Background
Stroke unit care is now accepted as an effective service model for hospital care, but the effectiveness of outpatient services is less certain. This review focuses on therapy-based rehabilitation services (defined as input from occupational therapy, physiotherapy, or a multidisciplinary team) targeted at stroke patients living at home.

Objectives
To assess the effects of therapy-based rehabilitation services targeted toward stroke patient resident in the community within 1 year of stroke onset or discharge from hospital following stroke.

Methods

We considered all unconfounded, truly randomized controlled trials of stroke patients resident in the community receiving a therapy service intervention, which was compared with conventional care (ie, normal practice or no routine intervention). Two reviewers independently selected trials, extracted data, and assessed trial quality.

Results
A total of 27 trials were identified by November 2001 of which 10 did not meet the inclusion criteria. Three trials are not yet completed, and the remaining 14 contained outcome information on a total of 1617 patients. Losses to follow-up were small (138 patients; 8.5%).

Patients allocated therapy-based rehabilitation services were less likely to deteriorate in ability to perform activities of daily living (odds ratio 0.72; 95% CI 0.57 to 0.92; \(P=0.009\)) and increased their ability to perform personal activities of daily living (standardized mean difference 0.14; 95% CI 0.02 to 0.25; \(P=0.02\)). These findings were not substantially altered if analyses were restricted to trials that described a clearly concealed randomization process and unequivocally blinded final outcome assessment.

Reviewer’s Conclusions
Stroke patients living at home who received input from a therapy-based rehabilitation service were less likely to experience deterioration in their ability to perform activities of daily living. The absolute risk of deteriorating in ability to perform activities of daily living was 7 per 100 patients allocated therapy-based rehabilitation. However, interpreting and implementing these results raise a number of challenges. Further research is needed to define the most effective interventions, their economic benefit, and the most appropriate level of service delivery.
Therapy-Based Rehabilitation for Stroke Patients Living at Home
Lynn Legg and Peter Langhorne

Stroke. 2004;35:1022; originally published online February 26, 2004;
doi: 10.1161/01.STR.0000121043.21973.9F
Stroke is published by the American Heart Association, 7272 Greenville Avenue, Dallas, TX 75231
Copyright © 2004 American Heart Association, Inc. All rights reserved.
Print ISSN: 0039-2499. Online ISSN: 1524-4628

The online version of this article, along with updated information and services, is located on the
World Wide Web at:
http://stroke.ahajournals.org/content/35/4/1022

Permissions: Requests for permissions to reproduce figures, tables, or portions of articles originally published in Stroke can be obtained via RightsLink, a service of the Copyright Clearance Center, not the Editorial Office. Once the online version of the published article for which permission is being requested is located, click Request Permissions in the middle column of the Web page under Services. Further information about this process is available in the Permissions and Rights Question and Answer document.

Reprints: Information about reprints can be found online at:
http://www.lww.com/reprints

Subscriptions: Information about subscribing to Stroke is online at:
http://stroke.ahajournals.org/subscriptions/