

## REHABILITATION

Sunday, March 29, 2020

**07:30-08:30** E-Poster Presentations (Exhibition Area)

**08:30-10:10** SECTION TITLE

Chairs: **Sadagat Huseyova**, Azerbaijan | **Osman Sinanovic**, Bosnia and Herzegovina

**08:30-09:20** **Neurorehabilitation in progressive neurological disorders.**

*Capsule: Neurorehabilitation programs improve functions and wellbeing of people with progressive neurological disorders at least for a period of time. How much of rehabilitation is enough and when to stop?*

08:30-08:40 Host: **Ales Praznikar**, UK

08:40-08:55 ASIA:

08:55-09:10 Frankel: **Abraham Ohry**, Israel

09:10-09:20 Discussion and rebuttals

**09:20-10:10** **Is physical therapy useful in PD?**

*Capsule: Comprehensive treatment approach toward patients with PD includes physical therapy. There is some evidence that intensive physical therapy increases the brain-derived neurotrophic factor (BDNF) levels and improves PD signs in patients in early stages of the disease. Even persons with moderately advanced PD adapt to high intensity exercise training with reported favorable changes in skeletal muscle at the cellular and subcellular levels that are associated with improvements in motor function, physical capacity, and fatigue perception. Is this enough to recommend physical therapy in all PD patients?*

09:20-09:30 Host: **Dafin Muresanu**, Romania

09:30-09:45 Yes: **Abraham Ohry**, Israel

09:45-10:00 No:

10:00-10:10 Discussion and rebuttals

**10:10-10:25** **Coffee Break**

**10:25-12:55** SECTION TITLE

Chairs:

**10:25-11:15** **Upper limb recovery in stroke patients – standalone or combined with pharmacological support?**

*Capsule: Experience in neurorehabilitation has shown that the pattern of upper limb functional recovery after acute ischemic stroke can be modified by intensive task-oriented, learning-dependent recovery strategies. Nevertheless, the overall recovery potential of the individual is mainly influenced by the intrinsic recovery mechanisms of the brain. Are physical therapy and early mobilization enough to stimulate endogenous neurorecovery pathways? Can pharmacological intervention enhance upper limb neurorehabilitation, contributing to an improved outcome relative to the patient's overall recovery potential?*

10:25-10:35 Host:

10:35-10:50 With support: **Dafin Muresanu**, Romania

10:50-11:05 Standalone:

11:05-11:15 Discussion and rebuttals

**11:15-12:05** **Is neuroimaging helpful during rehabilitation from stroke?**

*Capsule: When patients with cerebral stroke are admitted to the departments of rehabilitation medicine, the general approach is a comprehensive one. The multi-disciplinary assessment is done by all members of the team, and the "tailor made" treatment program tries to fit the proper one for every patient. Along the process, various neuroimaging are carried out. Neurologists, rehabilitation physicians, neuro-psychologists and neuro-radiologists, try to compare the radiological findings with the clinical ones. But, in fact, the rehab-process continuous in spite of frequent discrepancies. When there is no evidence of clinical deterioration, or rather, continuous improvement, there is no need for neuro-imaging.-*

11:15-11:25 Host:

11:25-11:40 Yes:

11:40-11:55 No: **Ales Praznikar**, UK

11:55-12:05 Discussion and rebuttals