Response to Letter by Lord and Rochester

Response:

We thank Drs Lord and Rochester for their interest and comments regarding our study results. We agree that gait velocity and gait itself are complex in nature with many variables contributing to gait velocity classifications and community ambulation. Richards et al previously reported that poststroke self-selected gait velocity are reliable and valid measures of functional walking status. We used the classifications which Perry et al described to assist in classifying gait velocity, and used the domains of the Stroke Impact Scale to associate change in gait velocity with change in community ambulation. However, we did not intend to suggest that gait velocity is the sole determinant of community ambulation, but that it can serve as a simple yet valid measure of community ambulation.

In 2005, Drs Lord and Rochester indicated a need to further study self-report of gait and to further advance the development of a theoretical framework for measuring community ambulation. Gait velocity is likely part of that framework and should not be ignored. Community ambulation is certainly affected by other factors including cognition, depression, and fear of falling. Gait velocity is thus one of many important and measurable factors related to enhanced community ambulation; our work was intended to provide evidence that increases in gait velocity thresholds can provide useful guidelines to stroke survivors, clinicians, and caregivers and can be related to enhanced community ambulation.

Disclosures

None.
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