

ORGANIZATION NEWS

Information/Education Page

Reducing the Effects of Hospital-Associated Deconditioning: Postacute Care Treatment Options for Patients and Their Caregivers



Hospital-associated deconditioning refers to generalized weakness or loss of fitness because of muscle nonuse, which can happen due to bed rest and inactivity during hospitalization for an illness.¹ Deconditioning can have far-reaching effects on areas such as strength, physical endurance, heart rate, and circulation.¹⁻⁵ These effects can make it harder for you to participate in physical and social activities the way you once could.

While the illness that caused your hospitalization may have improved, your ability to function at home and in the community may still be affected by deconditioning. You may benefit from rehabilitation services after your hospital stay to improve your physical recovery and support your ability to live independently in the community. Rehabilitation for deconditioning may include work with trained therapists, who will evaluate your needs and work with you to provide equipment (such as canes or walkers), exercise programs, or other services to help improve your functioning. This rehabilitation care is often supervised by a physician.

The purpose of this fact sheet is to help you better understand the types of rehabilitation services that are available to assist patients with deconditioning. You are encouraged to discuss these options with your health care providers so you can work together to determine what services are most appropriate for you.

Rehabilitation care settings

Depending on your needs, there are many types of settings in which rehabilitation care can be given.^{2,6}

Inpatient rehabilitation

Inpatient rehabilitation hospitals provide both medical treatment and intensive rehabilitation therapy. Typically, you receive at least 3 hours of rehabilitation therapy per day at least 5 days per week.⁶ Treatment may include occupational therapy, physical therapy, and speech therapy, in either one-on-one or group settings.⁷ A physical medicine and rehabilitation (PM&R) physician manages your medical problems.⁷ A PM&R physician must determine if you are an appropriate candidate to get rehabilitation in this type of setting. Nurses provide education and support activities that promote return of function and prevent complications. The average length of stay in an acute inpatient rehabilitation hospital is 13 days. The goal of inpatient rehabilitation is to assist you in independent functioning prior to returning home. Facilitating a safe return home by equipping patients and caregivers with skills to safely manage limitations in function may also help you to avoid future hospitalization for injuries or conditions resulting from deconditioning.

Skilled nursing facility

Skilled nursing facilities (SNFs) provide medical care and less intensive rehabilitation therapy after hospitalization. Generally, patients receive 45-60 minutes of therapy per day and will be examined by a physician or nurse practitioner within the first 2 weeks following admission. The average length of stay in a SNF is approximately 27 days. A SNF may serve as the most appropriate option for patients who have difficulties with

thinking or memory, lack of support at home, or chronic health concerns, in addition to deconditioning, that may be difficult to manage.⁸

Home health care

In-home therapy is another option following hospital discharge. Once you have returned home, nurses and rehabilitation therapists (ie, physical therapists [PTs] and occupational therapists [OTs]) may perform home assessments prior to providing therapy services in your home.⁹ This option may be appropriate if you are further along in your recovery and have support at home but still have some concerns related to balance, strength, or endurance.

Outpatient therapy

Outpatient therapy may occur in a clinic or rehabilitation or public health agency.^{10,11} A physician or qualified therapist creates a treatment plan involving weekly therapy sessions to address your needs.¹¹ This setting is appropriate once you are more medically stable and able to leave your home regularly.

Health care professionals

The settings described above may use nurses, PTs, OTs, and speech therapists to address your needs. As described below, each health care specialist plays a unique and important role in treating deconditioning after hospitalization.

PM&R physicians

These physicians have completed training in the specialty of physical medicine and rehabilitation. They have been trained to diagnose and treat disorders of the muscles, bones, nerves, and brain. PM&R physicians provide important input about rehabilitation therapy, including whether you can be medically cleared to participate in therapy. Also, since most insurance companies require a physician prescription before they will pay for outpatient therapy, a rehabilitation doctor is well qualified to formulate a therapy prescription.

Physical therapists

PTs address mobility, such as walking and managing stairs. PTs may recommend assistive devices (eg, canes and walkers) and training in the safe use of these devices. PTs are trained to develop treatments that help improve your strength, endurance, and balance.

Occupational therapists

OTs focus on improving your ability to complete tasks important to everyday life, including self-care tasks, home management responsibilities, work-related duties, and hobbies. OTs are trained to develop treatment sessions that may include exercise, fine motor activities, and tasks you do in daily life. OTs customize treatments to focus on functional skills affected by deconditioning so that you can engage in the things you find meaningful.

Speech-language pathologists

Speech-language pathologists address areas such as communication, cognition, and eating. They are trained to evaluate your ability to safely swallow foods and liquids. In addition, speech-language pathologists can work with you on strategies to improve your ability to communicate, if your speech is impaired, and can address thought processes related to safety and decision-making.

Registered nurses

Registered nurses provide ongoing care to ensure you remain medically stable on your path to recovery. They may also provide medication, wound dressings, and ongoing monitoring of your condition.

Conclusions

You are encouraged to discuss your rehabilitation treatment options with your primary hospital health care provider (physician, nurse practitioner, etc) to determine the best recommendation for you.

Authorship

This page was developed by Julie Faieta, MOT, OTR/L (e-mail address: julie.faieta@osumc.edu), Timothy Flesher, MD, MS, and Diane Faulhaber, OTR/L.

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