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Guillain-Barre Syndrome – rehabilitation outcome, residual deficits and requirement of lower limb orthosis for locomotion at 1 year follow-up






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Abstract

Objective. To analyse long-term functional recovery, deficits and requirement of lower limb orthosis (LLO) for locomotion in patients with Guillain-Barre Syndrome (GBS).

Design. Prospective longitudinal follow-up study.

Setting. Neurological Rehabilitation unit of university hospital.

Patients and Method. Sixty-nine patients of GBS admitted for inpatient rehabilitation. Thirty-five patients (M:F, 19:16) reporting after 1 year follow-up (50.72%) were included in study (between September 2005 and July 2009). Their residual deficits and requirement of LLO were recorded and analysed.

Results. Age ranged from 4 to 65 year (29.74 ± 15.75). Twenty-seven patients had typical GBS and eight patients had acute motor axonal neuropathy variant. Twenty-eight patients (80%) had neuropathic pain needing medication with 11 required more than one drug. Twenty-one patients (60%) had foot drop and advised ankle-foot orthosis-AFO (20 bilateral AFO). Thirty patients (85.71%) needed assistive devices also for locomotion at discharge. After 1 year, foot drop was still present in 12 patients (34.28%) using orthosis. Modified Barthel Index scores, Modified Rankin Scale and Hughes Disability Scale were used to assess functional disabilities. Significant recovery was observed at the time of discharge and after 1 year ($p < 0.001$ each).

Conclusions. Patients with GBS continue to show significant functional recovery for long period. They have residual deficits even after 1 year with requirement of orthosis in large number of patients.

Keywords: *Guillain Barre Syndrome, residual deficits, lower limb, orthosis*

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