

THE INFLUENCE OF AGE ON FUNCTIONAL OUTCOME AFTER STROKE REHABILITATION

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Introduction: The incidence of stroke continues to increase and it is one of the main causes of morbimortality, especially in the elderly. Rehabilitation aims to improve deficits, functionality and social integration.

Purpose: Our purpose is to determine the impact of age on functional outcome after a stroke, in order to understand if age should be considered a limiting factor for access to rehabilitation.

Method: We retrospectively reviewed medical records of 154 patients admitted at our Rehabilitation Center with the diagnosis of stroke between 1/6/2014 and 31/12/2016. They were divided into 2 groups: "elderly" (>65 years) and "non-elderly" (<65 years). Variables analyzed were: gender, age, length of hospital stay (LOS), post-discharge destination and functional independence measure (FIM) on admission and discharge.

Results: 54 patients were classified as elderly, 29 of which were male. In this group, the mean age was 72.1 ± 6.45 years and the mean LOS was 109.2 ± 59.5 days (vs 106.5 ± 59.5 days on the "non-elderly" group). 86.4% of these patients were discharged home. Elderly patients presented lower FIM scores at admission (75.5 vs 83.1 "non-elderly", $p=0.005$) and at discharge (88.95 vs 99.17 "non-elderly", $p=0.005$). Differences in FIM gain (FIM at discharge–FIM at admission) were also found between the two groups (13.4 "elderly" vs. 16.7 "non-elderly"), although not statistically significant.