

Neuro Rehab Results Newsletter

May 2017

Volume 7, Issue 2

Contents

Page 1: New exercise class: ActivEx
Page 2: Client profile – Rodney Richmond
Page 3: Therapy profile – SLT
Page 4: Client profile – Jo Scott
Page 5: Book review

ActivEx

We are excited to announce that we have added another exercise class to the ones that we currently run. **ActivEx** includes all over strengthening, fitness and flexibility exercises. Compared to the other classes, more exercise is done in sitting, longer time is spent at each station and some activities are done together as a group.

Amy Boreham runs ActivEx on Tuesdays 11am-12pm. This first block of 6 classes started at the beginning of May and will finish on June 6th. The 6-week block costs \$80.



If you are interested in ActivEx (or Move! or Balance-Fit), then please contact Sue (480 6464) to arrange a free screening where you can discuss with a therapist which class would best suit your needs.

Living Well Toolkit

We are beginning to use the Living Well Toolkit at Neuro Rehab Results to help us better understand you and your needs, what you want to achieve and how we can best assist you to do so. The toolkit is designed to be used by you to help you think about what is important to you for your health and wellbeing. If you are interested in using it, one of your therapists will give you a copy and talk about the different ways that you can use it to get the most out of your healthcare.



Group Sessions

We now offer group sessions every day of the week.

Monday 1pm-3pm	Arm Clinic
Tuesday 11am-12pm	ActivEx
Wednesday 11am-12pm	Move!
Thursday 1pm-3pm	Arm Clinic
Friday 11am-12pm	Balance-Fit

More information on the classes is on our website <http://neurorehab.co.nz/therapy/> or contact us to talk about which classes might work for you.

Client Profile: Rod Richmond

Can you tell us a little bit about yourself:

I was in the NZ Air Force for 13 years and then worked as a head chef in a variety of restaurants around the world. My partner and I ran a motel in Paihia and I started working as a chef at the Copthorne in Paihia. We had a lifestyle change and moved to Whakatane, where some of my family lived. After working in a café there I started to drive tour and charter buses around NZ. I moved back to Auckland and became a truck driver.

I underwent surgery on my neck (C5-6) to repair an old injury. During the surgery a blood vessel was cut and I haemorrhaged causing damage to my spinal cord. After further surgery I woke to find I was paralysed from the neck down. I spent 2 months at the Auckland Spinal Rehab Unit, prior to being discharged.

Tell us about some of the things that are happening in your life at the moment:

My life at the moment is mostly intensive rehab, 4 days a week. I catch up a little with family and friends. I enjoy fishing and have tried to fish off the local wharf but find it frustrating that it takes a long time to set up the fishing gear and I have difficulty getting the bait on the hook.

Can you tell us a little bit about what you've been doing with each of the therapists you see.

Shona, my OT, has been encouraging me to have "down time" and looking at fatigue and time management strategies. She has been talking to me about the theory of this. She has also been looking at the way I do things and helping me to more effectively complete tasks.

Suzie, my physio is involved in my physical rehabilitation. As well as physio sessions, I go to Arm Clinic and do a lot of exercise at home as well as practice of everyday activities.

I have put on 20kgs since my injury and my self-worth has declined. Vicky, dietitian, is helping me to look at strategies to lose this weight



Rod with the coat rack he made during Arm Clinic.

What do you like best about rehab?

Seeing improvements and wanting to achieve more.

What have you found helpful to stay focussed on your recovery?

Seeing the amount of change that I've made spurs me on to make more recovery. I also like seeing other people who are also making improvements. I like talking to other clients to hear how they've got on – it makes me more determined.

Anything else you'd like to add?

If someone (therapist) gives you advice, listen. Sometimes the advice you are being given doesn't resonate to how you were prior to your injury.

It is scary having a disability; prior to my injury I could manage everything by myself. A neurological injury changes your life in so many ways, it makes you feel isolated and scared. Being alive has challenges and I feel you need to get on the best you can with what you've got.



Spotlight on Rehab Techniques: Speech Language Therapy (SLT)

Speech Language Therapists work with people who have difficulty with speaking, reading, writing and swallowing. This may be due to damage to the brain, (for example; a stroke, tumour, head injury, spinal injury or progressive disease).

Frequently SLTs work with people who present with:

- Aphasia - language difficulty, affecting how one comprehends and/or expresses wants, needs, ideas and opinions
- Motor speech difficulties including apraxia, dysarthria and dysfluency
- Voice disorders
- Cognitive-communication difficulties - the ability to reason, problem solve, filter out irrelevant information, use appropriate social skills
- Swallowing difficulties

SLTs will complete assessments to support establishing meaningful goals, taking into account you as a whole person and your long term objectives beyond the current rehab setting. Anything that helps you get back to engaging with family, friends, colleagues and your community. Goals may vary from being able to increase the loudness of your voice, to being able to safely eat and drink again. You may wish to be able to participate more actively in conversations with friends or understand more lengthy written documents or texts. We may work on planning and scheduling, increasing insight into your difficulties and working on strategies to overcome these.

What happens in a SLT session?

Often therapy involves educating your family and others regarding strategies that may support your communication and/or swallowing. This may include modifying your communication style, for example; slowing down your rate of speech or having a pen and paper handy. If you know someone who has difficulty with communication, you can ask them what helps. Communicate with them using any mode that works.

If you have any questions regarding communication or swallowing difficulties please do not hesitate to contact Sarah Grotrian: sarah@neurorehab.co.nz.

Eilean Donan R&R

Some of you might have met Judith Herbert. She has just built a luxurious house in Matakana, which is available for rent for short term holiday stays. The house has three double bedrooms and is fully accessible for people who use wheelchairs. You can see photos and booking information on the website www.eileandonan.co.nz



Omaha Beach, near Matakana

Can you help?

Every year in May, AUT University looks for volunteers with neurological conditions (stroke, multiple sclerosis, brain injury, Parkinson's disease) for their third-year physiotherapy students. Volunteers would come to AUT on Akoranga Drive, Northcote at arranged times for **two sessions** over two weeks:

First session: students will practice an assessment, which involves talking with you and then doing some physical tests.

Second session: students will practice a treatment session based on the assessment they carried out the week before.

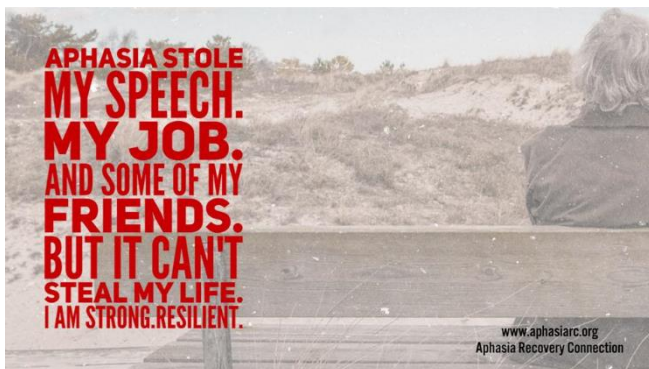
Each session takes **one hour** and will be conducted under the supervision of a registered physiotherapy AUT staff member. We will cover your transport costs and give you a small koha/gift to thank you for volunteering your time to help students learn.

If you are interested in having your name on a list to be contacted closer to next May OR require further information, please contact Todd Stretton: 09 921 9999 extension 7639 or todd.stretton@aut.ac.nz

Client Profile: Jo Scott

Can you tell us a little bit about yourself:

I was a haematologist, about to do a fellowship in Ireland, to become a Consultant. I had a brain haemorrhage, AVM, on 5th July 2013, I was 32. My son Connor was one year old. One side paralysed, my right side. I understand everything, I can read. Speaking is hard, I have aphasia and apraxia.



Tell us some of the things that are happening in your life at the moment:

- Pilates twice a week - "Nicola is amazing"
- University -SLT clinic 1x per week , work with the students
- Work one day at the lab
- Driving - I am now driving. Could not drive for 1 year because I had epilepsy. The pedals are on the opposite side and the steering wheel has been adapted. I take medication to manage the seizures; "take all the time" ie. for the rest of my life.
- Take Connor swimming, to the zoo, Motat and the movies
- Going to Book Club

What have you been doing in therapy?

Therapy "is hard". Finding words used to be hard, it's "getting better".

SLT - therapy has focussed on being able to articulate speech sounds, words, phrases, and reading aloud books for Connor. Writing words, putting sentences together, emails and texts.

What helps?

- The use of my mobile phone, apps and photos.
- Facebook to connect with friends and other young people who have had a stroke.
- Using a pen and paper to write words down/draw.

What motivates you to keep working on your rehabilitation?

Being positive - "the glass half full" and my future ahead.



Jo, Connor and Leon.



Book Review: Reinventing Emma

By Emma Gee

Emma is a 24 year old Australian occupational therapist working in Neurology and enjoying travelling and running. In 2005, after experiencing left-side weakness, she is diagnosed with an arteriovenous malformation (or AVM), a knot of blood vessels in her brainstem. After consultation with neurosurgeons Emma decides to have the AVM removed surgically however she has a haemorrhagic stroke during surgery. She is placed in an induced coma and a week later becomes aware of the catastrophic effects of the stroke.

"I had trouble swallowing and needed tubes shoved inside my throat to help me (dysphagia); people couldn't understand me (dysarthria); I wobbled like jelly (ataxia); I couldn't point directly at anything and approached any object in a zigzag fashion (dystonia); my world was angled (vertigo); I couldn't control my bowels and needed a catheter to wee (double incontinence); I now saw two of every image – and trust me, seeing one bed pan was enough! – (diplopia); my world now spun (nystagmus). My left hand clawed in like a scared turtle hiding in its shell (left-side paralysis); my mouth permanently drooped to the right, my eye wouldn't close and I drooled (right-side facial paralysis.) But wait, there was more. They were predicting that my balance and mobility would also be an issue when I got out of bed as the bleed was in my cerebellum, the control centre for balance."

Emma participated in 6 months of inpatient rehabilitation, then moved back in with her parents before moving to her own unit. She continues with her physical rehabilitation today, and says the past decade has been tough, and her grief and anger are ongoing but she always tries to find the positives. As well as writing this book Emma has developed her own inspirational speaking business.

Emma's writing is open and honest, and will likely make you both laugh and cry. She writes from a unique perspective as both an occupational therapist and stroke survivor. She describes the challenges,

frustrations and repetitiveness of her rehab and offers positive reflections regarding what has helped her to develop her "new normal." She writes of times of despair and humour during her rehab and includes reflections from her family. Emma particularly reinforces the importance of developing and facilitating resilience during rehabilitation. I highly recommend this book as a thought provoking read for anyone involved in neurorehabilitation as a client, family member, friend or health professional. Available via the website: emma-gee.com/the-book/, as a kindle e-book from Amazon or most online book retailers. It is also available from Auckland public libraries.

Book review thanks to Shona MacKay, our OT.

LSVT BIG

We are pleased to announce that we can now offer LSVT BIG as one of the treatment programmes available at Neuro Rehab Results. Samantha Henry, one of our physiotherapists, has recently completed her training to be able to provide this.

LSVT BIG is a research based exercise approach treatment for Parkinson's Disease. The kinds of improvements people make are:

- Faster walking with bigger steps
- Improved balance
- Increased trunk rotation

LSVT BIG treatment:

- Trains bigger movements
- Is intensive
- Requires high-effort practice
- Aims to translate bigger movements into real-world, everyday activities.

LSVT BIG is a standardised treatment package and consists of:

- 16 one hour sessions: 4 consecutive days a week for 4 weeks
- Daily homework practice
- Daily carryover exercises

The treatment is designed to establish a life-long habit of BIG practice, empowering people with Parkinson's Disease with their potential to improve! Contact Sue if you would like to book in for some sessions.