EDITORIAL

Community reintegration after stroke

Stroke is the most common cause of neurological disability, and remains a significant public health concern worldwide [1]. Traditional physiotherapy has been focusing on the restoration of sensorimotor function (e.g., muscle strength, movement coordination, spasticity, balance) and performance in certain daily activities such as ambulation. However, relatively less attention is paid to community integration after stroke, which involves several important elements, including participation in activities at home or a home-like setting, engagement in productive activities, and establishment and enjoyment of a social network [2]. Low levels of satisfaction with community reintegration after stroke have been reported in several studies [3–6]. It is thus important to identify the contributing factors to poor community reintegration in this patient population. Several clinical correlates of community reintegration have been identified among individuals with stroke, including physical disability [4], balance self-efficacy [6], depression [4, 6–8], and balance ability [6]. In this issue of the Hong Kong Physiotherapy Journal, Obembe et al [9] undertook a study involving a sample of 90 individuals with stroke and showed that severity of motor impairment (as measured by the Motor Assessment Scale) and depressive symptoms (as measured by the Hamilton Depression Scale) were significantly associated with a satisfaction level with community reintegration as indicated by the Reintegration to Normal Living Index in their multivariate analysis. Their results thus further reinforced the potential importance of not only motor rehabilitation, but also the proper screening and subsequent treatment of depression in individuals with stroke, so as to enhance their community reintegration. Future intervention clinical trials should also incorporate community reintegration as an outcome measure to evaluate whether the experimental intervention being studied is successful in optimizing the transition to community living among people with stroke.

References


Marco Y.C. Pang
Department of Rehabilitation Sciences, Hong Kong Polytechnic University, Hung Hom, Kowloon, Hong Kong
E-mail address: Marco.Pang@polyu.edu.hk