

CPG Quick Reference for Clinicians

Source:

Clinical Practice Guideline for Use of Ankle Foot Orthoses and Functional Electrical Stimulation Post Stroke was published in the April 2021 issue of Journal of Neurologic Physical Therapy

Purpose:

The purpose of this CPG is to provide evidence to guide clinical decision-making for the use of either AFO or FES as an intervention to improve body function and structure, activity and participation as defined by the International Classification of Functioning, Disability and Health (ICF) for individuals with post stroke hemiplegia with decreased lower extremity motor control.

Scope:

The scope of the CPG was intended to provide evidence on the effects of AFO or FES on:

- Rehabilitation of individuals with acute and chronic stroke
- Goals based on a compensation and recovery approach
- Outcomes across the ICF levels of functioning

The target population of the CPG included adults (≥ 18 years of age) of both genders and all races and ethnicities.

Recommendations:

Strong evidence supports the use of both AFO and FES for multiple outcomes for individuals with decreased lower extremity motor control due to both acute and chronic post stroke hemiplegia. Please see more specific recommendations below.

Definitions:

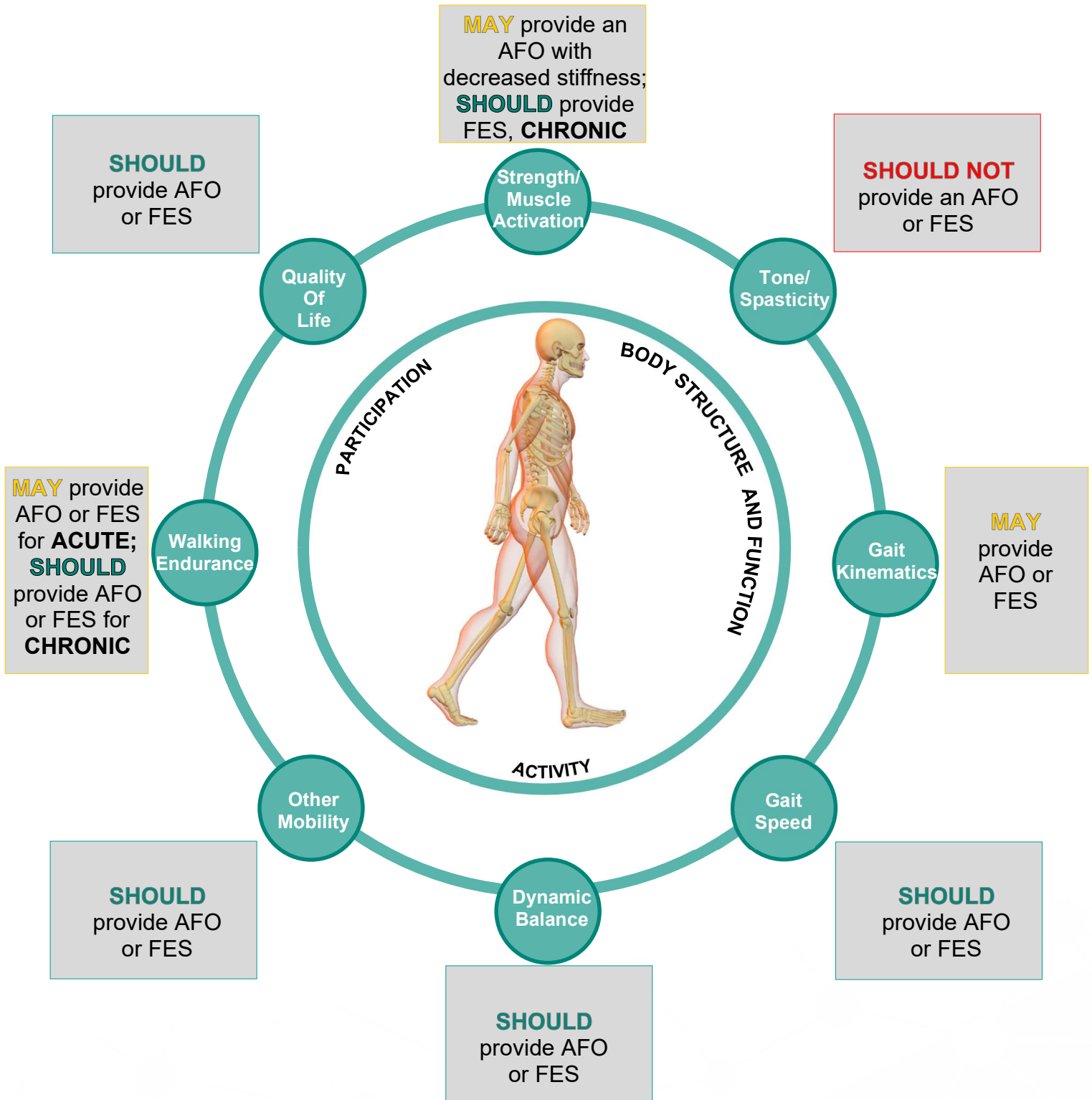
- Acute Stroke: up to 3 months post stroke
- Chronic Stroke: >3 months post stroke
- AFO: Ankle foot orthosis/orthoses
- FES: functional electrical stimulation
- CPG: Clinical Practice Guidelines are based on systematic reviews of the evidence regarding a specific clinical question. Guidelines are provided to assist in clinical decision making, not to take the place of clinician judgment.

Limitations:

- Unable to recommend specific AFO and/or FES unit/setting secondary to variability in study designs.
- Limited availability of quality literature that includes individuals in the acute phase of stroke recovery relative to the chronic phase.



Use of Ankle Foot Orthoses and Functional Electrical Stimulation Post Stroke



All recommendations apply to both acute and chronic stroke unless otherwise noted.

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ANPT Knowledge Translation Task Force: Elizabeth Cornforth, PT, DPT, NCS; Bobbette Miller, DPT, NCS; Andrea Ecsedy, PT, DPT, NCS; Megan Greenwood, PT, DPT, MSPT, NCS, PCS; Ryan Koter, PT, DPT; Suzanne O'Neal, PT, DPT, DHSc, NCS; Katherine Sweet, PT, DPT, NCS; Daniel Miner, PT, DPT