either only on the clinical intuition or observational studies. The medicine based on the evidence crosses today all the disciplines of rehabilitation. We never needed to show the efficiency and to compare the costs/benefit of the TPE programs [1–3]. If the TPE efficiency programs cannot be compared between them in term of costs/ effectiveness, the authorities and the professionals of health will be unfocused. Poorer, that will strengthen the chronically sick patients to expect a miracle treatment and to refuse to take part in the TPE programs considering them as “optional”. From this perspective of proof demonstration the first work showed that the adapted physical-activities will produce a crucial role in the aim to maintain the behavioral changes induced by the TPE programs [4].

References

CO07-002-e

Educational needs of post-stroke patients and their caregivers
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Keyword: Patient therapeutic education stroke
Objective.– Show the importance of educational needs of the post-stroke patients and of their caregivers.
Methods.– Retrospective study on 62 patients supported by our multidisciplinary mobile team of post stroke outpatient (HEMIPASS) in 2012. We classified the different actions in eight domains: taken back by occupation, research of adapted transport, developments of the domicile, self-government in AVQ, administrative files, coordination of care, support of the patient and aidants and actions of education they the same divided into four groups. Different domains could concern the same patient.
Results.– Different undertaken actions were: help to return to work (6%), research of adapted transport (24%), home adaptations (13%), rehabilitation in activities of daily living (35%), local authorities/support services (38%), coordination of care (43%), psychological support in patient (40%) and in caregivers (45%) and actions of education (100%). This actions of education concerned four main topics: cognitive and communication problems (50%), prevention of another stroke and treatments (31%), physical care/moving (18%) and exercise and staying active (16%).
Discussion.– This work confirms the importance of educational needs of post stroke patients and their caregivers [1–3]. In our study, needs and concerns of the patients and their caregivers are those habitually brought back [2,3]. Situations taken care by the mobile teams for post stroke patients are advantageous for the creation of programs of Therapeutic Education of Patient (ETP) according to recommendations of HAS [1–3].

References

CO07-003-e

Organization of a multi centered therapeutic education programme (TEP) for patients after a stroke
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Keywords: Therapeutic Education Programme; Stroke; Programme; Chain Objective.– Legislation being favourable (loi HPST, Plan AVC 2010-2014) and following the publication of guidelines by the SOFMER and the SFNV on post-stroke Therapeutic Patient Education (TEP), three structures of aftercare and rehabilitation (SSR) and a health network formed a steering committee (COPIIL). Its main mission is to develop and structure the educative practice for patients after a stroke following two ways: prevention of cardio-neuro-vascular risks; physical and cognitive consequences after a stroke.
Materials and methods.– The COPIL, created on December 5th, 2011, gathers competent professionals for stroke reeducation (PRM doctors, health care managers and physiotherapist) or for PTE (master or university degree). The COPIL develops a general methodology following the evaluation of professional practice: description of the current situation (questionnaire for SSR professionals); choice of improvement axis and an action plan; evaluation.
Among the actions of the plan, the COPIL develops an interview guideline for educative diagnosis, constitutes eight multidisciplinary work groups in SSR wards, distributes the different themes, coordinates and synthesizes works, anticipates evaluation tools and prepares the authorization file for the programme for the Regional Health Agency.
Results / Discussion.– Results show that professionals have a poor knowledge on TPE. The improvement axis emerging wes to form professionals, to develop a TPE programme on eight themes dealing with secondary prevention and frequent consequences after a stroke, following learned societies’ recommendations. The COPIL meets once a month. The drawing up of the programme on the eight themes is currently in its final stage. Each working group is directed by two experts, one on the theme and the other on TPE. Patients and their caregivers were involved. The authorization request for the programme is planned for September 2013.
The methodology’s main interests consist in its overall vision of sequelae of stroke and its regional use by the coordination team of the stroke chain.
Further reading www.sofmer.com/ Eléments pour l’élaboration d’un programme d’Education Thérapeutique spécifique au patient après AVC.
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Education and chronic back pain
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Objectives.– Education showed its interest in the chronic back pain. It is most frequently realized within the course of care of the patient in particular during the programs of functional restoration. An evaluation of the achievement of the educational objectives defined during the shared educational assessment was realized in six months after an educational program.

Patients and methods.– Retrospective study of 104 patients with chronic back pain having participated from 2008 till 2012 in a therapeutic educational program and functional restoration. The patients benefited during the pre-inclusion to the program, a shared educational assessment. The defined objectives were revalued at six months. The patient had to define if the objectives were:
- reached;
- or not reached but possible;
- or impossible.

Results.– In six months, on 62 patients, 55% reached their goals, 35% did not reach their goals but think that it remains possible and 10% of the patients think that their objectives are impossible to reach. The most frequent objectives retained by the patients were: the better manage my pain, take back a physical activity, the better know my body, take back a professional activity. The satisfaction to the program is very good, 90% of the patients were satisfied by the program.

Conclusion.– This therapeutic educational program integrated into the care allows to reach in a complete or partial way the educational objectives defined by the patients and the nursing, in an important proportion (90%).

References
[1,2] without to study the importance of patients’ information.

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CO07-006-e
Therapeutic education for hyper mobile EDS patients: “PrEduSED”
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Keywords: Rare disease; Patient education; Disease hypermobile Ehlers Danlos type

Introduction.– The disease Ehlers Danlos hypermobile [1] is a rare connective tissue disease responsible for a chronic pain syndrome. PrEduSED is the first therapeutic education program (ETP) for hyper mobile EDS Patients in partnership with the French Association of Ehlers-Danlos syndrome (AFSED).

Goals.– Improve self management of pain, fatigue, and episodes of instability Learn how to communicate about the disease, and its repercussion in the everyday life. Improve quality of life knowledge and skills about self-care which will enable the person to become an “expert patient” [2].

Procedure.– The program is built according to the recommendations of the High Authority for Health (HAS) and is provided by a multidisciplinary staff including rehabilitation physician, geneticist, rheumatologists, physiotherapists, occupational therapists, psychologists, a member of the AFSED.

Different modules address the disease, its genetic transmission, methods of diagnosis, drug and non-drug treatments, pain, physical activity, the equipment, the impact emotional and social as well as a special workshop for caregivers. The evaluation of the program at T0 and one year relates to the quality of life (SF 12), fatigue (Fatigue scale FIS), coping (CSQ-F), body image (QIC), anxiety and Depression (HAD) and a self-assessment of knowledge and skills (quiz).

Results.– Eighteen patients benefited from the program (17 women, 1 man) with a mean age of 35.3 years. It was noted in all patients at T0 an anxiety syndrome, chronic fatigue syndrome, a disturbed body image. Coping strategies are rather positive. Seventy-five percent of participants with disabilities to work or disability.

Conclusion.– This program is innovative in the context of rare and received certification of ARS Rhône-Alpes. Different research programs on the real impact of PrEduSED which are being recognized by the French Association for the Development of Therapeutic Education (price AFDET 2013).

References

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Therapeutic education after amputation: Literature’s review
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Keywords: Amputee; Therapeutic education; Literature review

Introduction.– The experience of amputation is at the origin of an undeniable change in quality of life with a somatic and functional impact. The quality of life depends on individual and environmental factors that can be modified by the