MRCHS040

ASSOCIATION BETWEEN METABOLIC SYNDROME AND FUNCTIONAL RECOVERY AMONG ACUTE STROKE SURVIVORS- A PILOT STUDY Richa Salgaonkar¹, Dr. Vijaya Kumar K², Dr. Abraham M Joshua³ Post Graduate, Department of Physiotherapy, Kasturba Medical College, Manipal Academy of Higher Education, Mangalore, Karnataka, India.

INTRODUCTION

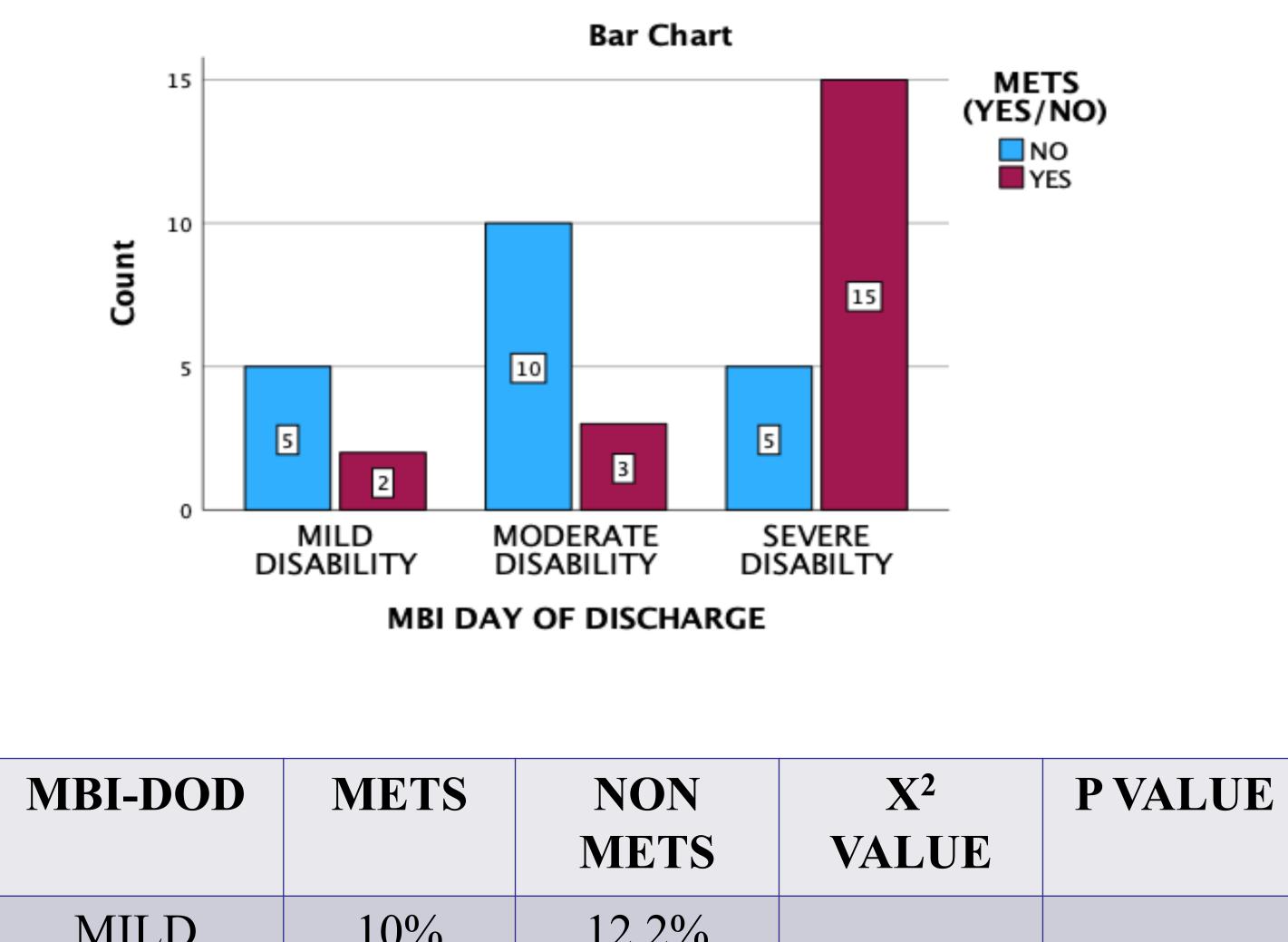
Globally, stroke is the most common neurological



Of 40 patients, 20 presented with MetS with a mean age of 62.27 ± 11.18 upper

cause of disability and is a leading cause of death in adult population. Metabolic syndrome (MetS) is mainly characterized by impaired glucose tolerance, elevated blood pressure, dyslipidemia, and central obesity. Many studies have observed a association between significant MetS and incidence of stroke. Recent advances in the neurobiological research studies had found that the presence of MetS may influence the key process of neural repair in stroke recovery and prognosis. However, there are limited studies to explore the impact of MetS on post stroke recovery (within 2 weeks) in very early rehabilitation phase.

mean age of 62.27 ± 11.18 years.



AIMS/OBJECTIVES

To find the association between metabolic syndrome and functional recovery among acute stroke survivors.

METHODS

- Forty (n=40) acute stroke patients admitted in a tertiary care hospital.
- Patients who fulfilled MetS criteria based on NCEP ATP III were included.
- Modified Barthel Index (MBI)was administered

	1070	1 2.2 / 0		
MODERATE	15%	24.4%	50.138 ^a	0.007*
			-	
SEVERE	75%	12.2%		

A large proportion of participants diagnosed with MetS were found to have severe disability when compared to those without MetS.

CONCLUSIONS

Our study has shown that MetS is associated with poor functional recovery in acute stroke patients with majority of them having severe functional disability.

to assess the functional recovery on the day of referral and day of discharge.

• Patients who were cognitively unstable and had a pre-existing neurological condition were excluded from the study.

BIBLIOGRAPHY



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