

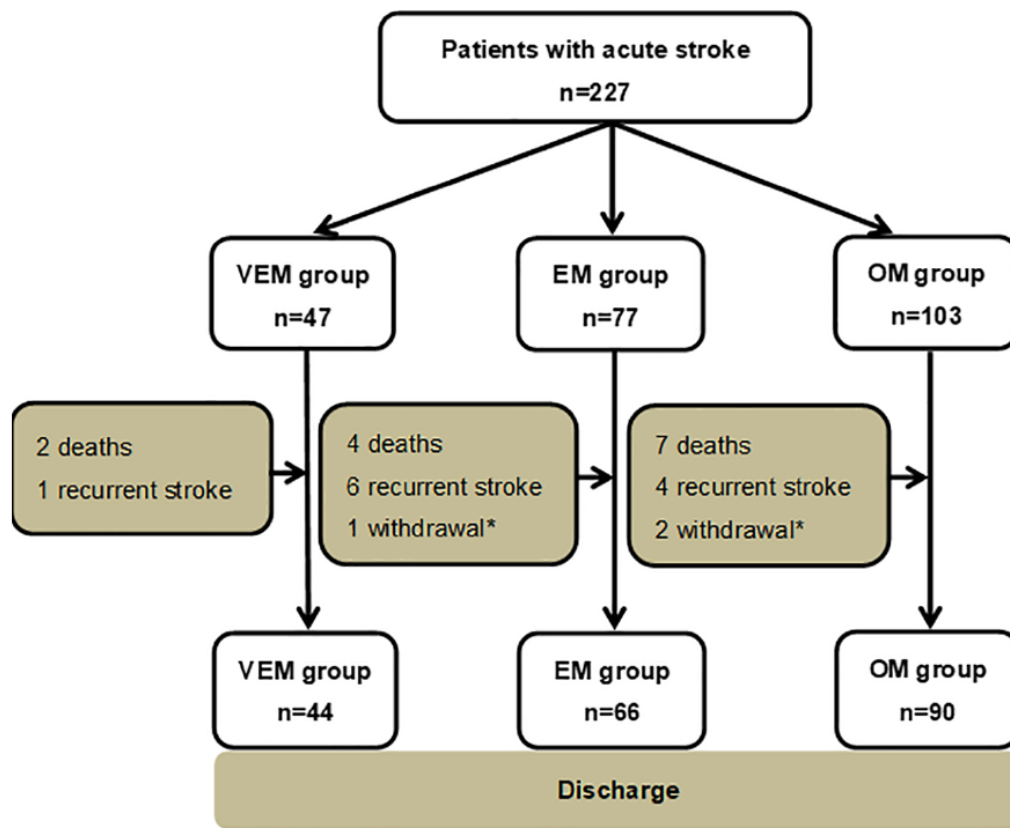
# Effects of physiatrist and registered therapist operating acute rehabilitation (PROr) in patients with stroke

Tokio Kinoshita<sup>1</sup>, Yukihide Nishimura<sup>2</sup>, Takeshi Nakamura<sup>3</sup>, Takamasa Hashizaki<sup>1</sup>, Daisuke Kojima<sup>1</sup>, Makoto Kawanishi<sup>1</sup>, Hiroyasu Uenishi<sup>1</sup>, Hideki Arakawa<sup>1</sup>, Takahiro Ogawa<sup>1</sup>, Yoshi-ichiro Kamijo<sup>1</sup>, Takashi Kawasaki<sup>1</sup>, Fumihiko Tajima<sup>1</sup>\*

**1** Department of Rehabilitation Medicine, Wakayama Medical University, Wakayama city, Wakayama, Japan, **2** Department of Rehabilitation Medicine, Iwate Medical University, Morioka city, Iwate, Japan, **3** Department of Rehabilitation Medicine, School of Medicine, Yokohama City University, Yokohama city, Kanagawa, Japan

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**Fig 1. Patients enrolment flow chart.** \*; Patients with severe heart failure and acute myocardial infarction were excluded from the study. VEM; very early mobilization (started within 24 hours), EM; early mobilization (started 24–48 hours), OM; other mobilization (started  $\geq 48$  hours).

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**Table 1. Baseline characteristics of patients.**

	VEM group	EM group	OM group
N	47	77	103
Age (years)	72.4±2.2	77.3±1.4	77.3±1.2
Gender (females/males)	23 / 24	39 / 38	44 / 59
Height (cm)	159±1.5	158±1.0	158±0.9
Weight (kg)	60±2.1	57±1.3	56±1.2
Type of stroke (Hemorrhage / infarction)	18 / 29	12 / 65	34 / 69
Duration of hospital stay (days)	14.2±1.1 (n = 44)	16.3±1.2 (n = 66)	19.5±1.1 <sup>†</sup> (n = 90)
Time spent in rehabilitation per person (min/day)	73.9±3.3 (n = 44)	69.4±3.0 (n = 66)	69.3±2.4 (n = 90)

Data are mean±SEM.

<sup>†</sup>p<0.05, compared with the VEM group.

VEM; very early mobilization (started within 24 hrs), EM; early mobilization (started within 24–48 hrs), OM; other mobilization (started ≥48 hrs).

**Table 2. Changes in Glasgow Coma Scale (GCS), National Institute of Health Stroke Scale (NIHSS), modified Rankin Scale (mRS) and Functional Independence Measure (FIM).**

	First rehabilitation			Discharge		
	VEM n = 44	EM n = 66	OM n = 90	VEM n = 44	EM n = 66	OM n = 90
Glasgow Coma Scale	13.8±0.3	13.0±0.4	12.6±0.4	14.7±0.1 <sup>†</sup>	13.7±0.3 <sup>†,*</sup>	13.8±0.3 <sup>†,*</sup>
NIHSS	7.3±1.1	10.6±1.3	12.2±1.2	4.4±1.0 <sup>†</sup>	8.1±1.1 <sup>†</sup>	8.3±1.0 <sup>†,*</sup>
mRS	4.0±0.2	4.1±0.2	4.3±0.1	3.0±0.2 <sup>†</sup>	3.5±0.2 <sup>†</sup>	3.6±0.1 <sup>†</sup>
Total FIM	53.4±3.9	54.3±4.2	51.3±3.5	86.0±5.1 <sup>†</sup>	74.3±4.7 <sup>†</sup>	71.2±3.9 <sup>†</sup>
Motor subscale	30.3±2.8	33.3±2.9	31.7±2.4	58.8±4.0 <sup>†</sup>	50.9±3.5 <sup>†</sup>	47.6±3.0 <sup>†</sup>
Cognition subscale	23.1±1.6	21.0±1.5	19.6±1.3	27.3±1.3 <sup>†</sup>	23.4±1.4 <sup>†</sup>	23.6±1.2 <sup>†</sup>

Data are mean±SEM.

<sup>†</sup>p<0.05, compared with first rehabilitation and discharge.

\*p<0.05, compared with the VEM group.

See [Table 1](#) for the definition of the three groups.

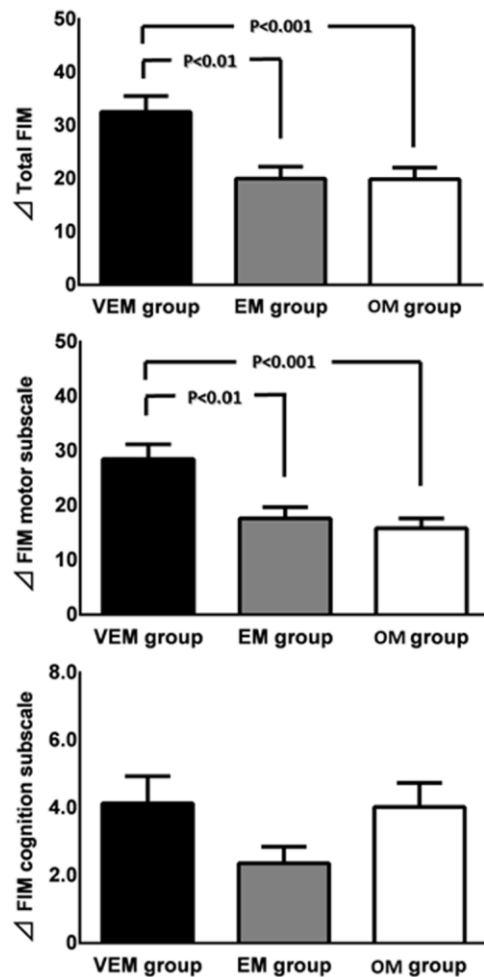


Fig 2. Gain in Functional Independence Measure (FIM). Data are mean±SEM. See [Table 1](#) for definition of the three groups.

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trial, the death rate was 8.5% (6/71) when rehabilitation started two weeks with and 13.2% (5/38) for within 24 hours [6]. In our study, the death rate was 5.7% when rehabilitation started about two weeks and 4.3% in the VEM group. Considered together with the present findings support the view that PRO is clinically beneficial and associated with worsened mortality.

## AVERTとの違い

□ リハ医が初回評価している

□ 離床時間が長い

そもそもRCTでないということは、離床の影響というより、患者の病態を反映しているだけではないか？という疑問が拭えない。