# IMPROVED GAIT AND GASTROINTESTINAL FUNCTION FOLLOWING INNOWALK TRIAL

The aim of the project was to evaluate the effect of 6 weeks Innowalk trial on gait and gastrointestinal function in a 13 year old child with spastic bilateral cerebral palsy, GMFCS level III.

Due to a small sample size (1), the results can not be generalized.



# First time intervention - testing Innowalk

Patient: 13 years

**Diagnosis:** spastic bilateral cerebral palsy (CP) **GMFCS level III:** Walks using a handheld Mobility Device, limitations walking outdoors and in the local community (www.canchild.ca)

### 6 weeks testing log

Aug.-Oct.2009 shows: A total of 37 sessions Duration 20 minutes - 1 hour 45 minutes, mainly approximately 1 hour.

### An illustration of standing alignment

1 - Key Walker





### **Rectus femoris tightness**

Duncan Ely\* - test for rectus femoris dysfunction (PROM, tested by slow knee flexion):

#### **Before**

Right: 50 degree angle Left: 30 degree angle

### After

Right: 50 degree angle Left: 60 degree angle



In our patient, measured by the angle between the base of support and the calf as the pelvis rises.



Source: www.google.no (searchword: rectus femoris dysfunction)

Source: www.oslo-universitetssykehus.no

### Resistance against rapid passive stretch

### Hip extensors:

BeforeAfterBeforRight: 2Right: 1Right: 1Left: 2Left: 1Left: 2

Measured by the Asworth scale

### Hip adductors:

Before After
Right: 2 + Right: 1 +
Left: 2 + Left: 1 +

Measured by the Asworth scale

Spasticity: "disordered sensorymotor control, resulting from an upper motor neurone lesion, presenting as intermittent or sustained involuntary activation of muscles" (IH. Burridge et al. 2005).

### **Gastrointestinal function**

### Before (registration period of 2 weeks prior to the 6 week Innowalk trial):

2-3 toilet accidents, 3 days complained of stomach pain,
 one of these days, the patient had to go home from school because of pain.
 Use medicine for Gastrointestinal Function

### During Innowalk trial (6 weeks):

No complaints of stomach ache, 1 toilet accident. **Now:** No medicine for Gastrointestinal Function.

### Additional effects:

### Muscle circurmference

Calf Before: Left (affected leg): 21 cm circumference
After: Left (affected leg): 21.5 cm circumference

#### **Blood flow**

- Warm feet after each session (usually they are cold)

## **GAIT PATTERN - BEFORE TRIAL**

The feet are significantly **outwards rotated** throughout the gait cycle, so that the left leg consistently **nudges** into the back of the right foot in the swing phase when walking at normal speed. This is less pronounced when the patient is walking faster. The **upper body is clearly stooping forwards** and there is **flexion in the hips and knees**. Walks with "kissing knees".

# **GAIT PATTERN - AFTER TRIAL**

The feet are **slightly less outwards rotated** so that the toes are pointing more forward throughout the gait cycle. We can also see that **the left foot now and then is nudging** the right foot in the swing phase when the patient is walking at normal speed, but **not consistently**. There is **longer distance between the feet** in the gait cycle. The **upper body is more upright and the patient is walking with slightly less flexion in the hips**. The patient still walks with "kissing knees".

Our professional impression is that walking function has improved.