

OCCUPATIONAL THERAPY AND YOU

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GOAL OF THE PRESENTATION

- What is OT
- What OT can do for you
- Alert signs
- Practical tips





OCCUPATIONAL THERAPY

 The practice of occupational therapy means the therapeutic use of occupations, including everyday life activities with individuals, groups, populations, or organizations to support participation, performance, and function in roles and situations in home, school, workplace, community, and other settings.

(AOTA, 2012)





GOAL

 The primary goal of occupational therapy is to enable people to participate in the occupations which give meaning and purpose to their lives.





SPECIFIC AREAS

- Eating
- Cooking
- Dressing
- Bathing
- Writing
- Mobility/falls
- Energy conservation technique

- Home management
- Driving
- Work
- Leisure
- Sexuality
- Disease management





WHAT IS THE CAUSE OF MY PROBLEMS MANAGING MY DAILY LIFE

- Decrease muscle strength
 - Hand to shoulder
 - Ankle to hip
- Fatigue
- Hypersomnolence
- Difficulty to resolve problems
- Difficulty to remember information
- GI Tract involvement and many more....

LIFE-H	Gross Dexterity	Fine Dexterity	Grip strength	Pinch Strength
Nutrition	0.30	0.48	0.52	0.47
Exercising	0.35	0.38	0.50	0.47
Personal Care	0.42	0.57	0.58	0.54
Independant Living	0.43	0.50	0.62	0.61
Mobility	0.48	0.50	0.62	0.61
Community Life	0.40	0.50	0.56	0.55
Work	0.47	0.47	0.50	0.46
Leisure	0.43	0.52	0.53	0.53





ENVIRONMENT

Your participation in daily activities and social roles is strongly affected by

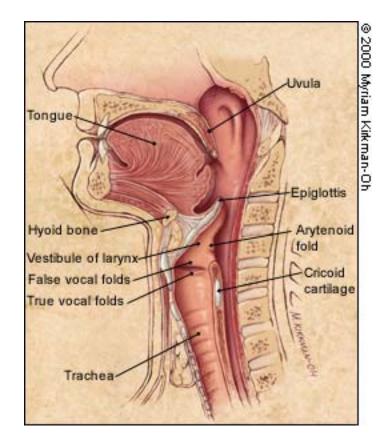
- Services
- Support from family and friends
- Technology



GRIMN

EATING: THE SITUATION IN DM1

- Presence of dysphagia (45%)
 - Coughing
 - Difficulty eating specific texture or food
- Difficulty handling cutlery
- Difficulty taking food in your plate







EATING: ALERT SIGNS THAT I NEED TO SEE AN OT

- Dysphagia
 - Coughing often during meals
 - Having a pneumonia
 - Stopping eating certain foods
 - Chips
 - Crackers
 - Hot liquids
 - Burger patty
 - Apple



GRIMN

EATING: WHAT OT CAN DO FOR ME

Dysphagia

- Working with the nutritionist
- Texture adaptation
- Teaching your family the Hemlich manoeuvre
- Position while eating
- Exercise
- Cutlery
 - Increase the size of the handle
- Handling food and drinks





INCREASE SIZE OF THE HANDLE







TWO-HANDED CUP







DYCEM







ÅRM SUPPORT



GRIMN

PREVENTING DYSPHAGIA: GENERAL RECOMMENDATIONS

• POSTURE:

- Sit upright for all meals, snacks or drinks.
- Swallow with the head tilted down so that the chin points to the chest (a pillow or rolled towel behind the head may be helpful for keeping the head in this position).
- Stay seated upright for 20-30 minutes after a meal or snack.
- Experiment to find the best way to minimize head movements. Resting the elbows on the table with the chin resting in the palm of the hands may work best.





PREVENTING DYSPHAGIA: GENERAL RECOMMENDATION

- MEAL DURATION
- SIZE OF BITE/SIP
- FOODS AND LIQUIDS





DRESSING: THE SITUATION IN DM1

- 15% experienced problems or need human help
- Lack of strength in the hands is a major issue

DRESSING: ALERT SIGNS THAT I NEED TO SEE AN OT

- It take a lot more time to dress than I use to
- I am not wearing some of my clothes anymore as it is too hard to put on







GRIMN

DRESSING: WHAT OT CAN DO FOR ME

Socks adpatation











BATHING : THE SITUATION IN DM1

- 17-42% experienced difficulty, used technical aids or need human help
- Decrease muscle strength may lead to difficulty
 - Washing and getting in and out of the bath
 - Washing hair
 - Doing nails
 - Brushing teeth





BATHING: ALERT SIGNS THAT I NEED TO SEE AN OT

- I am afraid of not being able to come out of the bath
- I stumble while trying to get in the bath







BATHING: WHAT OT CAN DO





Grab bars at the entr But also in devant le Laver leur cheveu



MOBILITY AND PREVENTING FALLS

Based on Christine Damon presentation http://www.docstoc.com/docs/84902619/Home -Modifications-One-Strategy-for-Fall-Prevention







Falls: Problem Magnitude in DM1

- Approximately 20-30% of falls result in injuries that reduce mobility and independence in the general population.
- Falls are 10X more current in DM1 according to one study



(CDC, 2007; CDC, 2010a; CDC, 2010b)





Falls: Activity Risks

- FIVE primary activities that increase fall risk
 - Mobility/Transfer
 - Personal Hygiene
 - Household Chores
 - Controlling Ambiance
 - Communication & Response



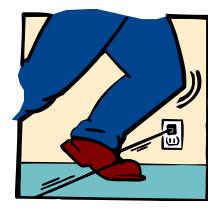




Fall Risks



Running to get the telephone

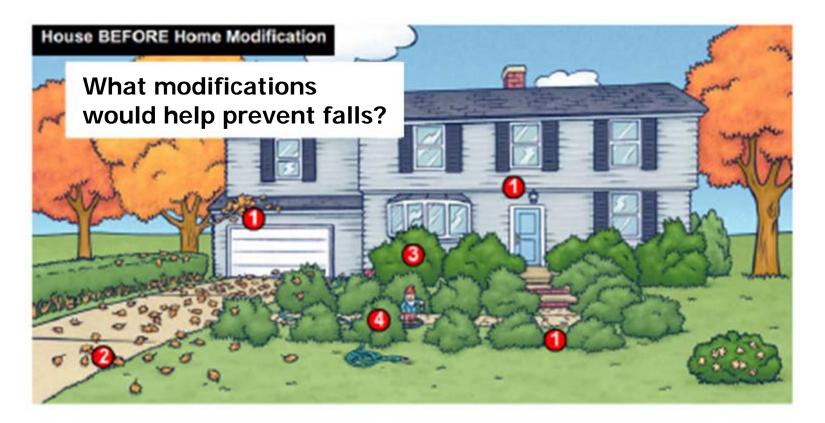


• Electronics: cords, cords, cords





Assessing the Exterior



(Pynoos & Nguyen, 2007)





Some Exterior Solutions...

- Remove leaves
- Install more lights: over garage, at front door, at end of walk
- Add porch, porch rail, and bench
- Grade sidewalk to front door
- Trim/remove shrubs
- Other?





Possible Exterior Modifications





Solar Light (Sunbeam)

Motion Detection Light (<u>Westinghouse</u>)

Wireless options – no electrician required!





Possible Exterior Modifications

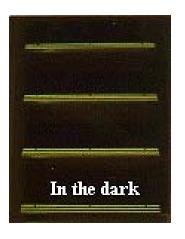


Steel or Aluminum Rails

(Simplified Building Concepts)



Step Reflectors (<u>Glowline</u>)







Exterior to Interior Transition

Creating a gradual threshold





(SAIL, 2010)

(SAIL, 2010) Threshold Ramps





Assessing the Living Room



(Pynoos & Nguyen, 2007)





Some Living Room Solutions...

- Add curtain/shades to reduce glare
- Re-arrange furniture to eliminate cords
- Add lighting
- Move or remove rug
- Place phone next to couch
- Install set-back thermostat and overhead lighting switch
- Other?





Possible Living Room Modifications



Couch Cane (Comfort Channel



Power Seat (Medicare will pay w/ prescription). (Up Easy)











Assessing the Kitchen



What modifications would help prevent falls?



(Pynoos & Nguyen, 2007)37





Some Kitchen Solutions

- Remove items that may cause tripping, i.e., tools and shelf unit at end of counter, ball-like object in front of fridge?
- Located cooking utensils and foodstuffs in easy-to-reach locations
- Use a sturdy step-stool
- Add more lighting?
- Other?





Possible Kitchen Modifications

Over the Door Rack (adjustable flip-up shelves) (Amazon)





Wall Mounted Pot Rack (<u>Amazon</u>)

Lessening the reach





Possible Kitchen Modifications



Pull-down Glass Rack (<u>Rev-a-Shelf</u>)

Lessening the reach

Slide-out Shelves (Sliding Shelf)







Possible Kitchen (& Laundry) Modifications



Screw-In Motion Sensor Light Socket (no hands) (Smart Home) Anti-fatigue Mat (Central Restaurant)

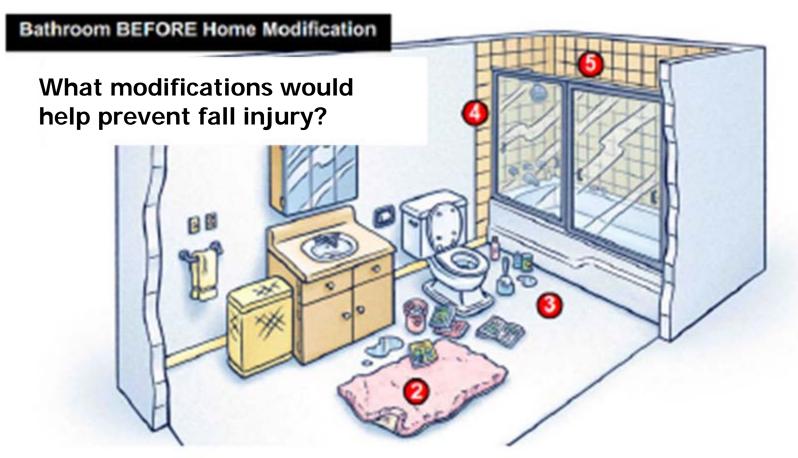


Beveled edges reduce tripping; also easy on legs.





Assessing the Bathroom



(Pynoos & Nguyen, 2007)





Some Bathroom Solutions

- Electricity all within easy reach
- Remove rug except for non-skid when stepping out of bath
- Remove clutter
- Dry floor
- Remove shower doors; install curtain
- Install grab bars near toilet and in tub
- Add transfer seat & extendable shower head
- Anything else?



Possible Bath Mods: Grab Bars



Can be beautiful (Moen)

- Use of angled bars is controversial (hand may slip more easily) (Weil Medical College of Cornell University, n.d.)
- Placement guidelines are very specific and need to meet the unique needs of the client (NAHB, 2002).

Possible Bath Mods





Much safer than top risers that can come loose.

GRIMN



Swing-up Grab Bar (no adjacent wall) (Ocelco)

Lifts out of the way; no legs to trip on.





Assessing the Stairway



(Pynoos & Nguyen, ₄₆ 2007)





Possible Stairway Solutions...

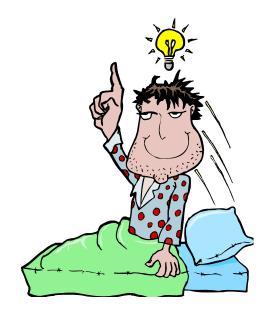
- Add additional lighting
- Add additional handrail
- Add three way switch (see Living Room solutions)
- Mark step treads
- Re-arrange furniture
- Remove clutter
- Other?





Don't Forget... Possible Bedroom Modifications

- To reduce fall risk in the bedroom...
 - Reduce any clutter
 - Locate clothing within easy reach
 - Provide a safe place to sit while dressing
 - Increase lighting
 - Other?

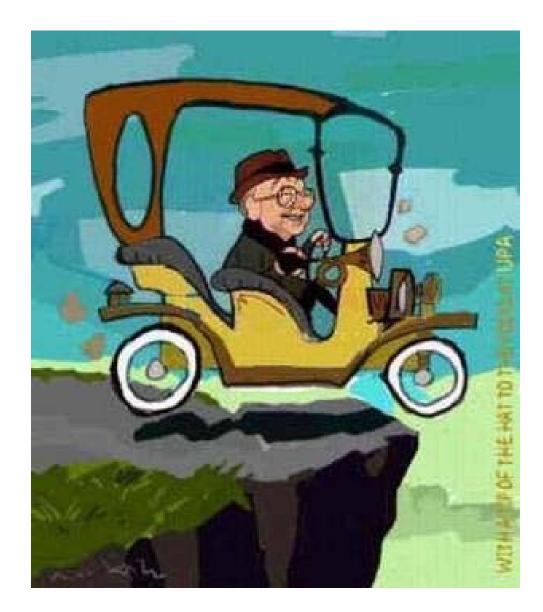


DRIVING AND SLEEPINESS



"We're not sure yet,but we think he may have been asleep at the wheel."

DRIVING AND CATARACTS







HOME MANAGEMENT: THE SITUATION IN DM1

- Doing major household tasks: 68%- 26% experienced problems or don't do it anymore
- Maintaining their house: 50% experienced
 problems
- Decrease lower extremity strength, fatigue, decrease support from family and friends, income can partly explained the difficulties





HOME MANAGEMENT: ALERT SIGNS THAT I NEED TO SEE AN OT







HOME MANAGEMENT: WHAT OT CAN DO FOR ME

- Assessment of your residual abilities
- Help you get community services
- Find tricks to help with cleaning





SEXUALITY: THE SITUATION IN DM1

- 36.7% of men with DM1 reported light or severe erectile dysfunction (ED) (nonpublished data).
- The results can be an underestimation as 46% of the study group (n = 200) stated not have had any sexual relations during the last six months.
- Lack of strength
- Fatigue





WHAT OT CAN DO FOR YOU

- Working with the sexologist and your doctor
- Define what work for you now, explore new avenue.





WORK

- Around 20-30% are currently working
- Employment is possible but accommodations are often necessary
- Don't' wait too long before discussing with your doctor if your work is getting more difficult to do and ask for a referral in OT.
- Programs may exist in your area to compensate for decrease ability to work





ENERGY CONSERVATION TECHNIQUE

- Use good posture
- Avoid excessive bending, reaching, carrying and lifting. Avoid extra trips by using a cart or trolley to carry items. A small basket keeps cleaning supplies handy.
- Consider your own body proportions to determine comfortable work heights. Elbows should form a 90 degree angle, shoulders relaxed and spine straight for a proper work height.





GOOD POSTURE

- When carrying, divide the load; e.g. carry two smaller bags of groceries in each arm instead of one large heavy bag.
- Prevent bending and stooping by using long or adjustable handles on dustpans, brushes, shower mops - even paint rollers.





REDUCE FATIGUE

- Consider how you can do some jobs sitting rather than standing such as chopping vegetables, ironing and woodworking. Sitting reduces energy use by 25%.
- Alternate postures and take frequent stretch breaks throughout the day.
- Incorporate a system of work and rest into activities. Short rest breaks of five minutes during daily activities can help increase overall endurance.





MODIFY ACTIVITIES

- Air-dry dishes and use freezer-to-microwave dishes.
- Use a lightweight steam iron.
- If your laundry room is located downstairs toss dirty linen down in a pillowcase, rather than making an extra trip.
- To reduce the amount of bending in making the bed, use a lightweight duvet rather than several layers of sheets and blankets.



CREATE A COMFORTABLE ENVIRONMENT

 If the surrounding conditions are pleasant the job will be less tiring and more enjoyable.
 Listen to your favourite music when doing chores. Good lighting, comfortable clothing and pleasing colours set the stage for work with less strain.





PRACTISE TIME MANAGEMENT

- Pace yourself; alternate light and heavy tasks.
- Divide activities throughout the week instead of overdoing it in one day. Keep a schedule on the refrigerator to remind you and your family of everyone's responsibilities.





ORGANIZE YOUR WORK

- Plan your activities first to avoid extra trips. Assemble necessary supplies and equipment prior to doing the job. For example, arranging garden supplies and tools prior to planting.
- Group articles that are used together; e.g. cleaning tools and cloths.
- Store heavy articles in the area easiest to reach, light articles in the high or low range





OTHER AREAS

- Leisure
- Disease management





GETTING FUNDING

- MDA program
- Insurance compagny may decrease your fare because you install some grab bars
- Need a prescription to get reimburse
- Senior program for fall prevention





MORE RESOURCES

- OT suggestions :
 <u>http://www.myotonic.org/node/67</u>
- Checklist for fall risks :
 <u>http://www.cdc.gov/HomeandRecreational</u>
 <u>Safety/Falls/CheckListForSafety.html</u>
- CAOT website