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The clinical characteristics of patients who fall in the recovery phase rehabilitation ward

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Abstract

The study included a total of 108 patients who were admitted to the recovery phase rehabilitation ward of our medical center during the November 2016 to June 2017 period, consisting of 68 patients with cerebrovascular disease, and 40 patients with orthopedic disease. As a result of extracting cases of falls during hospitalization from medical records, we found 24 cases. Subjects were divided into a fall group and non-fall group, in which we analyzed the test results obtained from clinical tests during hospitalization including the Berg Balance Scale (BBS), Mini-Mental State Examination (MMSE), and Frontal Assessment Battery (FAB). As a result, compared to the non-fall group, the fall group had poorer frontal lobe function. In particular, we found that impairment in the conflicting instruction task, which is a sub-item of the FAB, contributed to falls. Therefore, it is thought that the approach to prevent falls should take frontal lobe function into account. Tottori J. Clin. Res. 10(4), 208-214, 2018

Key words: recovery phase rehabilitation ward, falls, Berg Balance Scale (BBS), Frontal Assessment Battery (FAB)

1. Introduction

In the recovery phase rehabilitation ward, intensive recovery phase rehabilitation is performed to improve functioning, improve activities of daily living (ADL), and facilitate discharge to return patients home. As a result, from admission to discharge, patients go from being wheelchair bound to being capable of walking, which improves ADL and motor function; however, this is always accompanied with the risk of falls[1)]. The incidence of falls in the recovery phase rehabilitation ward is 4.6 – 13.9 cases per 1,000 population per day, which is considered to be high when compared to acute phase wards, and community-dwelling elderly individuals[2)]. Furthermore, in recent years, the outcomes of recovery phase rehabilitation such as in improving the Functional Independence Measure (FIM) have come to be considered important, and the level of independence needs to be improved safely. Therefore, efforts to prevent falls have become indispensable, and even in the recovery phase rehabilitation ward of our medical center, we have created an evaluation sheet to screen the risk of falls at admission, and are implementing fall countermeasures.

2. Objectives

The present study aims to analyze and compare clinical data of fall patients and non-fall patients during hospital stays, and retrospectively examined