provided by Else

(n = 21, 40%).

Discussion.- This study suggests that numerous musculoskeletal problems may complicate pregnancy especially in third trimester.

http://dx.doi.org/10.1016/j.rehab.2014.03.1258

Р352-е

A comparative study on hearing and hearing-impaired Persian speaking children regarding "story retelling" pragmatic abilities

F. Jarollahi

Iran University of Medical Sciences, School of Rehabilitation Sciences, Tehran, Iran

Keywords: Pragmatic skills; "Story-retelling"; Hearing impairment; Persian language

Introduction.– "Story-retelling" is an invaluable linguistic tool to more accurately portray children's language performance. In comparison with hearing, hearing-impaired children have different pragmatic skills. The present study purpose was to investigate some pragmatic skills of hearing-impaired Persian speaking children through "story-retelling" examination.

Material and methods.— In this study, 30 six-year-old children were evaluated by Persian story-retelling test by which seven features were examined. The test was performed with live voice resource and picture-showing test. After transmitting the data, the child re-told story was recorded to be analysed and scored.

Results.– The hearing-impaired children had significantly weaker or more seriously limited abilities in topic maintenance, events sequencing and explicitness. Also, the hearing-impaired children could gain no score from items of small structure subtest.

Discussion.– In accordance with parallel studies, the results showed that "storyretelling" evaluates the shape, form and language usage method simultaneously. The hearing-impaired children could not use pragmatic skills as well as their hearing peers. Compared with the hearing children, the hearing-impaired children could use their limited pragmatic skills in an alternative way. It seems like efficient usage of residual hearing; onset time and quality of aural rehabilitation program, and parent's participation are among effective factors causing these differences. So it is suggested that the rehabilitation programs for hearing-impaired children should include special exercises for the acquisition of pragmatic skills.

http://dx.doi.org/10.1016/j.rehab.2014.03.1259

Р353-е

Juvenile arthritis and schooling: A case report



A. Dellyes^{*}, L. Bensoussan, J.-M. Viton, A. Delarque *AP–HM, Hôpital de la Timone, Service de Médecine Physique et Réadaptation, Marseille, France* *Corresponding author.

Keywords: Juvenile idiopathic arthritis; Education; International Classification of Functioning Disability and Health

Introduction.– Few data referring to the functional impact of Juvenile Idiopathic Arthritis (JIA) on children's education are yet available.

Objective.– To describe, according to the International Classification of Functioning Disability and Health, the evolution of JIA disease damages, disabilities, and limitations on the participation activities particularly in the field of education. And as a corollary, to describe several environment adaptations and management plans that can be provided.

Material.– We report the case of an eighteen years old person who recently integrates the National Superior School of Architecture. She's suffering from an early systemic juvenile arthritis with joint structural damages and general signs, and therefore required an anti-IL1 monoclonal antibodies treatment associated with a corticosteroid systemic therapy. In addition to osteoarticular repercussions, she also presented iatrogenic complications and growth disorders with the need to use growth hormone.

faced with (including material human and financial considerations), we bring practical proposals which help to better manage and enhance the rehabilitation of children affected by JIA into primary, secondary and higher education.

http://dx.doi.org/10.1016/j.rehab.2014.03.1260

Р354-е

Rehabilitation in 5 cases obstetrical brachial plexus palsy tracked over time (15 years) H. Basic^{a,*}, J. Bogdani^b

^a Public Health Department_CBR, Doboj

^b Banja Vruica

*Corresponding author.

Keyword: Obstetrical brachial plexus palsy

Introduction.– Plexus brachial palsy causes weakness or loss of motion and feelings in the arm. Obstetrical brachial plexus palsy is the most common cause of neonatal brachial plexus palsy. The incidence is 1.03 per 1000 live births. Most recover within 2 first months of life. In most cases of brachial plexus birth palsy, the upper nerves are affected, known as Erb's palsy.

Method and material.— Four boys and 1 girl, recovery monitored by: The Mallet classification after age, formal goniometry to measure active and passive range of motion, measure the length of both arms, clinical observation of posture. Daily exercise was the treatment up to 3 months. The exercises maintained over the time.

Results.– The first follow-up after 3 months–four patients had Erb's palsy, one of them had complete brachial plexus palsy. Four patients have limited rotation of shoulder, one has no movements of arm. All patients have thoracic scoliosis under 10 degrees.

Discussion.- The severity of the injury determines treatment and the extent of recovery.

http://dx.doi.org/10.1016/j.rehab.2014.03.1261

Р355-е

Our experience with extracorporeal shockwave therapy (ESWT) in spastic children with cerebral palsy (CP)

A. Mirea^{a,*}, L. Padure^a, T. Spircu^b, G. Onose^c

^a University Of Medicine And Pharmacy "Carol Davila", National Teaching Centre For Children Neurorehabilitation "Dr. Nicolae Robanescu", Bucharest, Romania

^b University Of Medicine And Pharmacy "Carol Davila", Romania

^c University Of Medicine And Pharmacy "Carol Davila", Teaching Emergency Hospital "Bagdasar Arseni", Romania

*Corresponding author.

Keywords: Children; Spasticity; Cerebral palsy; Extracorporeal shockwave therapy; QoL

Introduction.— As there are already some reports on the use of ESWT for the spasticity management of children with CP, the purpose of our trial was to achieve improvement of our patients.

Material and methods.- We included 56 spastic children in our study with CP, aged 5–18 years and used focused ESWT in 4 sessions during the admission of each child on the mainly affected muscles using for all the same treatment parameters (intensity: 0.15 mJ/mm², 500 shocks, frequency: 10 Hz). Patients were assessed twice: first time during admission (before 1st ESWT application) and second at discharge (after the 4th ESWT session). The following examinations have been performed: active range of motions, modified Ashworth scale scores and patient's Quality of Life (QoL).

Results.– ESWT proved to be statistically efficient in upper limbs and lower limbs muscles, reducing the Ashworth modified scale scores, according to the calculated efficiency through the Somers'd from 0.609 (for harmstrings) to 0.815 (for adductors).

