

Prospettive della riabilitazione nelle malattie respiratorie



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DEFINIZIONE

La **Riabilitazione pneumologica** è un insieme multidimensionale di servizi diretti a persone con malattie polmonari e alle loro famiglie, di solito da parte di un **team interdisciplinare** di specialisti con lo scopo di raggiungere e mantenere il massimo livello di indipendenza di **attività nella comunità**

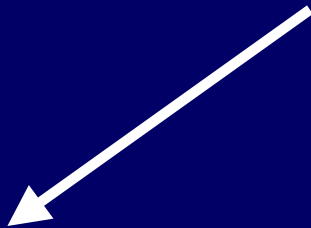
**TRATTAMENTO
FARMACOLOGICO**



RIDUZIONE SINTOMI



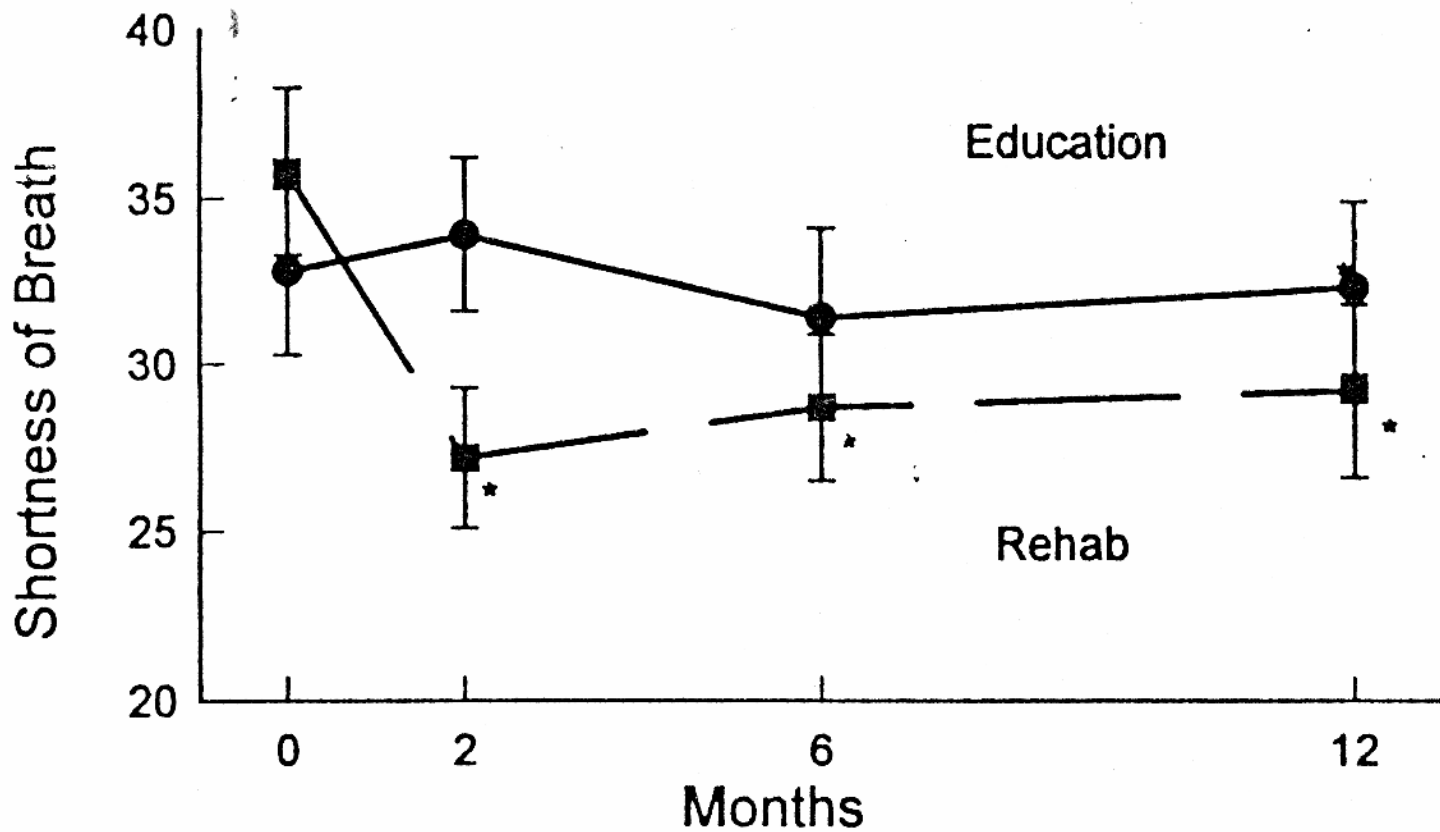
SUCCESSO PARZIALE

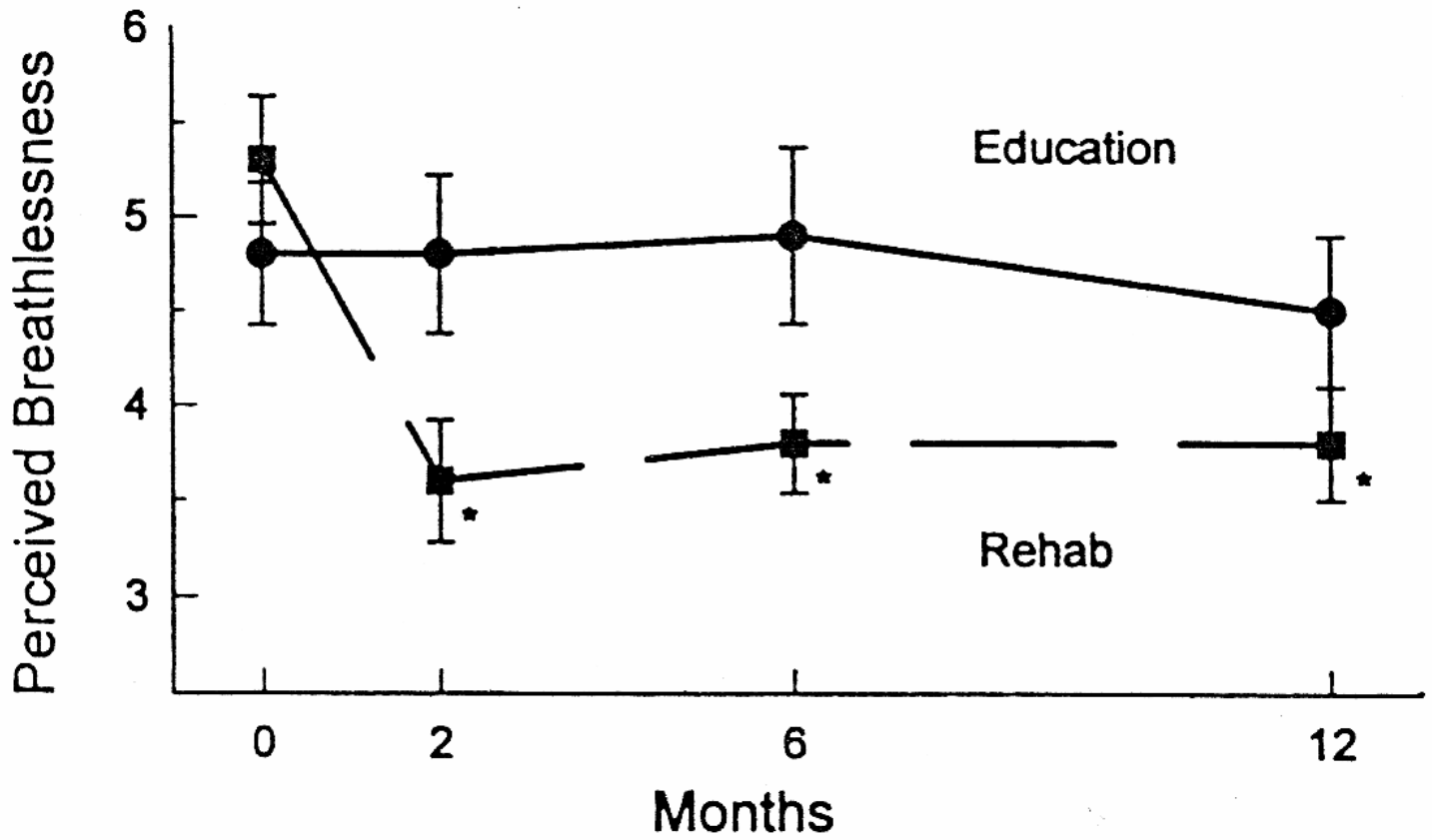


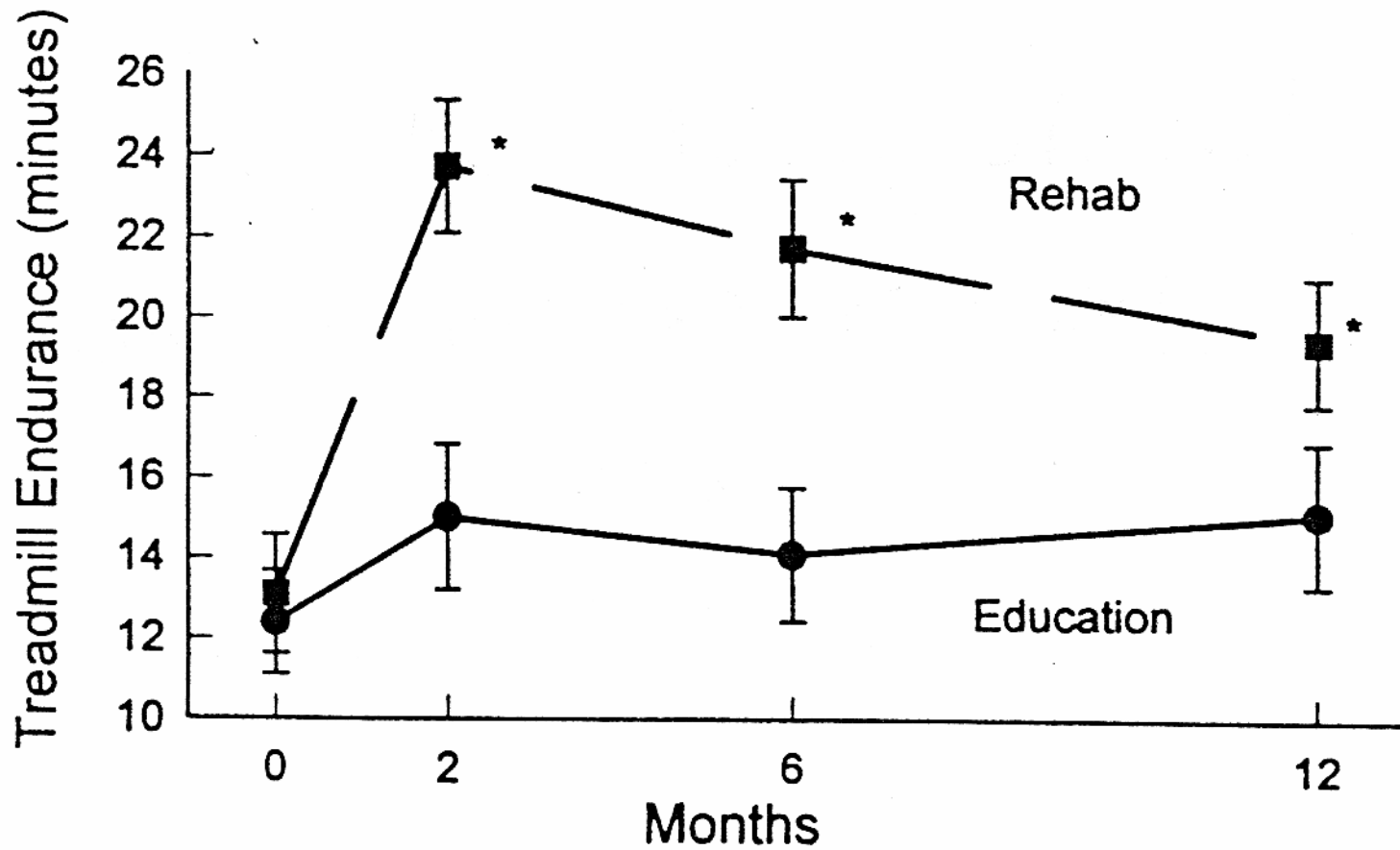
**RIABILITAZIONE
PNEUMOLOGICA**

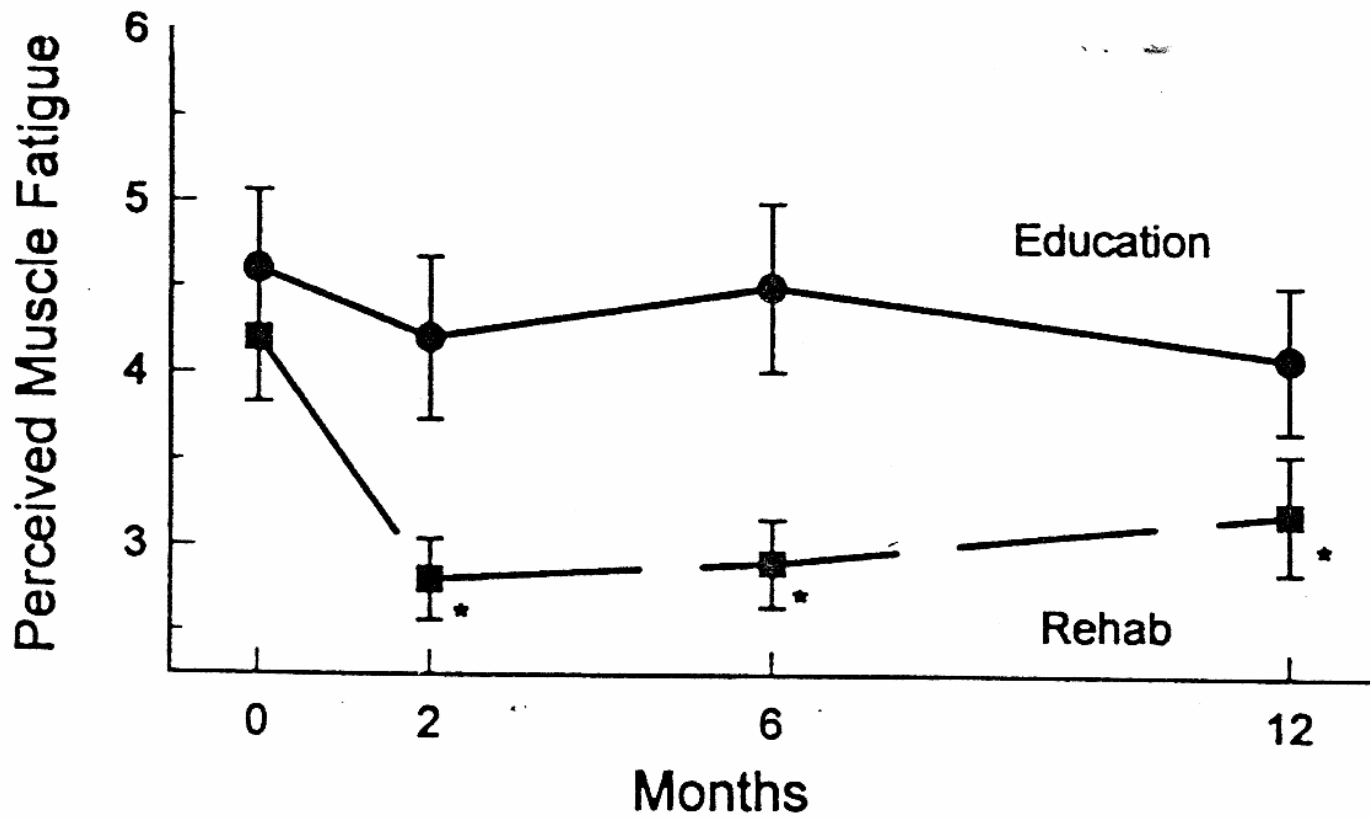


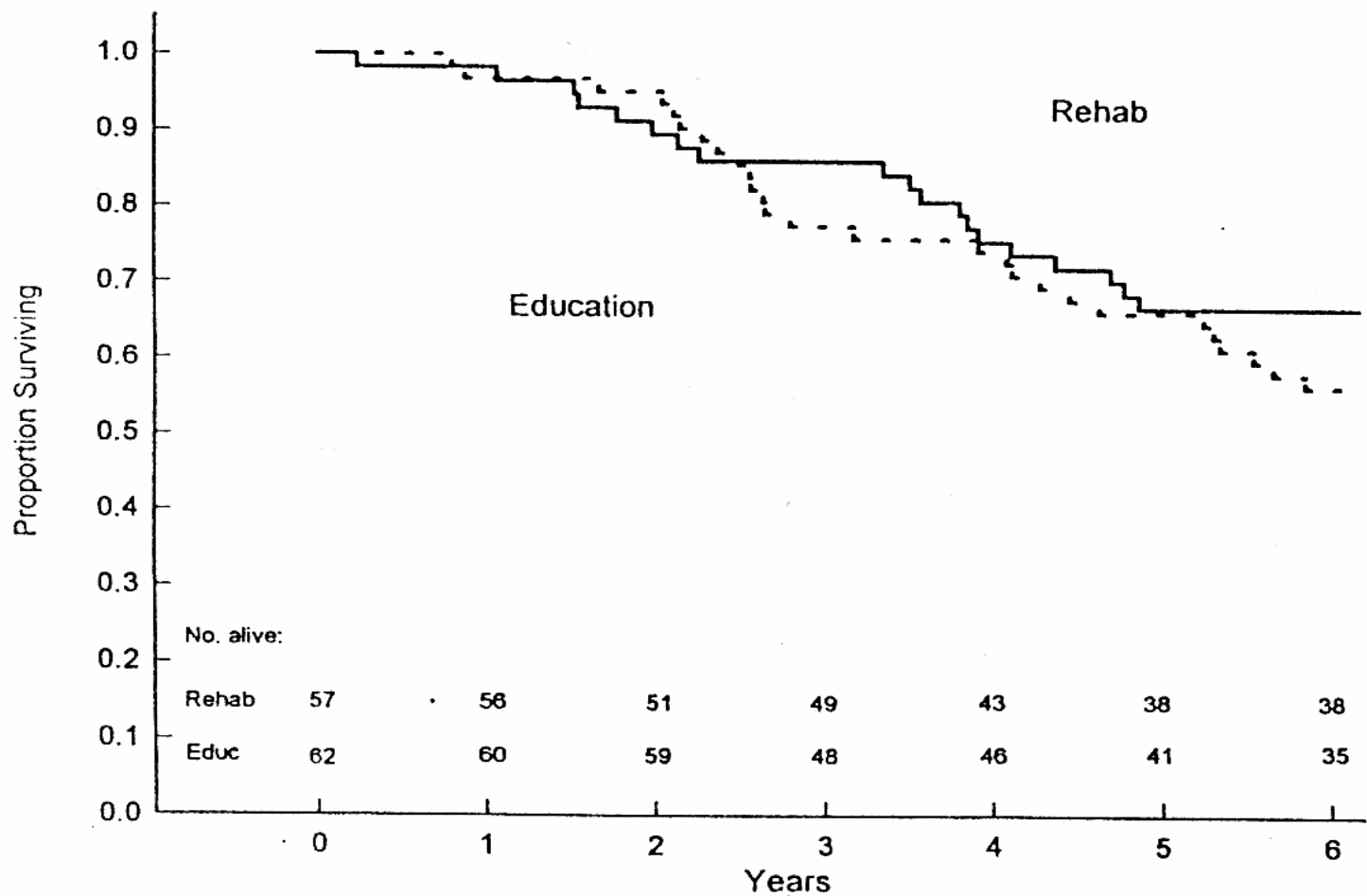
RIDUZIONE SINTOMI











Results at 1 year of outpatient multidisciplinary pulmonary rehabilitation: a randomised controlled trial

Griffiths TL, Burr ML, Campbell IA, Lewis-Jenkins V et al.

Lancet 2000; 29:362-368

	<u>Control group</u>	<u>Rehabilitation group</u>	<u>p*</u>
All patients admitted			
Total	41	40	0.98†
Hospital admissions			
Respiratory illness	1.9 (1.4)	1.4 (1.3)	0.044
All causes	2.2 (1.5)	1.7 (1.1)	0.048
Days spent in hospital			
Respiratory illness	18.1 (19.3)	9.4 (10.2)	0.021
All causes	21.0 (20.7)	10.4 (9.7)	0.022
Per admission	9.0 (7.6)	6.0 (3.4)	0.100

Interpretation

For patients chronically disabled by obstructive pulmonary diseases, an intensive, multidisciplinary, outpatient programme of **rehabilitation** is an **effective intervention**, in the short term and the long term, that **decreases use health services**

OUTCOME

RISULTATI ATTESI

Dispnea	+++
Tolleranza all'esercizio fisico	+++
Consumo di risorse sanitari	++
Sopravvivenza	?
Funzione Respiratoria	--

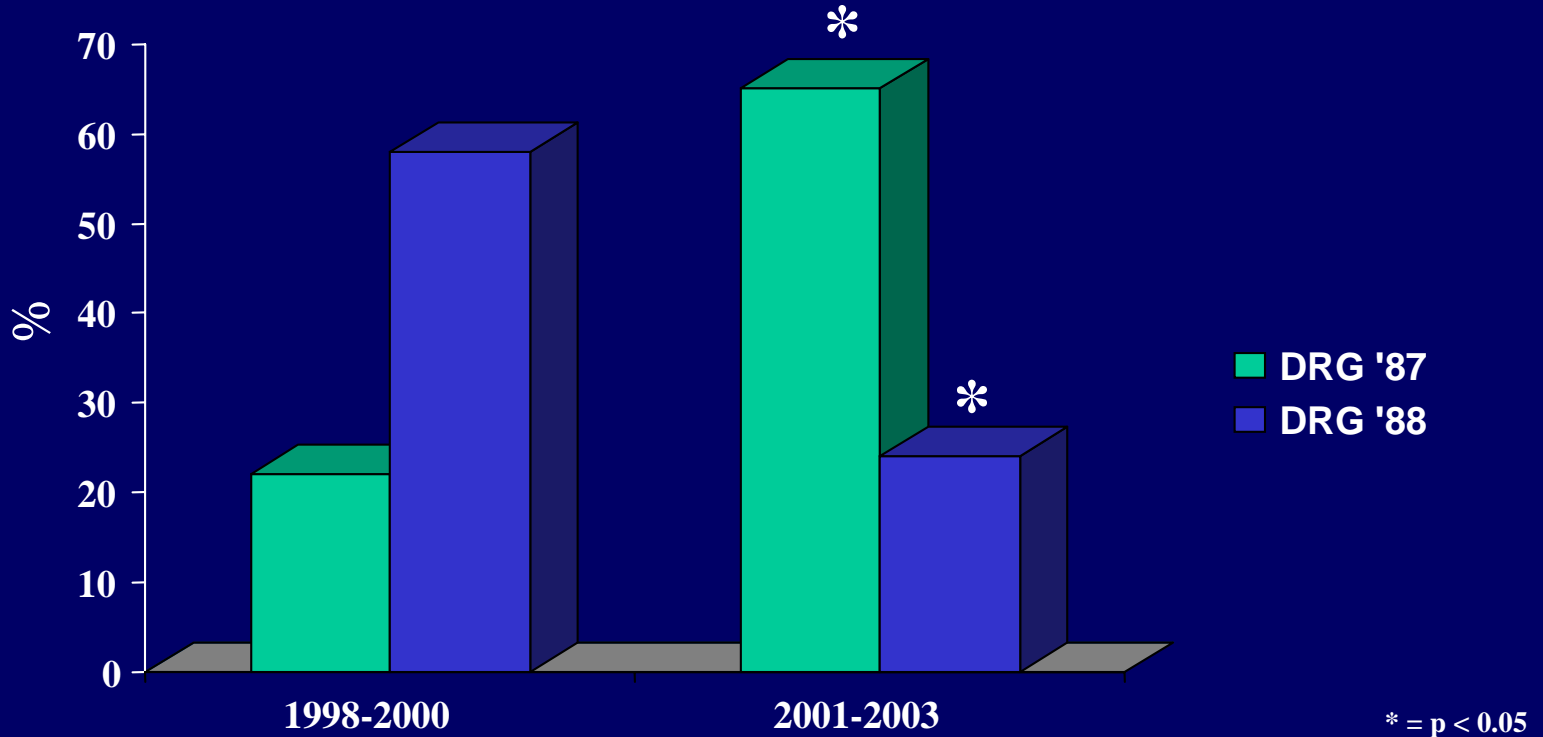
Riabilitazione nell'IRC

?

**Riabilitazione come continuità
assistenziale**

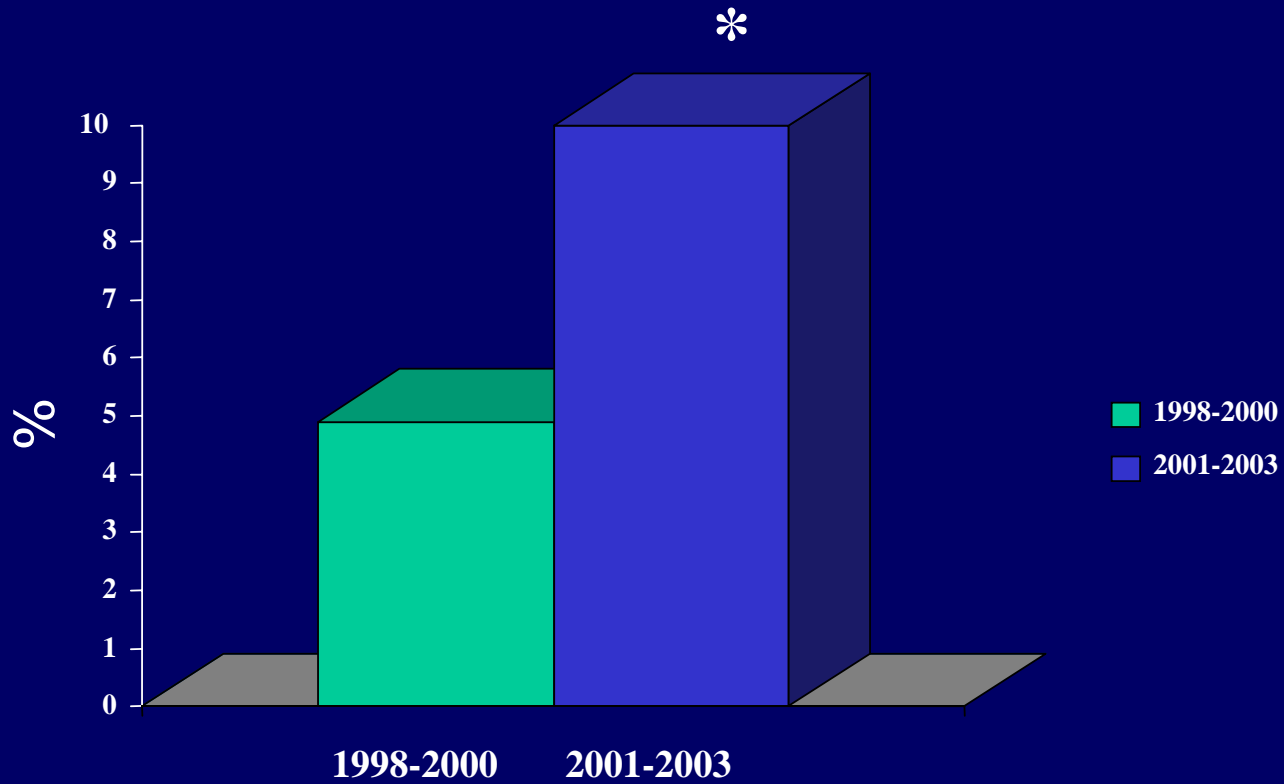
Analisi DRG

(DRG 87 – DRG 88)



Analisi DRG

(DRG 475)



* = $p < 0.05$



*Indicatori di risultato di un Intervento Riabilitativo intensivo in
pazienti affetti da patologie polmonari*

(Ricerca Finalizzata 2004-2006 – Min. della sal PR7)

***N° Pazienti
1047***

720 Pz. PaO₂>60mmHg

327 Pz. PaO₂<60 mmHg

BPCO

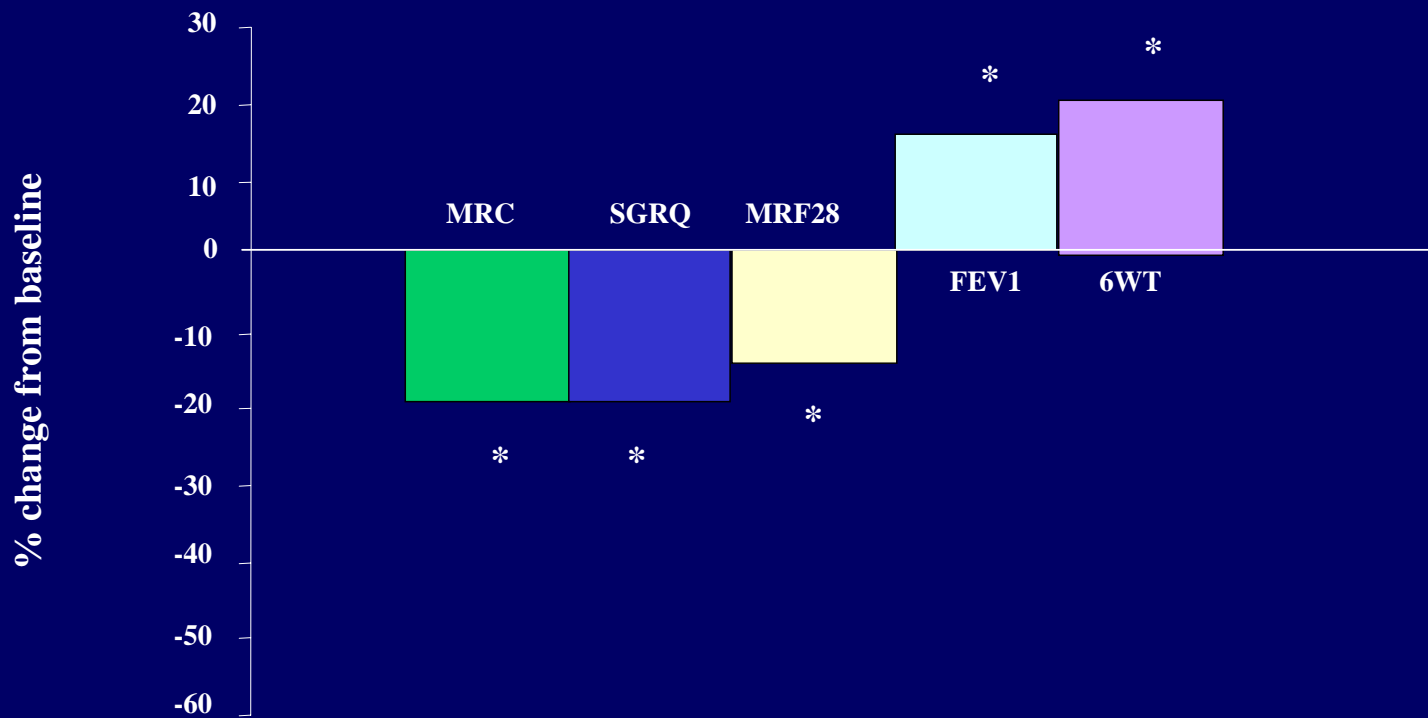
Misure di Outcome

- Valutazione Clinica***
- Emogasanalisi***
- Funzione Respiratoria***
- Test del cammino***
- Dispnea (BDI-TDI)***
- MIP-MEP***

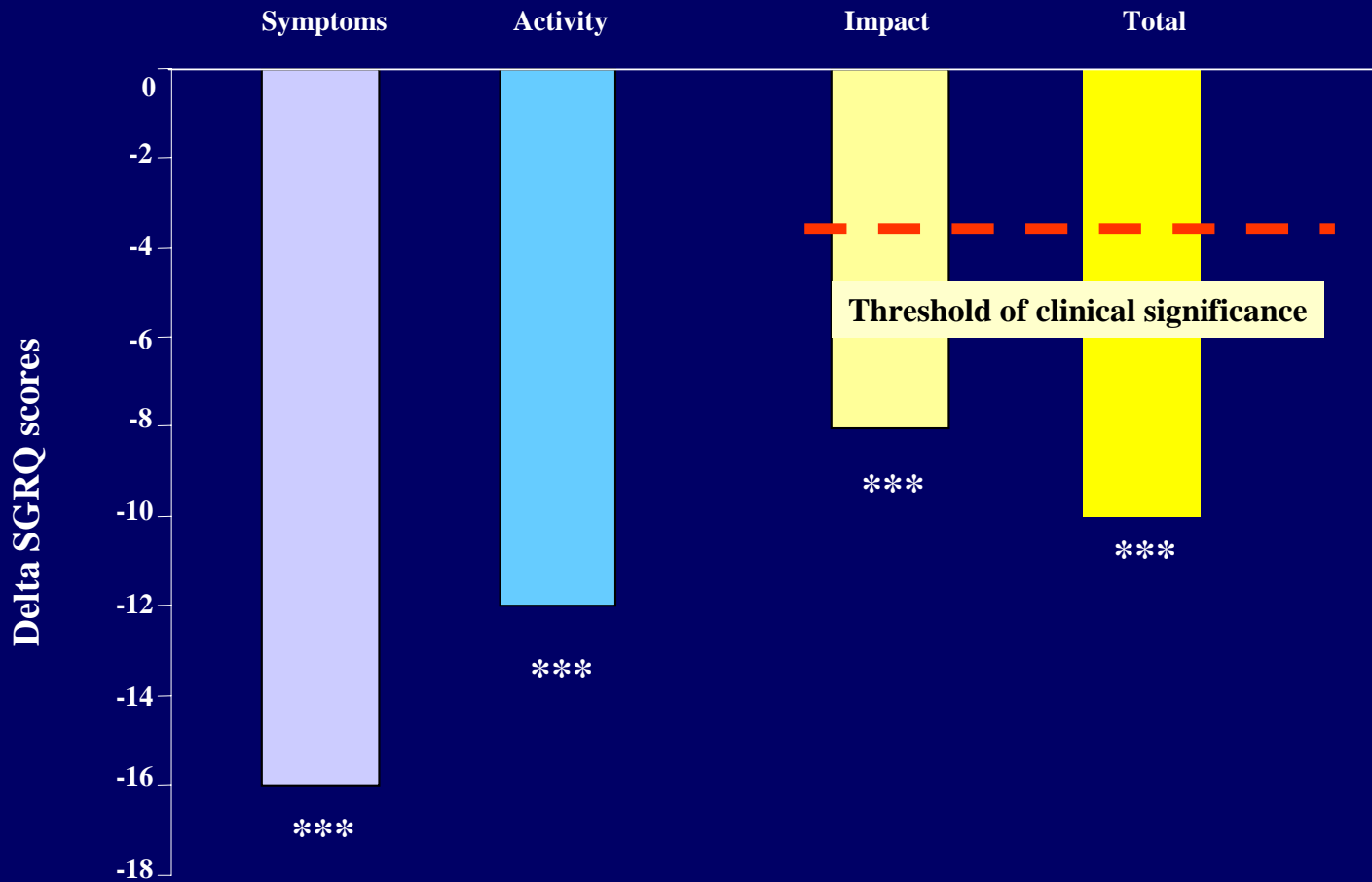
IRC

***St. George Respiratory
Questionnaire***

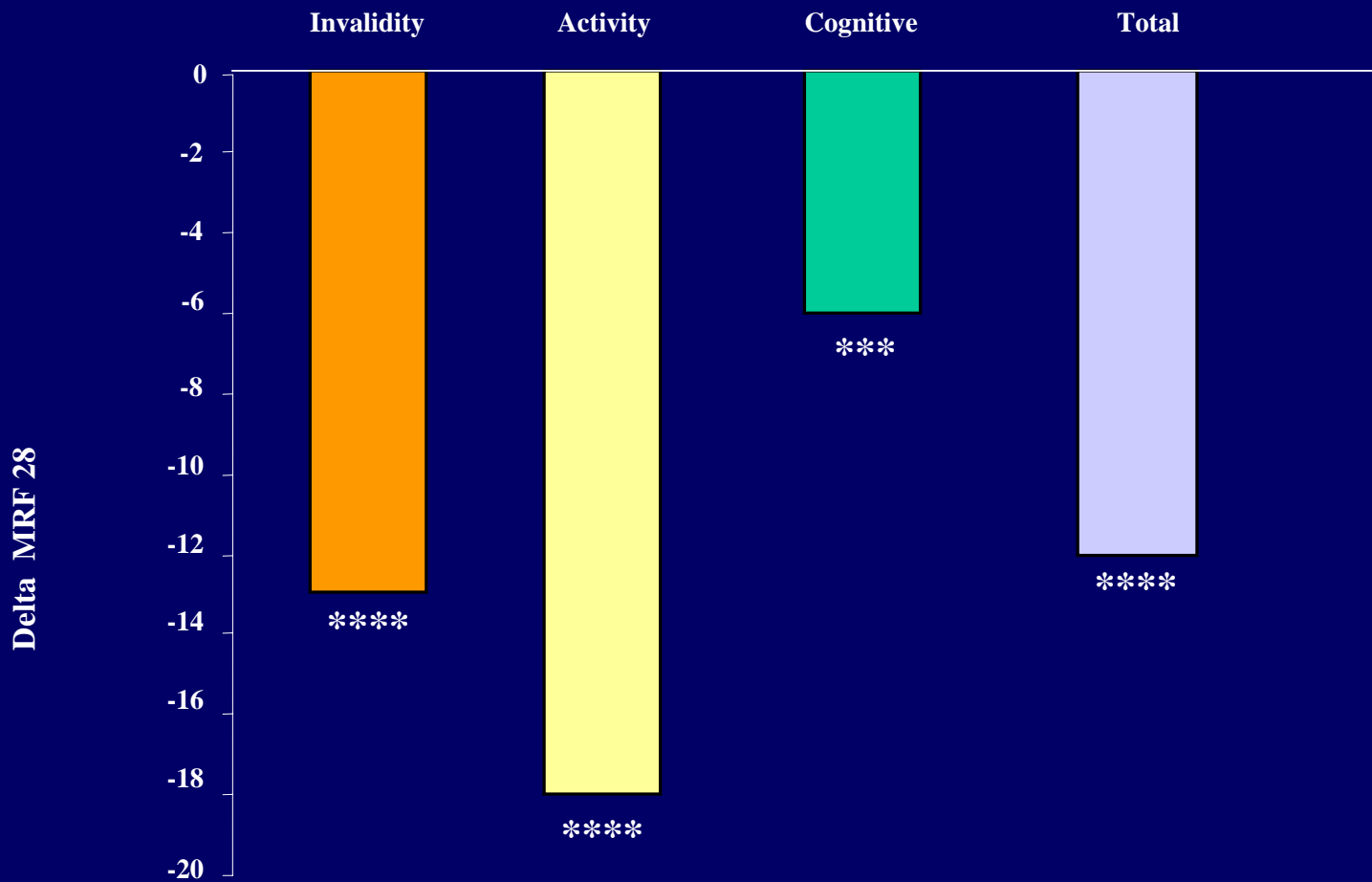
***Maugeri Foundation
Respiratory Failure
Questionnaire (MRF-28)***



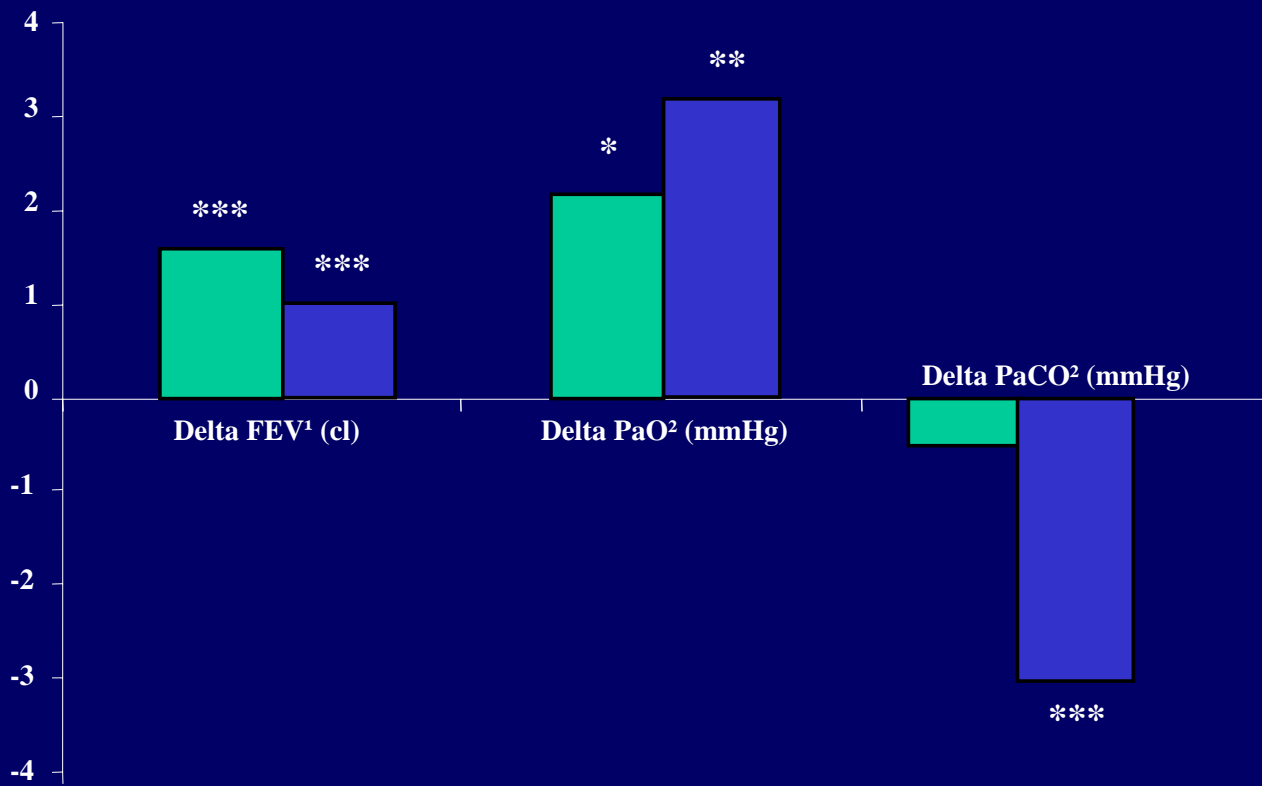
* p < 0.001



Versus baseline
*** p = 0.001



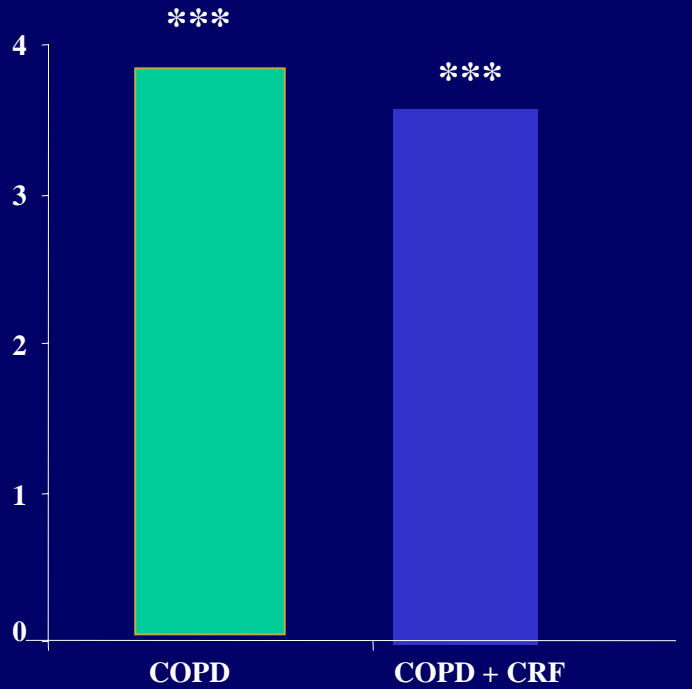
Versus baseline
*** p = 0.001
****p < 0.0001



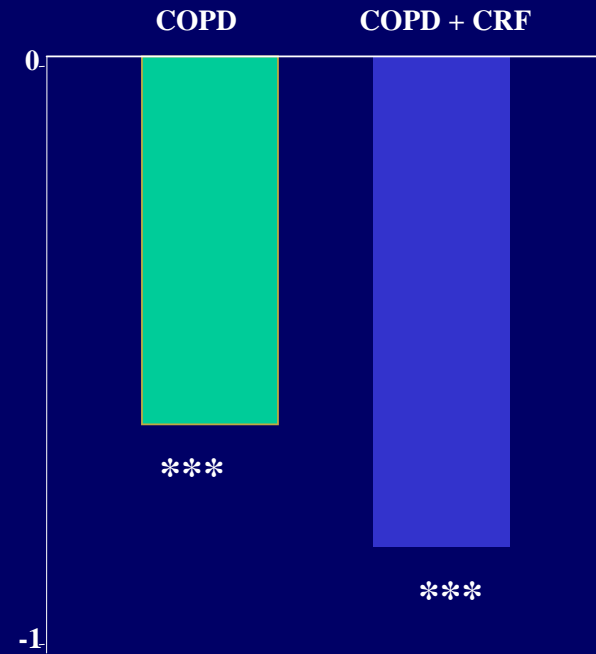
■ COPD
■ CRF

Versus baseline
* p = 0.05
** p = 0.01
*** p = 0.001

TDI (units)



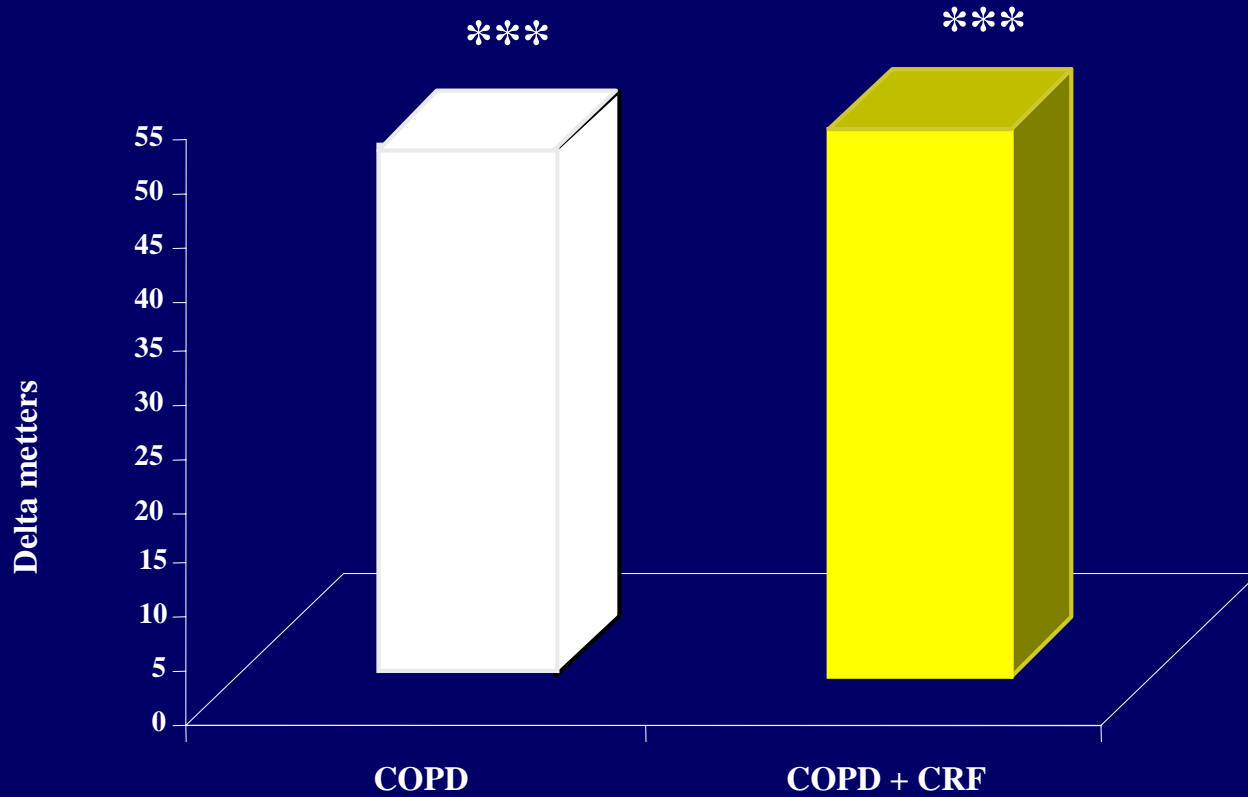
Delta MRC (units)



Versus baseline

***** p = 0.001**

WT6min



Versus baseline
*** p = 0.001

Pulmonary Rehabilitation of Patients with Chronic Respiratory Failure (CRF) Due to COPD is as Effective as in COPD Patients without CRF

Carone M et al; AJRCCM 2004; 169(7):A891

We conclude that rehabilitation in patients with COPD and CRF is **as effective as in COPD **patients without CRF** and that it is possible to use the same outcomes measures, i.e. dyspnea, exercise capacity, and QoL**

Riabilitazione nell'IRC

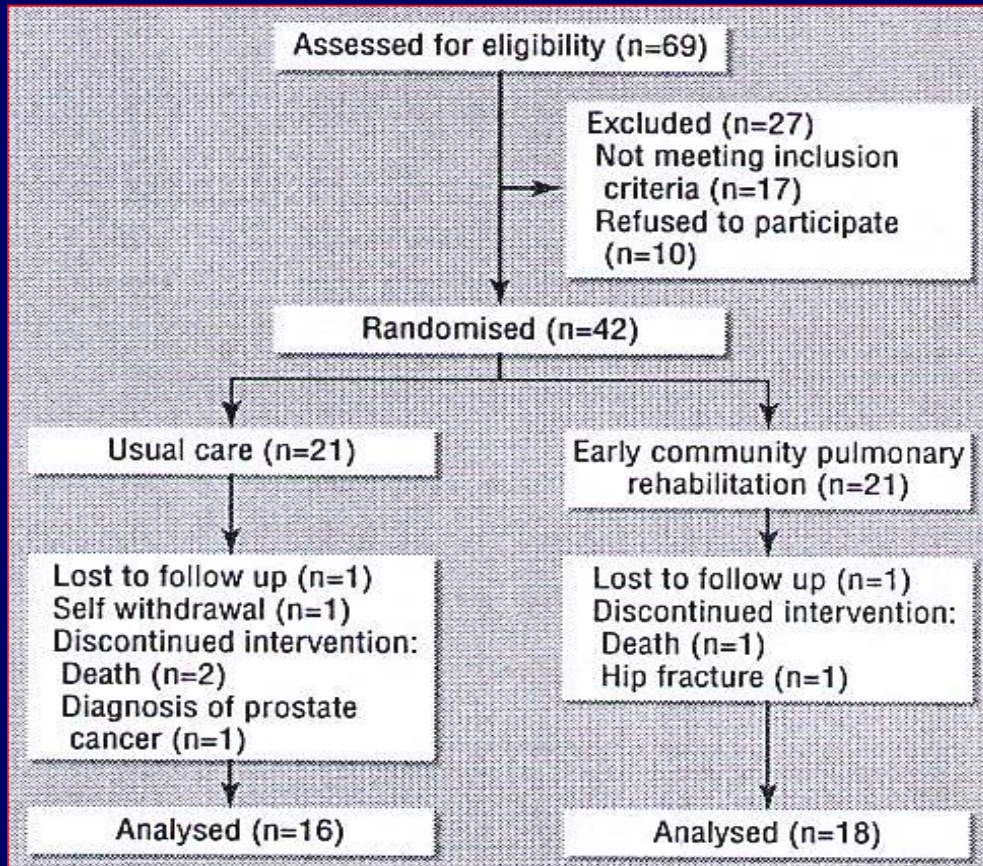
?

**Riabilitazione come continuità
assistenziale**

Perspective on Pulmonary Rehabilitation program

Ries AL et al.

J Cardiopulmonary Rehabilitation 2003; 23:78-83



Perspective on Pulmonary Rehabilitation program

Ries AL et al.

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What is already known on this topic

Hospital admission for acute exacerbations of chronic obstructive pulmonary disease (COPD) is an enormous financial burden to the NHS

Pulmonary rehabilitation is an effective, non-pharmacological intervention in the management of stable patients with COPD, and the recent guidelines from the National Institute for Clinical Excellence recommend that it should be made available to all patients who would benefit

What this study adds

Early pulmonary rehabilitation, in the recovery period after hospital discharge after an admission for an acute exacerbation of COPD, leads to significant improvements in functional capacity and quality of life at three months compared with usual care



Influenza di un intervento riabilitativo precoce in pazienti con Insufficienza Respiratoria

Dipartimento di Pneumologia Riabilitativa

Disegno

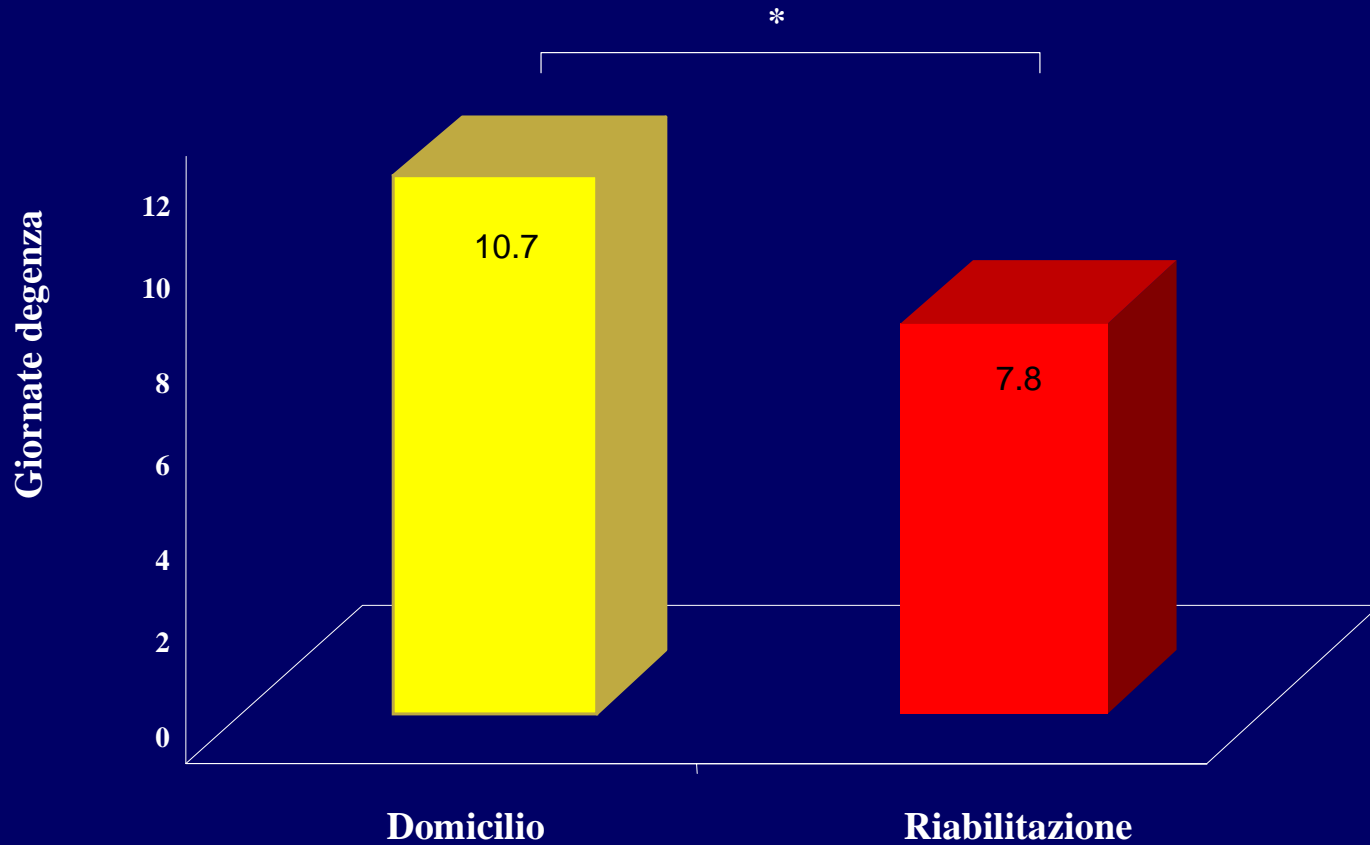
Studio pilota, randomizzato e controllato

U.O. Pneumologia – Cassano Murge (Resp. V. Cuomo)

Obiettivo

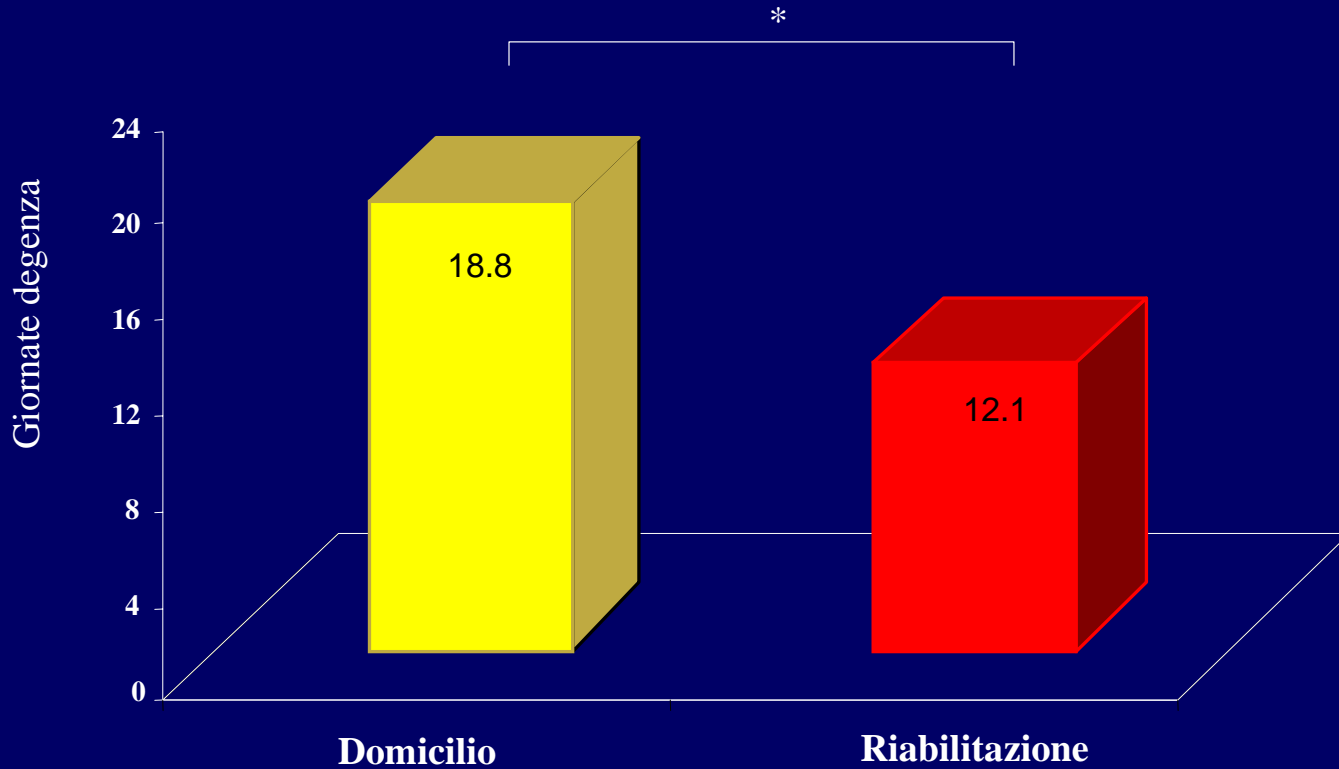
Valutare se la continuità assistenziale (acuti – riabilitazione) permette una riduzione della degenza del ricovero per acuti

DRG 87



* p < 0.05

DRG 475



* p < 0.05

CONCLUSIONI

- **La riabilitazione permette un miglioramento dei sintomi respiratori e delle risorse sanitarie**
- **Non ci sono dati consistenti sulla storia naturale della malattia e sulla sopravvivenza**
- **La Riabilitazione respiratoria è efficace anche nella IRC e si possono utilizzare gli stessi indicatori di risultato**
- **La Riabilitazione pneumologica come continuità assistenziale sembra ridurre la degenza media dei ricoveri per acuti**

OSPEDALE

Telemedicina



MEDICINA GENERALE

RIABILITAZIONE

