

Rehabilitacije bolnikov po prebolelem klopnem meningoencefaloradikulomielitisu

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Uvod: Klopni meningoencefaloradikulomielitis okužba je RNA virusna okužba, z akutnim kliničnim potekom in možnimi posledičnimi dolgotrajnimi omejitvami dejavnosti bolnikov. Ti bolniki zato pogosto potrebujejo celostno rehabilitacijo. Namen naše raziskave je bil oceniti izid njihove rehabilitacije. Metode: V raziskavo smo vključili 15 bolnikov po prebolelem klopnem meningoencefaloradikulomielitisu. Povprečna starost bolnikov je bila 56,1 let (SD 10,8; razpon 27-73 let). Dejavnosti bolnikov smo ob sprejemu in odpustu ocenili z Lestvico funkcijske neodvisnosti (FIM). Za oceno napredka po FIM smo uporabili t-test za parne vzorce. Korelacije med starostjo bolnikov, časa od začetka bolezni, trajanja rehabilitacije in napredka po FIM smo ocenili z Pearsonovim korelacijskim koeficientom.

Rezultati: Bolniki so bili na Univerzitetni rehabilitacijski inštitut Republike Slovenije sprejeti v povprečju tri mesece po nastopu bolezni (SD 2,2, razpon 1-8 meseca).

Rehabilitacija je v povprečju trajala 59,4 dni (SD 34,6; razpon 25-123 dni). Ob sprejemu so bile pri bolnikih prisotne zmerne omejitve dejavnosti, s povprečno oceno motoričnega FIM

55.5 (SD 27,5; razpon 13-89) in maksimalno oceno kognitivnega FIM. Bolniki so med rehabilitacijo dosegli klinično pomemben napredek; ocena motoričnega FIM se je v povprečju izboljšala za 19,4 (SD 16,8; razpon 0-54). Napredek je bil statistično značilen ($p < 0,001$). Korelacije med napredkom v dejavnostih in trajanjem rehabilitacije so bile srednje in statistično značilne ($r = 0,602$; $p = 0,018$). Zaključek: Med relativno kratko hospitalno rehabilitacijo so bolni-

ki po prebolelem klopnem meningoencefaloradikulomielitisu dosegli klinično pomembno in statistično značilno izboljšanje dejavnosti.

Ključne besede: klopi meningoencefaloradikulomielitis, rehabilitacija, izid

Rehabilitation of Tick-borne meningoencephaloradiculomyelitis patients

Introduction: Tick-borne meningoencephaloradiculomyelitis is an RNA-viral infection, with severe acute clinical course and possible severe long term activity limitations of patients. Comprehensive rehabilitation is therefore often required. The aim of our study was to assess rehabilitation outcome in these patients. **Methods:** 15 patients with meningoencephaloradiculomyelitis, aged 56.1 years on average (SD 10.8, range 27-73 years), were included in the study. Activity was assessed using the Functional Independence Measure (FIM). Assessment was performed at admission and at discharge. Ratings of FIM at admission and at discharge were compared using a t-test for paired samples. Correlations between patients' age, time from disease onset, duration of rehabilitation and the improvement in FIM was assessed using Pearson's correlation coefficient. **Results:** Patients were admitted to our Institute on average 3 months after disease onset (SD 2.2 months, range 1-8 months). The rehabilitation lasted for 59.4 days on average (SD 34.6, range 25-123 days). At admission, moderate activity limitations were present in patients, with average motor FIM score 55.5 (SD 27.5, range 13-89) and no deficits in cognitive FIM. Clinically important improvements in patients' activities were achieved: motor FIM score improved for 19.4 on average (SD 16.8, range 0-54). The improvement was statistically significant ($p < 0.001$). Moderate and statistically significant correlation was observed between the improvement in patients' activities and duration of rehabilitation ($r = 0.602$, $p = 0.018$). **Conclusion:** Clinically important and statistically significant improvements regarding activities were achieved in tick-borne meningoencephaloradiculomyelitis patients during relatively short inpatient rehabilitation.

Key words: Tick-borne meningoencephaloradiculomyelitis, rehabilitation, outcome