

June 2018 Very Early Mobilization for Stroke



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Hello members.

We are continuing this month focusing on early mobilization. We have looked into a systematic review. Conclusions. **A few published stroke guidelines do recommend mobilization 24-48 hrs after stroke onset-but evidence remains insufficient.** We have taken a detailed look into the AVERT trial development.

This week, Bernhardt discusses early mobility as well as ICU mobility and her work in the AVERT trials.

AND an overview of international guidelines for early mobilization post-stroke. A must read if you are in acute care. Putting evidence into practice!!

[Bernhardt J. Early mobilisation and rehabilitation in intensive care unit-ready for implementation? Annals of Translational Medicine . 2017;5\(3\):57.](#)

Clinical Point of View:

- Interestingly it is often hard to see best evidence into practice, sometimes it can be easy to get clinical uptake of low evidence based treatments into practice.
- For example, she noticed that during an 8 year recruitment for AVERT trial that usual care changed to an earlier start time each year.
- Opinion and practice of early mobility has shifted dramatically in recent years, especially with ICU mobility but she cautions need for large definitive trial of ICU rehabilitation is needed, especially with possibility of risk for harm in the acute post stroke population. She cites studies that discuss need for caution as we “dont’ really understand the biology of recovery in the early phase after brain injury with stroke, and this may be significant factor in explaining the very important finding of harm in AVERT.”

[Bayley, M. T., et al. \(2017\). "Where to now? AVERT answered an important question, but raised many more." Int J Stroke 12\(7\): 683-686.](#)

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