Online Perspectives Journal: Biological & Health
Proceedings of the 5th Research & Development PROVIC/PIBIC Seminar
2nd CNPq Scientific Initiation Meeting
Vol. 10, Nº 34, Supplement, 2020
DOI: 10.25242/8868103420202146

Functionality of neurocritical patients in the ICU

Andressa Machado de Almeida[1], *Fernanda Aparecida Varella Bueno*[1], *Flávia Aparecida de Jesus Martins*[1], *Sandy de Oliveira Terra*[1], *Camila dos Santos Magaldi*[1], *Elizabeth Viana Saores*[2]

(1) PROVIC Scientific Initiation Student - Physiotherapy Course; (2)Guiding Researcher – Research Laboratory Neuromusculoesquelética-LAFIME/ISECENSA – Physiotherapy Course - Higher Education Institutes of CENSA - ISECENSA, Rua Salvador Correa, 139, Centro, Campos dos Goytacazes, RJ, Brazil

Neurological injury can occur due to high or low kinetic trauma (in cases of traumatic brain injury - TBI), or by the absence or leakage of blood (stroke) in the central nervous system. These injuries can generate the appearance of functional limitations or disabilities in neurological patients, who, when in the initial phase of the injury, are classified as neurocritical patients. The aim of this study is to assess the functionality of neurocritical patients who are in the ICU, using a PERME functionality scale. The study is an observational study carried out in the ICU of Hospital Ferreira Machado from October 2019 to December 2020, with inclusion criteria for patients with stroke and TBI, both sexes, aged over 18 years. Patients with spinal cord injury, MMII fracture or upper limb, with hemodynamic instability, using sedation are excluded from the study. The partial analysis of the results so far has identified a sample of 10 patients, with 80% male with mean age ± ?????. In all evaluations, the highest score on the scale was 16 points and the lowest 1 point. Among the domains evaluated, mental status was the one that presented 80% of the evaluated maximum score, while the domains of transfer, gait and endurance in 100% of the sample did not have functionality. The functional strength domain has a maximum score of 4 points. Those evaluated in this regard showed maximum strength in only 30% of the sample. The data found show that the neurological lesions compromise the functionality of the patients, making them demand an extensive rehabilitation process.

Keywords: Funtionality UTI. PERME Scale.

Supported by: ISECENSA.