

Pojavnost padcev pri pacientih po možganski kapi, ki živijo v skupnosti

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Uvod: Ogroženost za padce je pri pacientih po možganski kapi visoka v vseh fazah (1). Med prebivalci, ki živijo v skupnosti, so padci pogosteji pri ljudeh po možganski kapi kot pri ljudeh brez kapi (2). Pojavnost padcev med posamezniki z možgansko kapjo, ki živijo v skupnosti, v Sloveniji še ni bila raziskana. Namen raziskave je bil predvideti pojavnost in dejavnike za padce pri vzorcu pacientov po možganski kapi, ki živijo v skupnosti. **Metode:** Izvedli smo presečno študijo na posameznikih, ki živijo v skupnosti. 233 članom ljubljanskega in ptujskega kluba bolnikov s cerebrovaskularno boleznjijo je bil razdeljen 30-delni vprašalnik. Obsegal je demografske podatke, datum možganske kapi in njene posledice, sigurnost pri hoji, uporabo pripomočkov, pogostnost in posledice ter predvidene notranje in zunanje dejavnike padca v zadnjih šestih mesecih. **Rezultati:** Odzivnost je bila 54,9 %. Padlo je 41,4 % preiskovancev, od katerih je bilo 64,2 % moških. Tisti, ki so padli, so bili v povprečju stari 63 let (SO: 11,4) in v povprečju 11 let (SO: 9,1) po možganski kapi. 62,3 % preiskovancev, ki so padli, je imelo levostransko hemiplegijo in pri skoraj dveh tretjinah (71,7 %) sklepamo na posledično zanemarjanje polovice telesa. Vsi, ki so padli, so poročali o motnjah hoje, četrtina o resnejših, zato je večina preiskovancev (62,3 %) uporabljala pripomočke za hojo, najpogosteje eno berglo (26,4 %), voziček (22,6 %) in sprehajalno palico (17,0 %). Večina padcev se je zgodila dopoldan (39,9 %) in popoldan (34,0 %), manj zvečer ali ponoči. Več kot polovica jih je padla enkrat, 28,3 % dvakrat in 30,2 % več kot dvakrat. 59,0 % padcev se je zgodilo doma in 18,9 % pred stanovanjskim objektom. Do več kot polovice padcev je prišlo med hojo, 22,6 % se jih je zgodilo med stoj in 15,1 % med vstajanjem s stola ali postelje. Po padcu 64,2 % preiskovancev ni bilo sposobnih samostojno vstati. Najpogosteje posledice padca so bile udarne ali odrgnine (66,0 %) in 20,8 % jih je potrebovalo zdravniško oskrbo. Po mnenju preiskovancev so bili glavni notranji dejavnik za padec moteno ravnotežje (52,8 %), težaven dvig stopala med korakom (35,9 %), slabše občutenje okvarjene noge (28,3 %) in vrtoglavice (26,4 %). Kot glavni zunanji dejavnik za padec so označili drseča tla (20,8 %), visok prag vrat ali rob pločnika (18,8 %) in neravna tla (11,3 %). 73,6 % preiskovancev je navedlo strah pred ponovnim padcem, zaradi katerega jih 49,1 % omejuje svoje gibalne dejavnosti. Med preiskovanci, ki so padli, in tistimi, ki niso, nismo ugotovili statistično značilnih razlik v spolu in strani hemiplegije. **Zaključki:** Preprečevanje padcev je pri pacientih po možganski kapi pomemben cilj zdravstvene oskrbe (3). Ta presečna študija daje podatke za razumevanje odnosa med možgansko kapjo in padci ter omogoča slovenskim fizioterapeutom, da obravnavajo padce kot temeljno grožnjo, zaradi katere bi bilo v prihodnje treba pregledovati ogroženost in delovati preventivno. Za ugotavljanje dejanske pojavnosti padcev med pacienti po možganski kapi, ki živijo v skupnosti, je potrebna študija na večjem vzorcu.

Ključne besede: nezgodni padci, značilnosti, dejavniki, možganska kap.

Falls prevalence in patients residing in the community after stroke

Background: Stroke survivors are at high risk for falls in all stages post stroke (1). Falls are more frequent among community residing patients after stroke than in people without stroke (2). The prevalence of falls among patients with stroke living in community was not established previously in Slovenia. The purpose was to estimate fall prevalence and identify factors related to fall occurrence in a sample of patients residing in a community after stroke. **Methods:** A cross-sectional study with individuals residing in the community was carried out. The 30 items questionnaire was distributed to the 233 members of the Ljubljana and Ptuj Stroke clubs. The questionnaire included demographic data, date of stroke and its consequences, confidence in walking, use of assistive devices, prevalence and circumstances, and the estimated intrinsic and extrinsic risk factors of a fall in the last six months.

Results: Respond rate was 54.9 %. Falls occurred in 41.4 % of patients, 64.2 % of them were males. Fallers were in average 63 years old and in average 11 years after stroke. 62.3 % of fallers had left-sided hemiplegia and almost two thirds (71.7 %) probably had hemi-neglect. All fallers had gait disturbances; a quarter of them had severe disturbances. For these reasons majority of fallers (62.3 %) used assistive devices, most frequently a crutch (26.4 %), a wheelchair (22.6 %), and a walking stick (17.0 %). Most of the falls happened in the forenoon (39.9 %) and afternoon (34.0 %), and less in the evening or during the night. More than half of fallers fell once, 28.3 % fell twice and 30.2 % more than twice. 59.0 % falls occurred at home and 18.9 % near home. More than a half falls happened during walking, 22.6 % during standing and 15.1 % during rising from a chair or bed. After the fall 64.2 % of fallers were not able to get up by themselves. The most prevalent consequence of falls were contusions and abrasions (66.0 %) and 20.8 % of fallers needed medical care. By the opinion of fallers, the main intrinsic factor for falls were balance limitation (52.8 %), difficulty rising a foot (35.9 %), decreased sensory function of the affected leg (28.3 %) and dizziness (26.4 %). The main extrinsic factors were slippery walking surface (20.8 %), doorstep or pavement edge, which was too high (18.8 %), and uneven walking surface (11.3 %). 73.6 % had fear of falling and for that reason 49.1 % of them restricted their mobility. We did not find statistically significant difference in gender or side of hemiplegia between fallers and non-fallers.

Conclusions: Preventing falls in patients affected by stroke is an important healthcare goal (3). These studies provide information for understanding the relationship between stroke and falls and enable Slovenian physiotherapists to acknowledge falls as an essential threat, implying a need for risk screening and prevention. To establish the actual prevalence of falls in patients residing in the community after stroke in Slovenia, a study on large sample size is needed.

Key words: accidental falls, characteristics, risk factors, CVI.

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