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Choosing the Right Physical Therapist for You!

Cynthia Henley, PT, and Kathryn Wollam, PT



Cynthia Henley, PT

When a new health issue emerges, there is a concern about how to manage it. If the issue is related to pain and/or movement, chances are you will want to partner with or be referred to a physical therapist. However, questions often arise. How do I choose a physical therapist (PT)?¹ What should I expect from physical therapy? What if my physical therapist is not knowledgeable about post-polio issues? A good understanding of the physical therapist's role and of your responsibilities can lead to a successful treatment outcome.

Physical therapists are movement experts who improve quality of life through individualized exercise programs, hands-on care, and patient education.² Their evaluation of an individual results in the development of a treatment plan, focused on the individual's long-term goals to improve mobility and restore function. They also offer programs that promote general health and wellness.

Education requirements for physical therapists in the United States now includes a doctoral degree with science and research-based coursework in the classroom, laboratory and clinic. PTs must also pass a state examination to become licensed to practice. Some clinicians specialize after graduation in areas such as orthopedics, oncology, neurology, pediatrics or geriatrics.



Kathryn Wollam, PT

How do I choose a physical therapist?

Your physical therapist must be licensed in your state and stay current with continuing education requirements. Physical therapist assistants are also certified professionals and may provide treatment but do not perform evaluations.

Physical therapists work in various settings. It may be helpful to visit the outpatient clinic, hospital physical therapy department or rehabilitation center to view the facility and meet the therapists. Home based treatment may be the best option if mobility is an issue.

For continuity of care, it is best to work with one or two physical therapists in the clinic and establish a good rapport. Asking questions and providing feedback to your PT regarding your response to treatment is essential. You are an integral part of the team and your input is important. If the therapist does not have prior experience treating patients with a history of polio, they should be receptive to information on post-polio syndrome (PPS). Therapists are interested in learning and sharing ideas for the best functional outcome for their patients.

The reason you are seeking advice or treatment from physical therapy is important to consider. If you have been referred for a simple orthopedic injury, you may find excellent care with a general physical therapist who is made aware of the exercise guidelines for polio survivors.³ However, for the more complex management of issues related to post-polio syndrome or functional decline, a PT with experience in PPS or a neurological specialist is the best option. Insurance companies have guidelines regarding coverage and reimbursement for physical therapy. Your plan may specify the number of visits that will be covered or require a co-payment. It is best to determine if the clinic or therapist participates with your insurance coverage. You should also get your visits pre-authorized and your out-of-pocket expenses known.

If you have the option to choose your own physical therapist or plan to pay privately for the consultation, it is best to seek the advice of a PT who is knowledgeable about PPS.

Since this option may not always be available, check with your physician, a friend, or another polio survivor for a PT recommendation. Your local support group can be an excellent resource as well. You can also refer to the Post-Polio Health International (PHI) website (www.post-polio.org) for medical professionals in your area.

What should I expect from physical therapy?

Your initial visit to physical therapy includes a thorough evaluation. During the interview, the therapist should ask about your medical history, your polio history, current medications, any recent falls or functional changes, your current concerns, the reason you are seeking physical therapy and your personal goals from treatment.

A physical examination follows the interview. A thorough evaluation reveals contributing factors to movement limitations. It can also help the therapist detect any comorbidity that may be complicating the issues since PPS is a diagnosis of exclusion. The examination should include observation of your posture and mobility, testing of sensation and reflexes, and an analysis of your walking.

An accurate MMT gives the physical therapist information to prescribe exercises that are safe and effective.

In addition, measurement of joint range of motion and muscle flexibility, and grading of muscle strength using a manual muscle test (MMT) will be performed. An accurate MMT gives the physical therapist information to prescribe exercises that are safe and effective. The muscle test determines which muscle groups can be safely exercised and those that should be protected.

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Away temporarily?

Send us your second address and dates you will be there and we'll do our best to send your newsletter.

A treatment plan is developed with the information obtained from the evaluation. Treatment may include exercises, modalities to control pain and gait training. Your therapist should work with you to establish functional goals and a reasonable timeline to achieve those goals.

Progressive muscle weakness, muscle and joint pain, and fatigue are common symptoms of PPS.⁴ The increased energy required to safely function daily may prove exhausting, and energy conservation techniques, assistive devices or braces, as well as adaptive equipment help reduce energy output.

Your PT has the expertise to advise you regarding these adaptations. Simple home modifications such as a raised toilet seat, removal of throw rugs or rearranging furniture can make a significant difference in your ability to function at home. The use of a brace, assistive device or wheelchair may be recommended. This can be difficult to accept but the decrease in pain and fatigue, and improved mobility and function often override these concerns.

Physical therapists are trained to note muscular tightness that causes postural changes and makes mobility more difficult. Simple stretching techniques can counteract this problem. The effects of aging and a sedentary lifestyle on cardiovascular endurance can also be addressed by your PT with a safe exercise program.

Aquatic therapy is often a beneficial adjunct to treatment, utilizing the buoyancy of the water to support weak muscles and decrease joint stress while offering resistance to strong muscles. The water provides an excellent medium to accomplish range of motion, strengthening and conditioning exercises; a safe environment to challenge balance; and the ability to move in ways that may not be available on land.

What if my PT is not knowledgeable about post-polio issues?

Not all university curriculum provide training specifically for PPS. However, a licensed PT has a good background in neurology and can research the diagnosis of PPS if needed. You can share information including exercise guidelines, signs of overuse and the wealth of knowledge available on the PHI website.

What are my responsibilities as the patient?

You have certain responsibilities for the successful outcome of your physical therapy. During your initial visit, be specific with your pertinent history and concerns. A written list can be helpful in providing a thorough but concise medical and polio history.

During your initial visit, be specific with your pertinent history and concerns.

Communication is key! Be specific with your response to treatment, during and after your session. Inform your therapist about how you felt following treatment and report any of the signs of overuse including excessive fatigue, pain or muscle twitching. Your PT needs to be made aware so the program can be modified as needed. Keep a log and understand that daily activities (shopping, appointments, entertaining) on the days you receive treatment can increase your fatigue. It is important not to confuse this with overexertion from exercise.

Educate yourself. Know the exercise guidelines for polio survivors and the contraindications of electrical stimulation for strengthening of polio muscles. Be aware and share information, articles and the PHI website.

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Be receptive to the recommended

interventions. Do not expect immediate results from the changes but realize that you may note long-term benefits.

Follow the home exercise program (HEP) that your physical therapist has provided. Ask for verbal and written instructions and review your program with the PT to ensure that you understand the program and are performing it with proper form and technique. Become aware of any signs of overuse due to PPS and report it to your PT to modify the HEP if necessary.

In conclusion, selecting a physical therapist may seem like an overwhelming process. You will find a treatment partner that suits your specific needs by understanding how to choose a physical therapist, what to expect from physical therapy and your responsibilities as a patient. The patient/therapist relationship can be very rewarding and successful in the management of the health issues for which you are seeking care.

References

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4. www.post-polio.org

Cynthia Henley, PT, graduated from Northeastern University in 1981. As a physical therapist, she has worked in patient care, administration and education. Her extensive experience in evaluation and treatment of polio survivors began when she joined the University of Miami Post-Polio Clinic under the direction of Carol Vandenakker Albanese, MD, in 1996. The clinic offered a team approach to management.

She has presented topics related to post-polio management with team members at conferences of Post-Polio Health International and South Florida support groups and at University of Miami PM&R Grand Rounds. Topics include Aquatic Exercise, Fall Prevention, Rehabilitation Guidelines and Spine Care. She co-authored with Kathryn Wollam, PT an article for *Post-Polio Health* on "Sacroiliac Pain" and a Poster Presentation on "Benefits & Techniques of Aquatic Exercise" for the European Conference on PPS in Copenhagen, Denmark.

Ms. Henley is a board member of Advanced Driver Rehabilitation, an adaptive driver training program and Karen Peterson & Dancers, a physically integrated dance company. As a member of US Masters Swimming, she competes nationally and internationally.

Kathryn Wollam, PT, graduated from the University of Miami in 1985. Her wide range of professional experience includes the treatment of patients of all ages in the out-patient, hospital and home-based settings.

Early in her career, Kathryn developed a keen interest in the evaluation and treatment of post-polio patients. She joined the University of Miami Post-Polio Clinic in 1997. Interdisciplinary evaluations were performed by the physiatrist, physical therapists and orthotist with the patient being considered an integral part of the team.

Kathryn has collaborated with Cynthia Henley, PT, on many polio-related projects including conference presentations and educational articles. Together they created a pamphlet and a poster presentation on aquatic exercise for polio survivors. She has also been a guest speaker for multiple support group meetings throughout South Florida.

Most recently, Kathryn was the director of rehabilitation services at a rural hospital in Starke, Florida.