

FORWARD

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SPINAL INJURIES
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 **ACTIVE**
Assistance
The freedom of an ACTIVE life

LOFRIC[®]



**HOLIDAY
SPECIAL**

A new kind of arm and hand therapy



The SaeboFlex (a part of the FTM arm-training programme) is a dynamic hand orthosis, which helps people who have reduced arm/hand function to grasp and release objects. Originally developed in the United States, it has recently been introduced into the United Kingdom and used primarily with stroke subjects. The orthosis is spring-loaded which allows subjects to use their own movement (flexion) to grasp objects and then the springs return the hand towards a more open (extended) position to release the object. By adjusting the springs, one can be helped more or less to achieve this opening movement. The aim is for each user to generate their own activity with less reliance on a therapist's help, to reach, grasp and release objects, with multiple repetitions over a treatment period.



Research conducted in the United Kingdom into the effects of the SaeboFlex orthosis has shown that, for stroke survivors following a programme of use over a 6-month period, some were able to make improvements in motor recovery. The stroke survivors that showed most change were those with some ability to open their wrist and finger (extension) but whose functional

use of this movement was limited by weakness. The SaeboFlex then provides an environment to allow them to work actively to strengthen wrist and finger extensors with the hand in a more optimal position.

There are many incomplete SCI people who have the ability to grasp but cannot lift their wrist to use their finger extension properly. These are the group of people who may

benefit from the FTM arm-training programme. The SaebFlex is, however, not for every stroke survivor and incomplete SCI person. Subjects need to have some activity in their shoulder and elbow and be able to initiate a squeeze with their hand. Imagine you have your hand placed around a grapefruit, and then try to squeeze the fruit. If you can start to grasp the fruit then the SaebFlex may be appropriate for you. Only a minimal amount of grasp activity is needed to allow the orthosis to work.



Liz Bond exercising on the course.

One SCI person I met, on my visit to Welwyn Garden City to attend the training days, was Liz Bond from Hertfordshire. Liz was injured in a horse riding accident in May 2003. She spent five months at Stoke Mandeville and left able to walk with a stick but with no strength in her hands and her fingers in a permanently claw-like position. Liz was unable to do up zips or buttons and unable to pick anything up using her fingers. She was referred to Glyn Blakey, a freelance physiotherapist doing work for the NHS, for some hand therapy. Glyn had recently been to America to be trained to use the SaebFlex and he thought Liz might benefit from using the orthosis. This treatment is not available on the NHS, but fortunately Liz was able to go privately for treatment. She attended her first 5-day course in August 2004 and when I met her in November, after daily working and exercising with two orthoses, one for each hand, I can honestly say her hands looked normal. But apart from this she can now type again and has been able to return to full-time work, she can dress herself and has even begun to play the guitar.

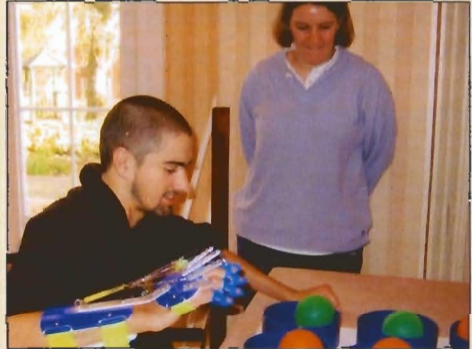


Glyn Blakey.

Glyn, who is now the Western European Trainer and Clinician for the FTM arm-training programme says: "After working with stroke survivors for over a year it became clear to me that it was not just this group of people that could potentially be helped by the SaebFlex. This is not a miracle cure to wrist and hand extension problems. It requires motivation and lots of hard work. I can offer the intense therapy course in Welwyn Garden City for a fortnight or week (60 hours and 30 hours respectively) or for those that are unable to travel, shorter therapy sessions with one of the 13 trained therapists throughout England. The participant must then return to their home and incorporate the exercise programme into functional tasks. I try to encourage people to work for two, forty-five minute sessions a day with the SaebFlex to get improvements. It is working your hand/s in the orthosis that may lead to change, not the orthosis alone."

Michael Hughes, C5/6 was injured in March 2004 and had been using the SaebFlex for four

months when I met him in November. He is pictured playing a game of noughts and crosses with another of Glyn's patients who has a brain-stem injury caused by a haemorrhage. They are both trying to build up power and grip in their hands by exercising, in the way prescribed, using the orthosis.

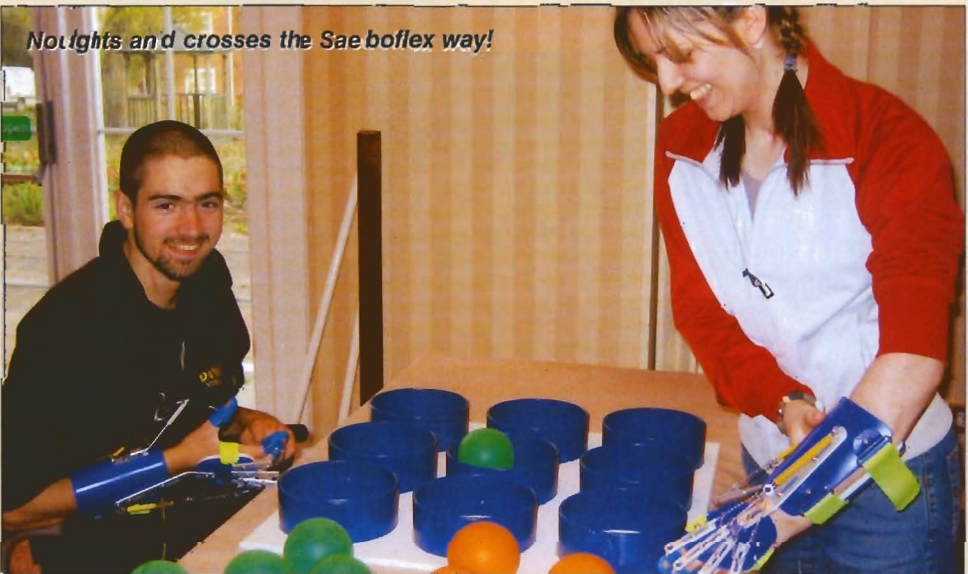


Sally Davenport looks on while Michael Hughes carries out the prescribed exercises.

Each individual needs to be assessed for use with the SaebFlex before they are accepted onto a training programme. They also need to be able to raise the cost of the orthosis (£480 each) and the residential course which costs up to £3,000. To date, the two subjects with incomplete SCI who are using the SaebFlex are being assessed throughout their participation in the programme by an independent researcher, Sally Davenport, from the University of Hertfordshire.

For more information about the SaebFlex and to talk to Glyn Blakey, please contact him at: gblakey@saebo.com or by telephone: 01438 211197.

Lynne Punchard



Noughts and crosses the SaebFlex way!