




20th National Conference on Neurological Rehabilitation
Workshop
 Stroke, Rehabilitation and Quality of Life

L'attività fisica adattata per la prevenzione e promozione della salute: il modello "Empoli" e il suo impatto in Regione Toscana


Dr. Francesco Benvenuti
 Dipartimento delle Fragilità
 AUSL11, Empoli

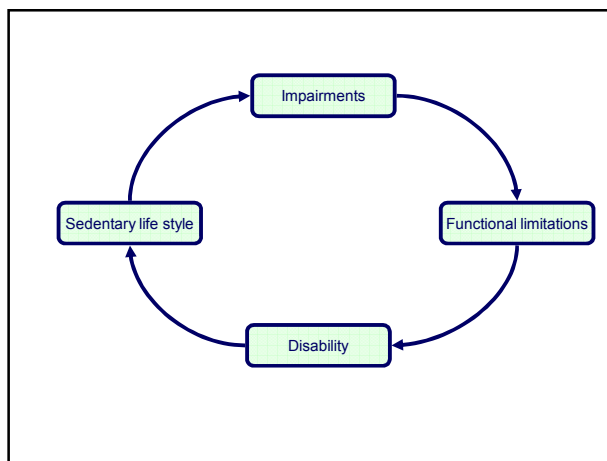
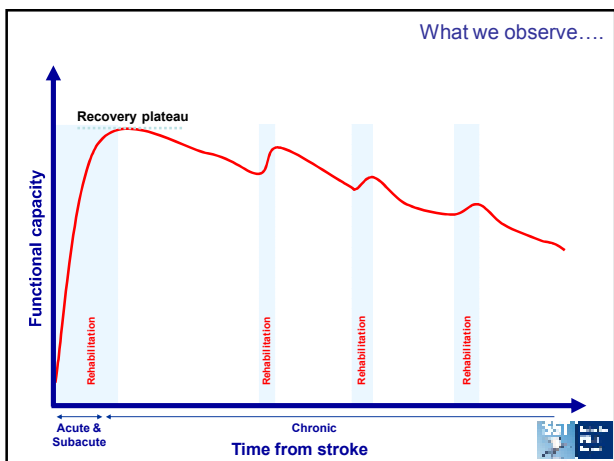


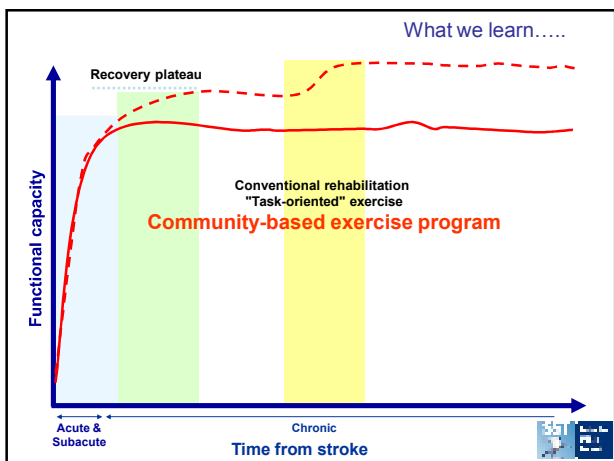
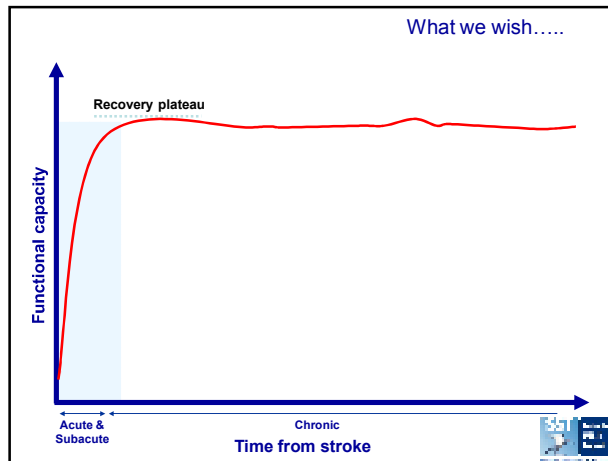
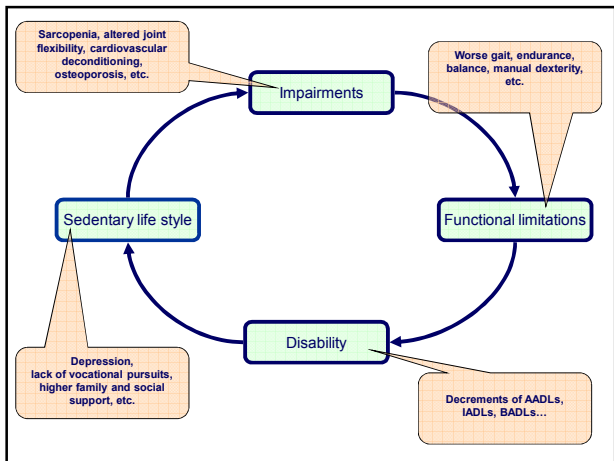


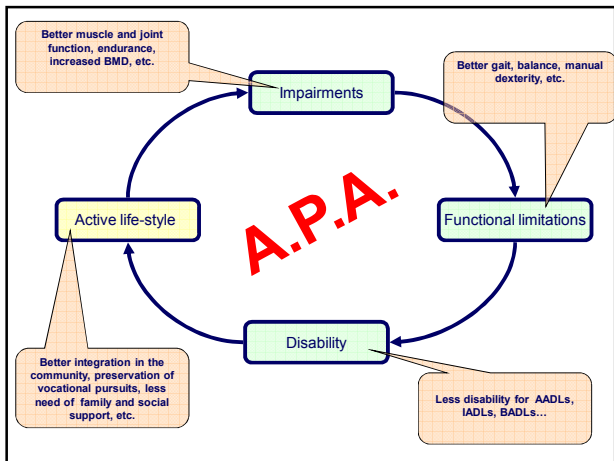
Stroke Epidemiology

- Incidence: 220/100000
- Survival:
 - 1 year: 80%
 - 3 years: 50%
 - 10 years: >35%
- Prevalence: 600-800/100000
- Moderately disabled: 45-65%









Effectiveness and safety
 Community implementation
 Continuity with rehabilitation
 Participants' satisfaction & adherence
 Integration with other AUSL11 Activities

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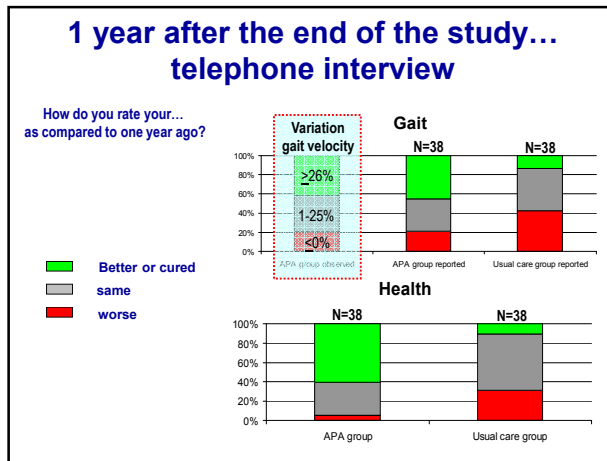
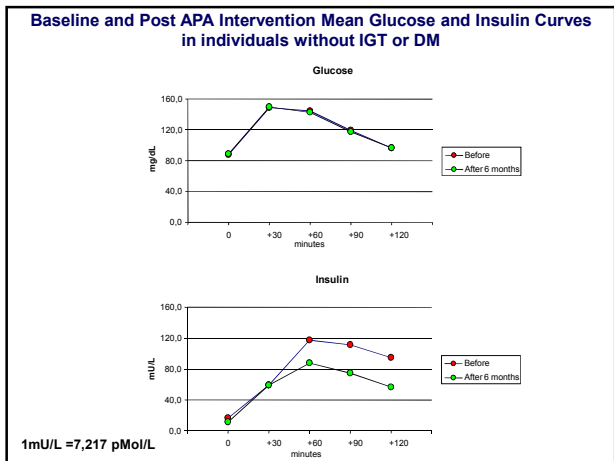
Dipartimento della Riabilitazione, AUSL 11
 UO di Recupero e Riabilitazione Funzionale, AUSL5, Pisa
 UO di Riabilitazione, Casa di Cura Giocini-Ulivella, IFCA, Firenze

In collaborazione con
 Dipartimento di Neuroscienze, Fondazione Santa Lucia, IRCCS Roma.
 Dipartimento Tecnologie e Salute, Istituto Superiore di Sanità, Roma.
 Geriatric Research Education and Clinical Center, Veteran Affairs Medical Center, Baltimore, MD, USA
 Division of Gerontology, University of Maryland School of Medicine, Baltimore, MD, USA
 Physical Disabilities Branch, National Institutes of Health, Bethesda, MD, USA

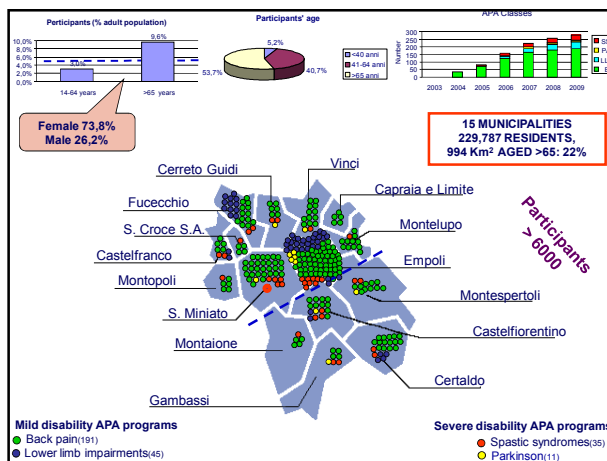
EFFICACIA DI STRATEGIE DI INTERVENTO BASATE SULLA ATTIVITA' FISICA IN SOGGETTI CON ESITI CRONICI DI ICTUS CEREBRALE

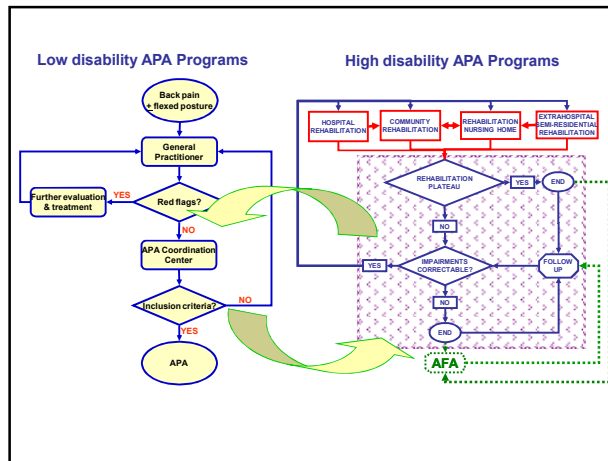
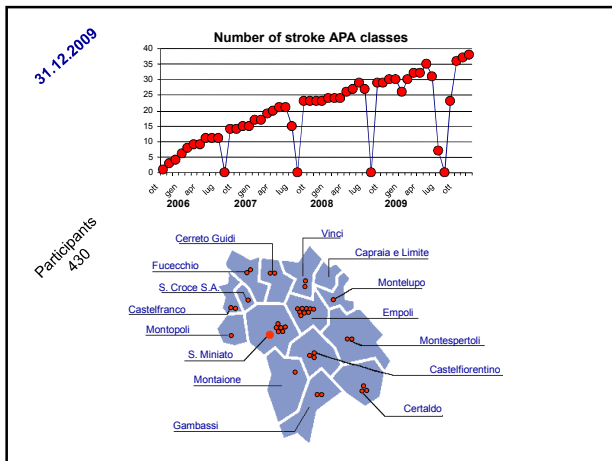
Project funded by the Istituto Superiore di Sanità
 within the project:
 "Obtaining Optimal Functional Recovery and Efficient Managed Care for the Chronic Stroke Population"
 (convenzione N. 530/F20/2)

within the framework of the 2003
 Memorandum of Understanding between
 U.S.A. Department of Health and Human Services & Italy's Ministry of Health.



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REGIONE TOSCANA
GIUNTA REGIONALE

ESTRATTO DAL VERBALE DELLA SEDUTA DEL 03/06/2009 (avviso N. 33)

Delibera: 17/2009 del 03/06/2009

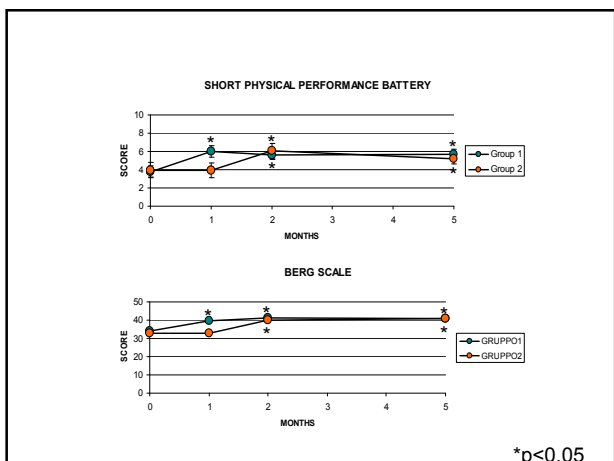
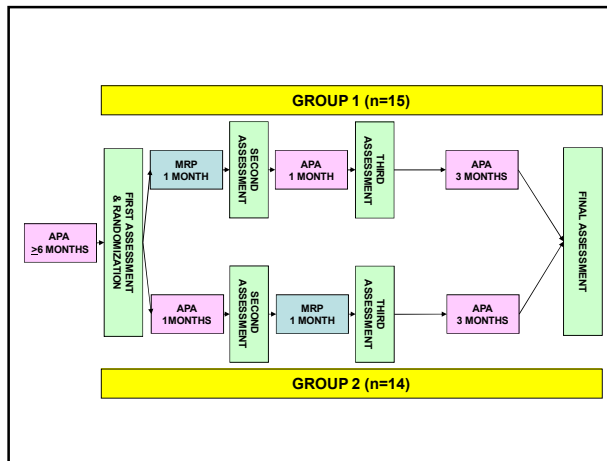
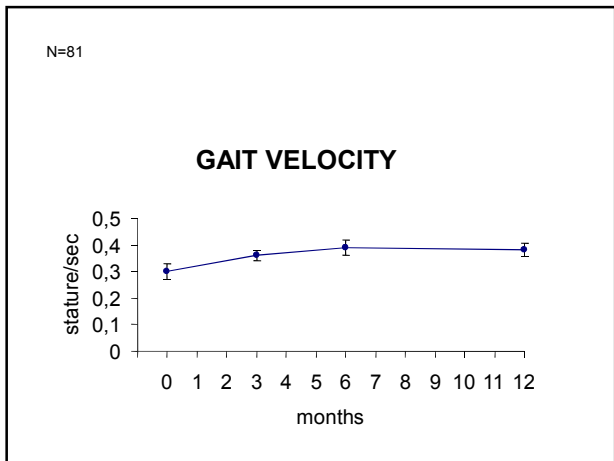
Propositore: ENRICO BORGHI

APA PROGRAMS ARE FUNCTION-ORIENTED NOT DISEASE ORIENTED; APA PROGRAMS AND COORDINATION FOR "HIGH" AND "LOW" DISABILITY

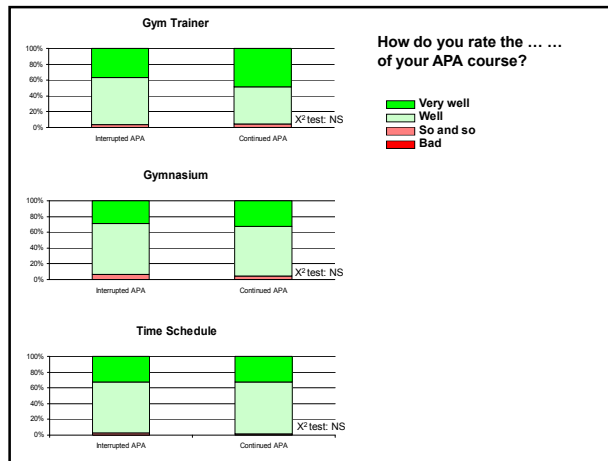
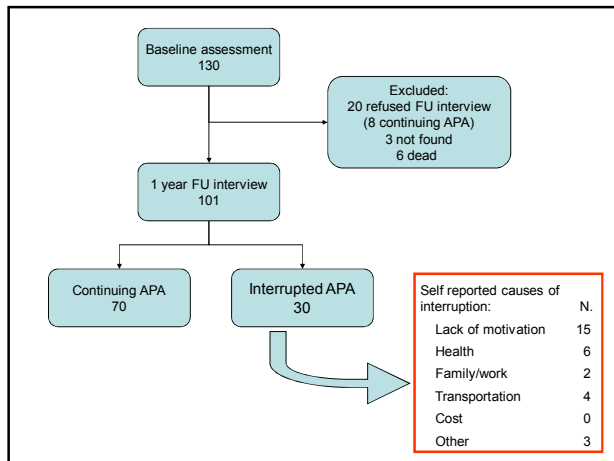
Amministratore: Giulio Sestini

Agente: Azienda Istituzionale (A.I.S.) - Associazione "Toscana" di medici e laureati in medicina di Area 11 Regione Toscana, Organizzazioni sindacali confederali, sindacati dei pensionati dell'area numero 11 e Enti di promozione sportiva

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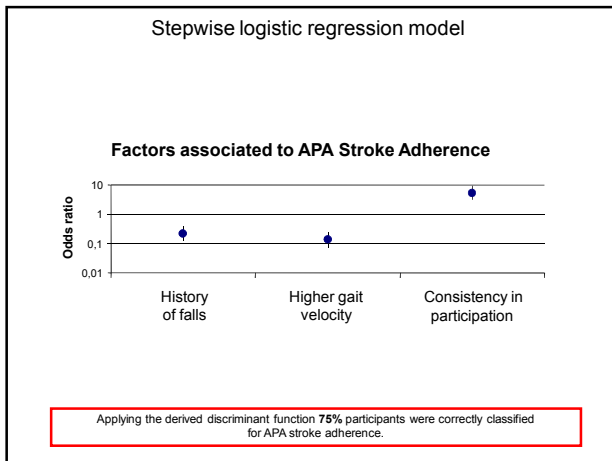


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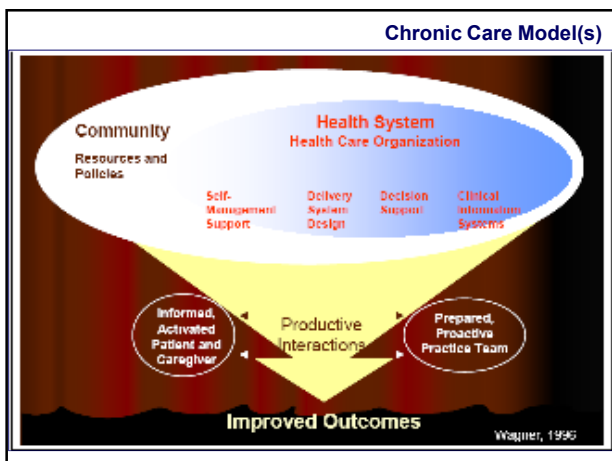


- ### Predictors of Adherence to APA Stroke (Independent factors)
- #### Crude analysis
- General characteristics**
 - Age
 - Gender
 - Education
 - Family & social support**
 - Spouse/relatives help
 - Barriers
 - Caregiver Stress Index
 - Comorbidity**
 - Drugs (number)
 - Diabetes
 - CIRS severity index
 - CIRS comorbidity index
 - Obesity (BMI)
 - Cognition (MMSE)
 - Depression (Hamilton Depression scale)
 - Stroke characteristics**
 - Time from stroke
 - Side
 - Associated cerebellar signs
 - Associated extrapyramidal signs
 - Functional limitations and disability**
 - History of falls
 - Gait velocity (6MWT)
 - Balance (Berg scale)
 - Short Physical Performance Battery
 - Barthel Index
 - Gym accessibility**
 - Home-gymnasium distance
 - Transportation
 - Regular participation
 - Quality perception of the APA program**
 - Trainers
 - Gymnasiums
 - Time schedule

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Fare la spesa...e guadagnare salute

APA
 Attivazione del servizio di trasporto per frequentare i corsi APA

SALUTE in MOVIMENTO
 L'INFORMATORE

Punti della salute

Società della Salute Valdarno Inferiore
 Castelluccio di Stabia, Montepoli in Val d'Arno, Santa Croce sull'Arno, San Miniato

HOME CHI SIAMO ATTO COSTITUTIVO NORMATIVA

PROFILO DI SALUTE News

Attivato il servizio di trasporto per frequentare i corsi APA

4 euro il biglietto andata e ritorno grazie alle associazioni di volontariato

Le associazioni di volontariato del Valdarno Inferiore hanno stipulato un accordo con la

Conclusions

APA stroke:

- Safe, effective and well accepted
- Implementable in a CCM for chronic stroke survivors
- May have positive interaction with rehabilitation programs
- Actions may be taken to improve participants' adherence