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STUDY: AGE AT TIME OF STROKE DECREASING, DISCHARGES TAKING PLACE WITHOUT PARTICIPATION CONSIDERATION

Occupational Therapy-Based Research Finds Need for Re-Education of Health Care Professionals Regarding Stroke

Bethesda, MD — Think you're too young to have a stroke? Think again, according to new research at Washington University School of Medicine in St. Louis published in the September/October 2009 issue of the *American Journal of Occupational Therapy*. Forty-five percent of the 7,740 study patients who had been hospitalized at Barnes-Jewish Hospital with a diagnosis of stroke were less than 65 years old and nearly 27 percent were less than 55. Compare this to the statistic provided by the National Institutes of Health: two-thirds (66 percent) of all strokes occur in people over age 65.

"The needs of a younger person with stroke go far beyond those of the older population," said study co-author Timothy J. Wolf, OTD, MSCI, OTR/L, instructor of occupational therapy and neurology and investigator for the Cognitive Rehabilitation Research Group (CRRG) at Washington University. "This includes family issues, work, driving, marriage responsibilities and community participation. U.S. rehabilitation programs are not organized to serve these needs. In fact, this study demonstrated that many of these people get minimal or no services after stroke."

Study patients who had a mild to moderate stroke—approximately 82 percent—were usually discharged directly home (71 percent), discharged with home services only, or discharged with outpatient services only.

"These services have limited focus on work rehabilitation and community integration," said Wolf. "Based on a follow-up assessment, people with mild or moderate strokes were not successfully integrating back into their everyday lives."

Specifically, 46 percent reported working slower, 42 percent reported not being able to do the job as well, 31 percent reported not being able to keep organized and 52 percent reported not being able to concentrate.

"In the current medical climate, people who have had mild to moderate strokes are discharged with minimal to no services in large part because stroke scales by the National Institutes of Health do not identify all of the deficits that will affect participation after a stroke," said Wolf.

Susan H. Lin, ScD, OTR/L, director of research at the American Occupational Therapy Association (AOTA), says this study indicates health care professionals as a whole need to be educated about the role occupational therapy plays in the rehabilitation of persons with stroke. "Occupational therapy practitioners focus on the whole person to address the return to full participation in work, family and community life. Physicians and other health care professionals need to recognize this and address potential gaps by referring patients to occupational therapy services, which will help them live life to its fullest," said Lin.

For more information about the role of occupational therapy intervention for individuals who have had a stroke, please visit <http://www.aota.org/Consumers/Tips/Adults/Stroke.aspx>.

Authors: Along with Wolf, study authors from the Washington University School of Medicine were Carolyn Baum, PhD, OTR/L, FAOTA, a professor of occupational therapy and neurology, Elias Michael director of program in occupational therapy and principal investigator for the Cognitive Rehabilitation

Research Group; and Lisa Tabor Connor, PhD, assistant professor of occupational therapy, radiology and neurology and clinical core principal investigator for the Cognitive Rehabilitation Research Group.

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Founded in 1917, the **American Occupational Therapy Association** (AOTA) represents the professional interests and concerns of more than 140,000 occupational therapists, assistants and students nationwide. The Association educates the public and advances the profession of occupational therapy by providing resources, setting standards including accreditation and serving as an advocate to improve health care. Based in Bethesda, Md., AOTA's major programs and activities are directed toward promoting the professional development of its members and assuring consumer access to quality services so patients can maximize their individual potential. For more information, go to www.aota.org.