INTRODUCTION

Disuse syndrome is a disorder that is most often associated with acute or chronic disease complications. Despite disuse syndrome may affect all organs and systems, the impact of range of motion limitations caused by immobility on functional capacity to perform activities of daily living is often very severe. Mobilization and active exercise programs may benefit immobile patients and counteract the impact of immobility on the body.

OBJECTIVE

This study aims to assess the effect of a mobilization and active exercise program on the range of motion of bedridden patients with disuse syndrome.

METHOD

A quasi-experimental study was developed. The sample consisted of 26 persons that had been bedridden for more than six months at home. A mobilization and active exercise program was designed, fitting patient individual needs and implemented 2 times/week for 2 months. Caregivers who trained to transfer the patient from bed to chair and to repeat active exercise every day. Data collection was performed before and after intervention, using the Barthel Index and a goniometer for range of motion evaluation.

RESULTS

26 participants, aged 77.19 ± 11.67 and bedridden for 18 months (18.73 ± 15.25) were enrolled, but only 24 completed the intervention program. There was a minimal difference in the sex distribution with 7.6% more women than men. Results showed a statistically significant increase in range of motion of the shoulder, elbow, wrist, hip, and knee. There was statistical significance in plantar flexion but not on the dorsiflexion. Barthel Index score has increased significantly (26.65±21.28 vs 31.46±23.25; p=0.003) after the mobilization and active exercise program.

CONCLUSION

A mobilization and active exercise program implemented regularly may contribute to improve range of motion of bedridden with disuse syndrome. Thus, based on these results, it is believed that the intervention of rehabilitation nurse was an added value, contributing to an increase in range of motion and independence of patients.

REFERENCES


