

Occupational Therapy Current Awareness Bulletin

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Title: Addressing Sex in Occupational Therapy: A Coconstructed Autoethnography.

Citation: American Journal of Occupational Therapy; May 2018; vol. 72 (no. 3); p. 1-6

Author(s): Rose, Natalie; Hughes, Claire

Abstract: Occupational therapy practitioners generally agree that sex is a meaningful occupation and should be part of the rehabilitation process; however, there has been reluctance to include clients' sexual concerns in practice. To explore how occupational therapy is addressing clients' sexual concerns, we (one author with a professional background in occupational therapy and the other who is a consumer of occupational therapy services) used a coconstructed autoethnographic approach that involved shared reflection between us. We discuss insights discovered through the coconstructed process, including the potential health risks involved in sexual activity, the importance of sexuality as a core aspect of identity, the ways that rehabilitation currently excludes sexuality, and the potential role of occupational therapy in addressing sexuality.

Title: Client-centred practice from the perspective of Danish patients with hand-related disorders.

Citation: Disability & Rehabilitation; Jun 2018; vol. 40 (no. 13); p. 1542-1552

Author(s): Hansen, Alice Ørts; Kristensen, Hanne Kaae; Cederlund, Ragnhild; Lauridsen, Henrik Hein; Tromborg, Hans

Abstract: Purpose: The objectives of this study were to investigate perceptions of client-centred practice among Danish patients with hand-related disorders engaged in rehabilitation at outpatient clinics, and to decide on domains to serve as a conceptual foundation for item generation in the development of a new, standardized questionnaire to evaluate the experience of client-centredness among patients with hand-related disorders. Method: Focus group interviews were held with 25 patients with hand-related disorders from six outpatient hand clinics in Denmark. Deductive content analysis was used to decide on domains for item generation. Results: Patients found that information was paramount in understanding their situation and to feel empowered and motivated. They attached importance to participation in decision making so that rehabilitation was considered meaningful. Moreover, they thought rehabilitation should be individualized by taking their life situations and personalities into account. Six domains were found to be central to client-centred practice: patient participation in decision making, client-centred education, evaluation of outcomes from patient's perspective, emotional support, cooperation and coordination, and enabling occupation. Conclusions: The domains can be used in the further development of a Danish questionnaire to evaluate the experiences of client-centredness among patients engaged in rehabilitation at outpatient clinics for hand-related disorders. Implications for rehabilitation: Patients with hand-related disorders wish for rehabilitation to be tailored to individual needs. The patient's life situation and personality, including coping ability, are important factors to consider in rehabilitation planning, interventions, and evaluations. Patients with hand-related disorders attach importance to information and require health professionals' support to manage their activities of everyday life. Patients with hand-related disorders ask for participation and shared decision making in rehabilitation planning.

Title: Differences in level of upper limb loss on functional impairment, psychological well-being, and substance use

Citation: Rehabilitation Psychology; Feb 2018; vol. 63 (no. 1); p. 141-147

Author(s): Kearns, Nathan T.; Jackson, Warren T.; Elliott, Timothy R.; Ryan, Tiffany; Armstrong, Trey W.

Purpose/Objective: The present study examines associations between levels of limb loss (partial hand vs .higher levels of limb loss) and eight clinically relevant measures of functional impairment, psychological well-being, and substance use.

Research Method/Design: A cross-sectional, multisite study conducted at seven prosthetic rehabilitation centers across the United States. A total of 305 participants with upper limb loss (Mage = 44.28, SD = 15.45; 68.5% male; 70.5% white) completed orally administered self-assessments of pain interference, perceived activity restrictions, posttraumatic stress disorder (PTSD), depression, emotional reaction to their physical condition, problematic alcohol use, prescription medication overuse, and illicit drug use.

Results: Results showed individuals with partial hand loss were at significantly greater odds of endorsing pain interference and screening positive for PTSD. Results also showed level of limb loss was significantly associated with emotional reaction to their physical condition, such that participants with partial hand loss scored significantly above those with higher level limb loss.

Conclusions/Implication: The current study highlights level of limb loss as an important correlate of several functional impairments and psychological measures among individuals with upper limb loss. These findings may inform clinicians and occupational therapists in their development of treatment and rehabilitation. In particular, practitioners should be cognizant of their patient's level of limb loss, as individuals with partial hand loss may be more susceptible to greater emotional reactions to their physical condition and increased psychological distress due to pain interfering with their work and elevated posttraumatic stress symptoms. (PsycINFO Database Record (c) 2018

APA, all rights reserved) (Source: journal abstract) Impact statementImpact and Implications—Extant work indicates that perceptions of disability may vary by level of upper limb loss. The current study extended this work by examining association between level of loss and a host of clinically relevant functional impairment, psychological well-being, and substance use outcomes. These preliminary findings highlight level of limb loss as an important variable in understanding several psychological constructs that may impact recovery and rehabilitation following loss. The current study supports and extends past work showing elevations in perceiving disability among individuals with partial hand injuries. More specifically, results found that individuals with partial hand loss were more likely to endorse pain interference with daily life, screen positive for PTSD, and report greater emotional reaction to their condition than those with higher levels of loss. Overall, these findings suggest that clinicians and occupational therapists should be more cognizant of potential psychological differences associated with their patients' level of limb loss. More specifically, individuals with partial hand loss may be more susceptible to greater emotional reactions to their loss and increased psychological distress due to the perception of pain interfering with their work and elevated posttraumatic stress. These factors should be considered in the development and throughout implementation of treatment and rehabilitation. (PsycINFO Database Record (c) 2018 APA, all rights reserved).

Title: Effect of Community-Based Occupational Therapy on Health-Related Quality of Life and Engagement in Meaningful Activities of Women with Breast Cancer.

Citation: Occupational Therapy International; Apr 2018 ; p. 1-13

Author(s): Petruskeviciene, Daiva; Surmaitiene, Deive; Baltaduoniene, Daiva; Lendraitiene, Egle

Abstract: We aimed to evaluate the short-term effects of community-based occupational therapy on health-related quality of life and engagement in meaningful activities among women with breast cancer. An open label randomized controlled trial study design was applied. The participants were members of various societies of women with cancer. In total, 22 women have participated in the study. Participants of the experimental group (n=11)

participated in a 6-week community-based occupational therapy program and the usual activities of various societies, whereas the control group (n=11) women participated in the usual activities of the societies only. 1 of the participants withdrew during the course; therefore 21 completed the study successfully. Participants of both groups were assessed for health-related quality of life and the participants of the experimental group were assessed for engagement in meaningful activities. The evaluation was carried out during the nonacute period of the disease—at the beginning of the study and after 6 weeks. Women of the experimental group demonstrated statistically significantly better scores in the global quality of life, role functions, physical, emotional, cognitive, and social functions, fatigue, insomnia, financial impact, systemic therapy side effects, and breast symptoms scales compared to the control group participants ($p<0.05$) after the 6 weeks, as measured by the EORTC QLQ-C30 questionnaire and its breast cancer module QLQ-BR23. Furthermore, women of the experimental group demonstrated significant greater engagement in meaningful activities when applying community-based occupational therapy ($p<0.05$), as measured by using the Engagement in Meaningful Activities Survey (EMAS). The evaluation of the associations between the women's engagement in meaningful activities and changes in health-related quality of life showed that greater engagement in meaningful activities was associated with better emotional functions and a lower level of insomnia ($p<0.05$). Based on the results of our study, we recommend applying occupational therapy in the field of community healthcare in order to maintain or improve breast cancer patients' health-related quality of life and suggest involving women into meaningful activities during community-based occupational therapy after clarifying which activities are important to them.

Title: Embracing career transitions: A tool to help occupational therapists recognize, prepare for, and adapt to change.

Citation: Occupational Therapy Now; Mar 2018; vol. 20 (no. 2); p. 7-8

Author(s): Clark, Mary

Title: Exploring the perceived usefulness of practical food groups in day treatment for individuals with eating disorders.

Citation: Australian Occupational Therapy Journal; Apr 2018; vol. 65 (no. 2); p. 98-106

Author(s): Biddiscombe, Rachel J.; Scanlan, Justin Newton; Ross, Jessica; Horsfield, Sarah; Aradas, Jessica; Hart, Susan

Background/aim: Recovery from eating disorders is a challenging process. Emerging literature suggests that occupational therapists may provide a useful contribution in delivering purposeful eating-related interventions as a potential treatment to support sustained cognitive and behavioural changes for individuals with eating disorders. This study aimed to evaluate participants' perceptions of the contribution of occupational therapy practical food groups (food based outings and cooking groups) in supporting their functional recovery.

Methods: Individuals attended practical food groups as part of standard treatment at an outpatient eating disorders day program. Ninety-nine participants completed questionnaires at discharge and up to three follow-up points (6, 12 and 24 months). Questions related to practical food groups were analysed, exploring participants' experiences and perceived usefulness of groups using rating-scale and open-ended questions. Open-ended responses were analysed using thematic analysis. Descriptive statistics were calculated for responses to rating-scale questions.

Results: At discharge, participants rated the importance and usefulness of practical food groups as high (4.73 and 4.43 on 5-point scales, respectively), but tended to rate their

enjoyment of the groups lower (3.50 on a 5-point scale). Some skill transfer was typically reported by participants at discharge (3.92 on a 5-point scale). One core theme, 'success through participation', emerged from qualitative comments. Six subthemes were also identified: helpful components of practical food groups; perceived benefit of exposure; impact of applying cognitive and behavioural skills; challenges affecting participation; facilitating adaptation; and influence of eating disorders on challenging feared foods.

Conclusion: This study highlights that participation in practical food groups was perceived as useful in assisting individuals to improve eating behaviours and, in some circumstances, transfer these skills into their lives outside of day program. Results suggest that occupational therapists may have an important contribution in delivering these interventions to support recovery and facilitate application of adaptive coping strategies.

Title: Implementing evidence-based practice: A context analysis to examine use of task-based approaches to upper-limb rehabilitation.

Citation: British Journal of Occupational Therapy; May 2018; vol. 81 (no. 5); p. 285-289

Author(s): Radomski, Mary Vining; Anheluk, Mattie; Arulanantham, Christine; Finkelstein, Marsha; Flinn, Nancy

Abstract: Statement of context: Many occupational therapists experience challenges in implementing evidence-based practice, which may be best approached as a context-specific enterprise. Critical reflection on practice: This practice analysis article reports the results of analyzing 24 home programs that occupational therapists issued to rehabilitation inpatients with stroke upon their discharge home. Home programs did not reflect a task-based approach to upper-limb recovery, even though this is supported by established evidence. Examination of contextual factors provides a framework to facilitate evidence implementation. Implications for practice: Occupational therapists may optimize evidence-based practice implementation by first evaluating and addressing practice-specific contextual factors.

Title: Living safely at home begins with a plan!

Citation: Occupational Therapy Now; Mar 2018; vol. 20 (no. 2); p. 20-21

Author(s): Shaw, Lynn; Moody, Elaine; Swan, Ron; MacDonald, Ian; Donovan, Sherry

Title: Measuring functional ability in hospitalized older adults: a validation study.

Citation: Disability & Rehabilitation; Aug 2018; vol. 40 (no. 16); p. 1972-1978

Author(s): Wales, Kylie; Lannin, Natasha A.; Clemson, Lindy; Cameron, Ian D.

Purpose: To examine the internal consistency, construct validity and responsiveness of functional assessments tools when used with hospitalized older adults.

Materials and methods: The functional ability of 66 patients was assessed using a semi-structured interview scale (n = 16 tools). The assessment of motor and process skills was administered during hospital admission and again at three months post-discharge.

Results: Tools showed poor-to-excellent internal consistency ($\alpha = 0.27-0.92$). Of the tools that were internally consistent, only two demonstrated change: the Groningen activity restriction scale (GARS) (smallest detectable change [SDC] 11.68, effect size -1.59) and the modified reintegration to normal living scale (SDC 7.04, effect size -1.20). Validity was supported by strong correlations between the functional independence measure™ (FIM™) and the GARS, FIM™ and Sunnaas activity daily living (ADL) index.

Conclusions: Findings suggest that the GARS and the modified reintegration to normal living index (mRNLI) are internally consistent, valid and responsive to change over time when applied to a sample of hospitalized older adults. Further investigation of these tools in

terms of inters and intra rater reliability in clinical practice is warranted. Implications for Rehabilitation: Therapists and researchers need to choose standardized functional assessments carefully when working with hospitalized older adults, as not all assessments are reliable and valid in this population. The GARS and mRNLI are valid and responsive functional assessments for hospitalized older adults. Activity and participation have been viewed traditionally as only one component of function. Therapists and researchers can use standardized assessments of function that are activity or participation-based.

Title: Mirror Therapy and Task-Oriented Training for People With a Paretic Upper Extremity

Citation: The American journal of occupational therapy : official publication of the American Occupational Therapy Association; Mar 2018; vol. 72 (no. 2)

Author(s): Bondoc S.; Booth J.; Budde G.; Caruso K.; DeSousa M.; Earl B.; Hammerton K.; Humphreys J.

Objective: This study investigates the effect of mirror therapy and task-oriented training on the paretic upper extremity function and occupational performance of people with stroke.

Method: This study used a repeated-measures, case-series design in which 4 participants completed a 4-wk intervention consisting of mirror therapy and task-specific training. The intervention was conducted 2x/wk in the clinic and 4x/wk at home.

Results: All participants displayed clinically meaningful improvements in self-identified goals at the end of the intervention and at follow-up. Three participants showed clinically meaningful changes in motor function. Although only 1 participant improved in his reported amount of use, all participants showed clinically meaningful improvements in perceived movement quality at varying points of assessment.

Conclusion: Mirror therapy, when used as priming for task-oriented training, can produce clinical improvements in upper extremity function and occupational performance in people with hemiparesis. Copyright © 2018 by the American Occupational Therapy Association, Inc.

Title: Occupational therapy for complex inpatients with stroke: identification of occupational needs in post-acute rehabilitation setting.

Citation: Disability & Rehabilitation; May 2018; vol. 40 (no. 9); p. 1026-1032

Author(s): Schiavi, Margherita; Costi, Stefania; Pellegrini, Martina; Formisano, Debora; Borghi, Sergio; Fugazzaro, Stefania

Purpose: Inpatients admitted to rehabilitation express needs not linked to disease causing hospitalization. This observational cross-sectional study identifies features and occupational needs of complex inpatients during rehabilitation, focusing on function and ability, regardless of diagnosis.

Method: This study included sixteen adult inpatients with stroke, deemed complex according to Rehabilitation Complexity Scale-Extended, at admission to Rehabilitation ward (from July 2014 to February 2015). Patients with primary psychiatric disorders, language barriers, cognitive or severe communication deficits were excluded. Upon admission, a multidisciplinary team collected data on general health, independence in daily activities (Modified Barthel Index), fatigue (Fatigue Severity Scale), resistance to sitting and ability to perform instrumental activities (Instrumental Activities of Daily Living). The occupational therapist identified occupational needs according to Canadian Occupational Performance Measure.

Results: Inpatients enrolled in this study were dependent in basic ADL, limited in instrumental ADL and easily fatigable. Their occupational needs related to self-care (75%) and, to a lesser extent, productivity (15%) and leisure (10%). According to inpatients,

rehabilitation process should firstly address self-care needs, followed by productivity and leisure problems.

Conclusions: Despite small sample size, this study described patterns of occupational needs in complex inpatients with stroke. These results will be implemented in client-centered rehabilitation programs to be tested in a phase-two trial.

Title: Occupational therapy's role in maximizing quality of life in bone marrow transplant

Citation Biology of Blood and Marrow Transplantation; Mar 2018; vol. 24 (no. 3)

Author(s): Morikawa S.; Amanat Y.

Abstract: Currently, an estimated 1,290,773 people in the United States are living with or in remission from general blood cancers; a number that has increased by more than 50,000 individuals since last year. Furthermore, an estimated 172,910 people in the United States are expected to be diagnosed with leukemia, lymphoma, or myeloma in 2017 (Leukemia & Lymphoma Society, 2017). As bone marrow transplantation (BMT) is a progressive treatment option for blood-related cancers, side effects lead to challenges across multiple functional domains. These side effects may include difficulty with: endurance, sleep hygiene, exercise and activity engagement, self-concept, psychosocial adjustment, and well-being (Bevans et al., 2008; Bieri et al., 2008; Rischer et al., 2009). It is imperative to assess and address quality of life and psychosocial effects amongst those undergoing transplant. Occupational therapy practitioners are uniquely skilled to address symptom distress, activity engagement, adaptation to the environment, and other issues affecting life satisfaction during one's inpatient stay in the hospital (Christiansen & Matsuka, 2006). Occupation is defined to include all the activities that people do to occupy themselves, including looking after themselves and enjoying life (Townsend & Polatakjo, 2013). Consistent with literature, participation in meaningful occupations promotes occupational performance and contributes to good health and well-being (Hocking, 2009). Evidence based practice within occupational therapy supports providing treatment, including the following areas: modification of daily routines, incorporation of new coping strategies for healthful stress management and sleep hygiene, medication management and tracking symptomatology, fatigue management, and self-management of one's overall quality of life (Bevans et al., 2008; Christiansen & Matsuka, 2006; Demiralp, 2010; Kangas, Bovbjerg, & Montgomery, 2008; Paul, 2011). This presentation will examine the role of occupational therapists in providing supportive care for individuals undergoing bone marrow transplant. Occupational therapy efforts to maximize quality of life and promote psychosocial well being will be highlighted through a general intervention framework and case examples. Occupational therapy can be effective in enhancing patients' experience, self efficacy, and overall wellbeing throughout their transplant stay in an acute inpatient hospital setting; a process that has been identified to hinder a person's ability to spontaneously engage in activities across their daily routine of life (Paul, 2011). In conclusion, occupational therapy can contribute to the interdisciplinary effort and patient care by maximizing individuals' well being, addressing psychosocial needs, and ultimately enhancing quality of life.

Title: Reasons for readmission to hospital after hip fracture: Implications for occupational therapy.

Citation: British Journal of Occupational Therapy; May 2018; vol. 81 (no. 5); p. 247-254

Author(s): Lockwood, Kylee J.; Harding, Katherine E.; Boyd, Jude N.; Taylor, Nicholas F.

Introduction: The aim of this study was to determine the rate of readmission to hospital after hip fracture. The relationship between readmission to hospital and a range of social

and functional variables, including receiving a home visit by an occupational therapist prior to discharge from hospital, was explored.

Method: A retrospective cohort study was conducted of 154 patients returning to community living following hip fracture. Multivariate logistic regression identified variables associated with risk of readmission to hospital.

Results: One in three patients was readmitted to hospital within 12 months after discharge, with 7% readmitted within 30 days. The most common reason for readmission was another fall. A low level of mobility prior to hip fracture was the strongest independent predictor of risk of readmission to hospital. There was no association between receiving a pre-discharge home visit by an occupational therapist and risk of readmission to hospital.

Conclusion: Rates of readmission to hospital are high after hip fracture, and falls are the single most common reason for readmission. Interventions provided by occupational therapists, including home visits, should emphasise and incorporate evidence-based falls prevention strategies.

Title: Reliability of the Bulb Dynamometer for Assessing Grip Strength.

Citation: Open Journal of Occupational Therapy (OJOT); Apr 2018; vol. 6 (no. 2); p. 1-9

Author(s): Maher, Colleen; Seoyoung Yoon

Abstract: held dynamometry is the most common method of measuring grip strength. The purpose of this study was to determine the inter-rater and test-retest reliability, the reliability of one trial versus three trials, and the preliminary norms for a young adult population using the Baseline® Pneumatic Squeeze Bulb Dynamometer (30 psi). Methods: This study used a one-group methodological design. One hundred and three healthy adults (30 males and 73 females) were recruited. Six measurements were collected for each hand per participant. The data was analyzed using Intraclass Correlation Coefficients (ICC) two-way effects model (2,2) and pairedsamples t-tests. Results: The ICC for inter-rater reliability ranged from 0.955 to 0.977. Conclusion: The results of this study suggest that the bulb dynamometer is a reliable tool to measure grip strength and should be further explored for reliable and valid use in diverse populations and as an alternative to the Jamar dynamometer.

Title: Update in the Treatment of Chronic Pain within Pediatric Patients

Citation: Current Problems in Pediatric and Adolescent Health Care; Jul 2017; vol. 47 (no. 7); p. 167-172

Author(s): Rabin J.; Brown M.; Alexander S.

Abstract: Pediatric chronic pain is a challenging entity to evaluate and treat as it encompasses a wide variety of presentations often with overlapping psychosocial implications. Chronic pain may have significant effects upon a child's involvement in academic, athletic, and social participation. If unrecognized, it may have deleterious effects upon family interactions and stability. The treatment of pediatric chronic pain is focused on not only providing analgesia, but also on assisting the child and family with reintegrating into a more functional lifestyle. Given the complex multifactorial causes of pain, a comprehensive multidisciplinary treatment plan is often the most effective way to achieve remission. This paper will discuss two examples of pediatric pain that have shown the good response to treatment with a multidisciplinary team approach: complex regional pain syndrome (CRPS) and amplified pain due to Ehlers-Danlos syndrome-hypermobility type (EDS-HT). Treatment of these patients often encompasses a multimodal approach that incorporates physical therapy (PT), occupational therapy (OT), medication(s), pain psychology, procedure(s), sleep hygiene, education, and encouragement of overall physiologic wellness. Management principles are to reduce pain and help prevent future occurrences. Copyright © 2017 Mosby, Inc.

Title: Virtually home: Feasibility study and pilot randomised controlled trial of a virtual reality intervention to support patient discharge after stroke.

Citation: British Journal of Occupational Therapy; Apr 2018; vol. 81 (no. 4); p. 196-206

Author(s): Threapleton, Kate; Newberry, Karen; Sutton, Greg; Worthington, Esme; Drummond, Avril

Introduction: Virtual reality has the potential to assist occupational therapists in preparing patients for discharge by facilitating discussions and providing education about relevant practical issues and safety concerns. This study aimed to explore the feasibility of using a virtual reality intervention to support patient discharge after stroke and pilot its use.

Method: Practical aspects of delivering a virtual reality intervention prior to discharge were explored by means of a non-randomised feasibility study and a subsequent pilot randomised controlled trial. Factors considered included eligibility, recruitment, intervention delivery, attrition and suitability of outcome measures. Outcome measures included standardised assessments of stroke severity, mobility, health-related quality of life, functional ability, satisfaction with services and concerns about falling.

Results: Thirty-three participants were recruited in total: 17 to the feasibility study and 16 to the pilot trial. At 1-month follow-up, 14 participants (82%) were re-assessed in the feasibility study and 12 (75%) in the pilot trial. The main difficulties encountered related to recruitment, particularly regarding post-stroke cognitive impairments, the presence of mild deficits or illness.

Conclusion: It was feasible to recruit and retain participants, deliver the intervention and collect outcome measures, despite slow recruitment rates. These findings could inform the design of a definitive trial.

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