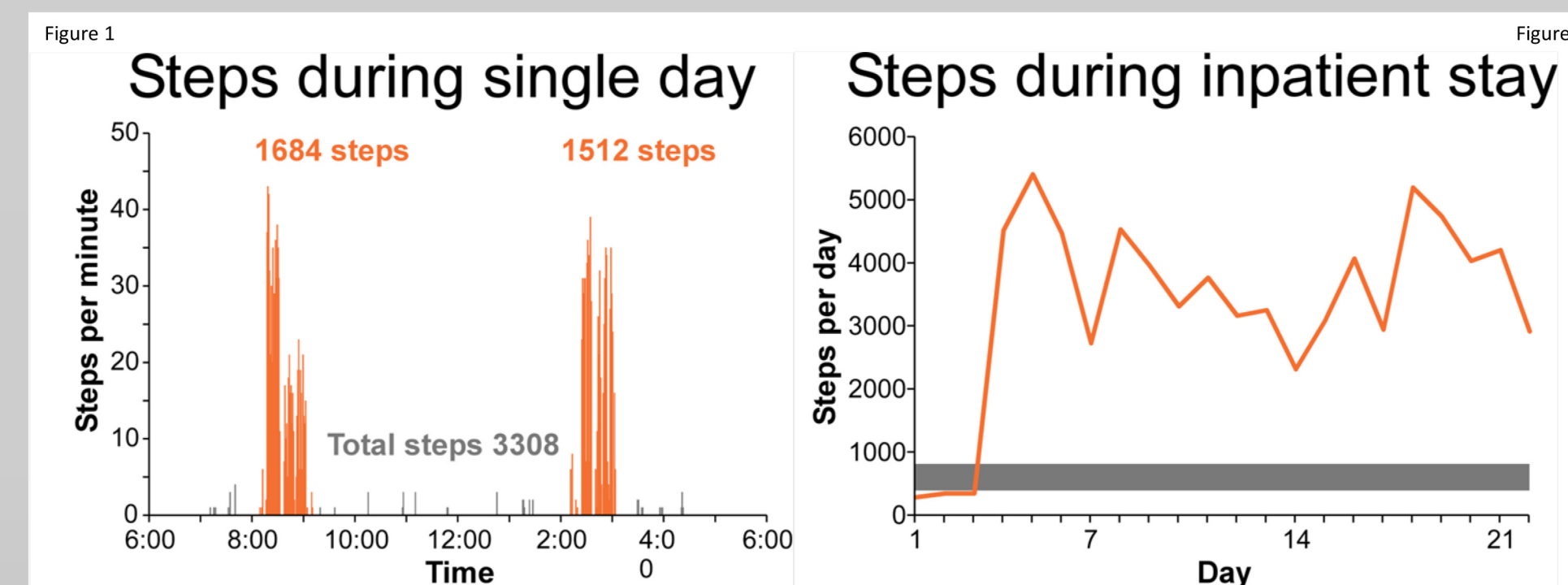


Figure 1 – Actual recorded number of steps taken by an individual during one day of inpatient stroke rehabilitation. Figure 2 - Actual recorded number of steps taken by an individual throughout duration of inpatient stroke rehabilitation. Gray bar indicates average steps taken by individuals in stroke programs across United States (400-800 steps per session).

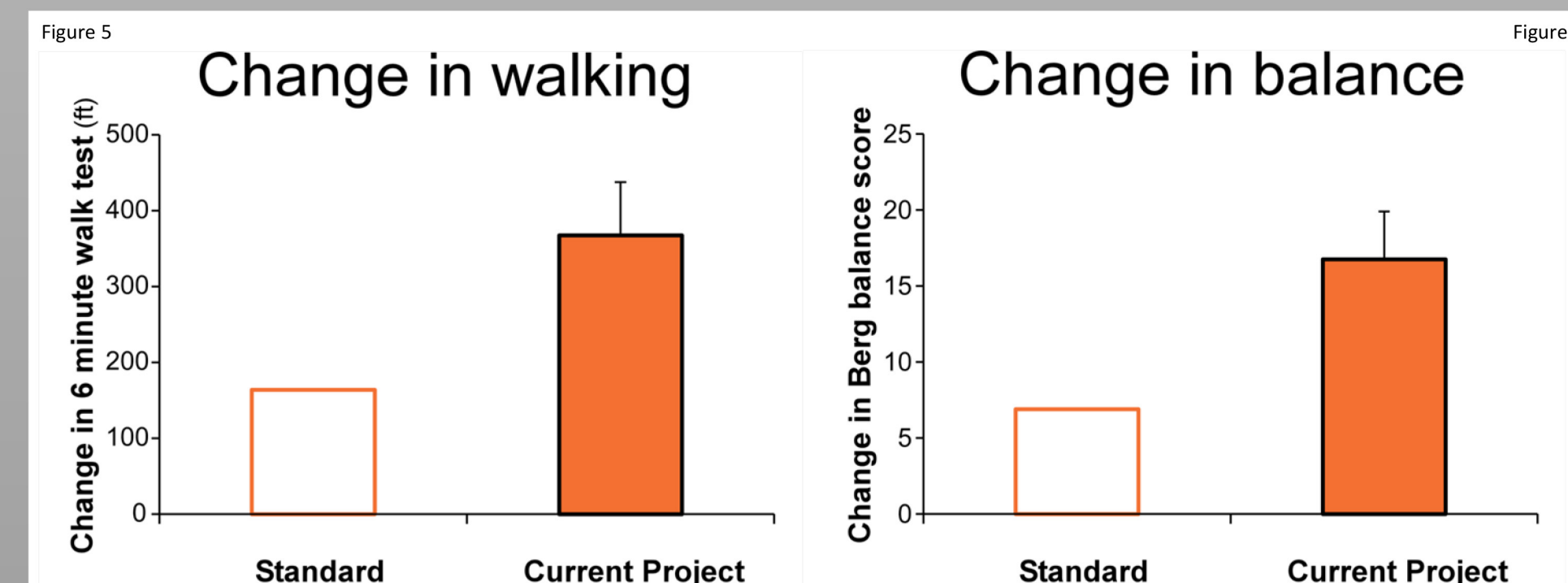
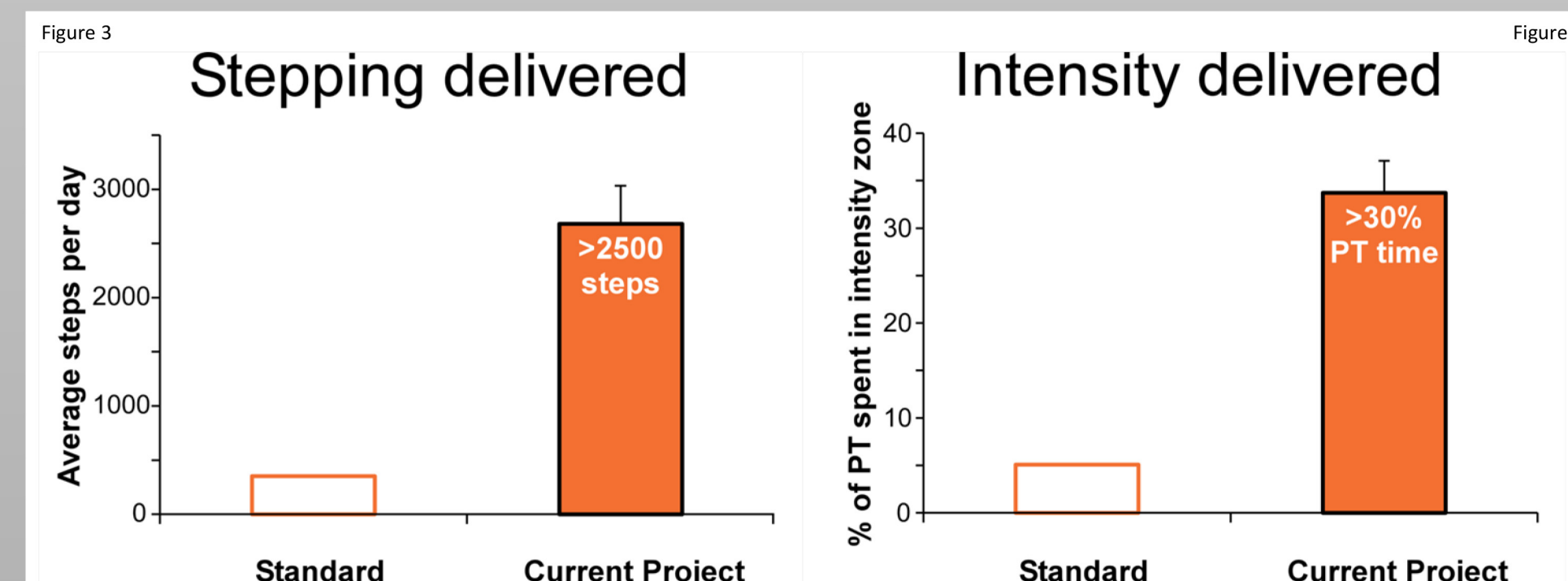


Figure 3 - The stepping dosage of the current project versus the average number of steps taken by individuals in stroke programs across the United States. Figure 4 - The intensity of training of the current project versus the intensity delivered to individuals in stroke programs across the United States. Figure 5 - The changes in the 6-Minute Walk Test (6MWT) recorded during the current project compared to what is considered clinically significant. Figure 6 - The changes in the Berg Balance Scale (BBS) recorded during the current project compared to what is considered clinically significant.

## Correlation of Outcomes and High-Intensity, High-Dosage Gait Training

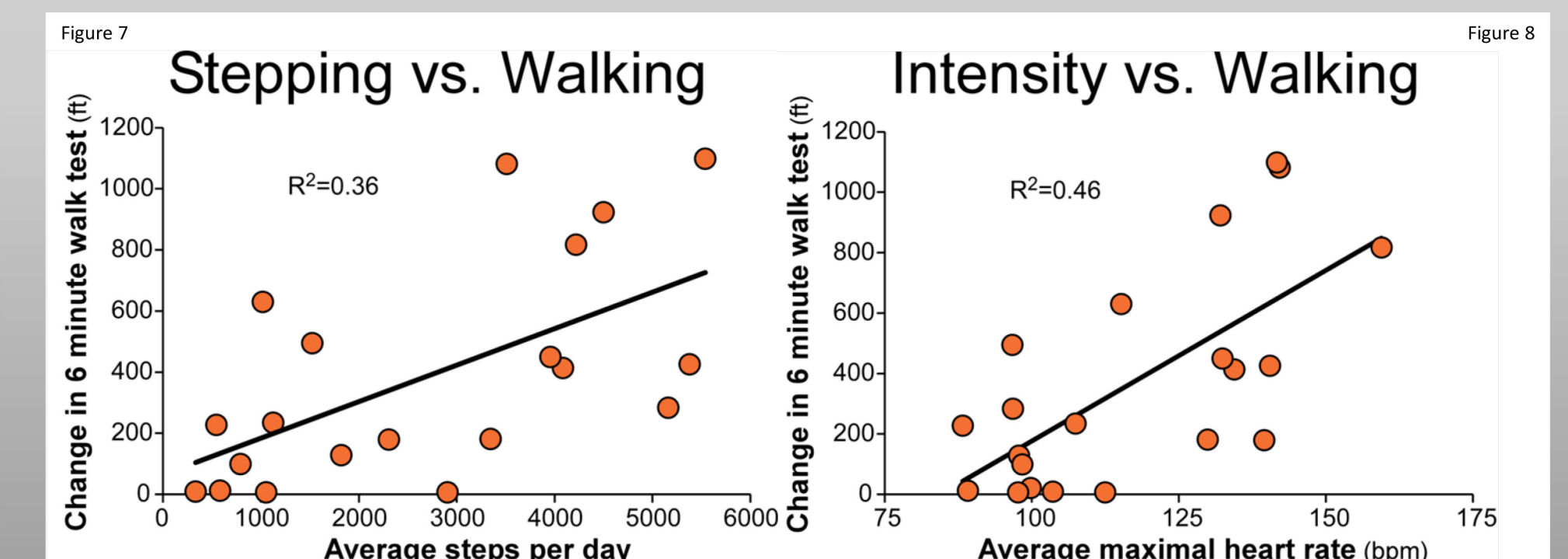


Figure 7 – Correlation between actual stepping data taken from all individuals admitted for inpatient stroke rehabilitation and their change in 6-Minute Walk Test (6MWT). Individuals taking a greater number of steps tended to have greater improvements in their 6MWT. Figure 8 – Correlation between actual recorded average maximal heart rate from training sessions and their change in 6MWT. Individuals working at a higher intensity, as measured by average maximal heart rate, tended to have greater improvements in their 6MWT.

## RESULTS AND CONCLUSIONS

- Stepping data indicated that subjects received an average daily stepping dosage of 2000-8000 steps per day, well above previously reported values.
- During the 2-month collection period, subjects demonstrated ability to tolerate a high-intensity, high-dosage stepping gait training program within the intensities defined.
- Individuals within this program took >750% more steps and worked at the target intensity level (70-85% of HR max) >650% more frequently than currently seen in stroke inpatient units across the United States.
- Individuals within this program showed improvements in 6-Minute Walk Test and Berg Balance Scale results, of approximately 2x more than reported levels of significant clinical change.
- Analysis of collected stepping and intensity data showed a positive correlation of both increased stepping and intensity levels when compared with improvements in 6-Minute Walk Test.

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