

# NATIONAL INSTITUTE FOR HEALTH AND CLINICAL EXCELLENCE

## SCOPE

### **1 Guideline title**

Rehabilitation after stroke

#### **1.1 Short title**

Stroke rehabilitation

### **2 The remit**

The Department of Health has asked NICE 'to produce a joint clinical and social care guideline on the long-term rehabilitation and support of stroke patients'.

### **3 Clinical need for the guideline**

#### **3.1 Epidemiology**

- a) Stroke is a major healthcare problem in the UK. It can have a devastating and lasting impact on the lives of people and their carers. Approximately 110,000 people in England have a first or recurrent stroke each year, and 25% of strokes occur in people younger than 65 years. The risk of recurrent stroke within 5 years of a first stroke is between 30 and 40%.
- b) Most people survive a first stroke, often with significant morbidity. There are more than 900,000 people living in England who have had a stroke. It is the single largest cause of disability in England and approximately 300,000 people are living with moderate to severe disability as a result.
- c) Stroke is the third largest cause of death in England and accounts for 11% of all deaths in England and Wales.

### **3.2 Current practice**

- a) Many people have a high burden of disability after stroke and much of post-stroke care relies on rehabilitation interventions. Patients are given an initial rehabilitation assessment soon after a stroke, once they have stabilised. Evidence shows that starting rehabilitation early is associated with reduced disability and improved prognosis. Assessment is multidisciplinary, involving a range of healthcare professionals including physicians, physiotherapists, occupational therapists, psychologists and speech and language therapists.
  
- b) Stroke rehabilitation is a package of care determined by the level of disability. It is a goal-orientated process aimed at enabling a person with impairment to reach optimal physical, cognitive, emotional, communicative and/or social functioning. Exercise therapies are used to improve balance, body position, limb movement, limb weakness and walking. Orthoses and functional electrical stimulation (FES) are used to improve walking. There are other therapies for improving physical function such as mental imagery and trunk restraint. Deficits in cognitive function are managed with compensatory interventions specific to the impairment. Speech and language therapies are used to treat aphasia. Visual impairments are managed with compensatory interventions. There is no absolute end to recovery after stroke but most improvement occurs within 6 months, when functioning may have returned to prestroke levels or stabilised.
  
- c) Much of the evidence supporting stroke rehabilitation has been based on evaluating the multidisciplinary approach, or on the effect of a particular discipline. There is a need to examine the clinical and cost effectiveness of individual components of treatment in stroke rehabilitation.

## **4 The guideline**

The guideline development process is described in detail on the NICE website (see section 6, 'Further information').

This scope defines what the guideline will (and will not) examine, and what the guideline developers will consider. The scope is based on the referral from the Department of Health.

The areas that will be addressed by the guideline are described in the following sections.

### **4.1 *Population***

#### **4.1.1 Groups that will be covered**

- a) Adults and young people 16 years and older who have had a stroke and who are in the subacute (recovery) phase.
- b) Subgroups: black and ethnic minorities.

#### **4.1.2 Groups that will not be covered**

- a) Infants and children under 16 years.
- b) People who have had a transient ischaemic attack.

### **4.2 *Healthcare setting***

- a) Primary and secondary care and other settings where NHS services are provided.

## **4.3 Clinical management**

### **4.3.1 Key clinical issues that will be covered**

- a) Interventions used within the primary and secondary care setting, including:
- Exercise therapies to manage gait and balance and upper limb movement, for example strength training, repetitive task training and aerobic fitness training.
  - Orthoses and FES for upper limbs.
  - Other therapies to improve physical function, for example mental imagery, treadmill training, body-weight-supported treadmill training, constraint-induced movement therapy, trunk restraint, and gait trainers for lower limbs.
  - Cognitive function interventions to improve memory, attention, orientation, spatial awareness and/or neglect.
  - Speech and language therapies including constraint-induced aphasia therapy.
  - Eye movement therapy for visual field loss.
  - Management of dysphagia.
  - Support in carrying out activities of daily living.
  - Support for patients and carers.

### **4.3.2 Clinical issues that will not be covered**

- a) Primary prevention of stroke.
- b) Assessment and management of acute stroke.

## **4.4 Main outcomes**

- a) Physical function, communication and activities of daily living outcomes, including assessment using:
- Barthel Index
  - Nottingham Extended Activities of Daily Living (EADL) scale

- 10-metre timed walk, 6-minute walk and the timed 'up and go' test
- General Health Questionnaire (GHQ)
- Hospital Anxiety and Depression Scale (HADS)
- SF-36
- EuroQual.

#### **4.5      *Economic aspects***

Developers will take into account both clinical and cost effectiveness when making recommendations involving a choice between alternative interventions. A review of the economic evidence will be conducted and analyses will be carried out as appropriate. The preferred unit of effectiveness is the quality-adjusted life year (QALY), and the costs considered will usually only be from an NHS and personal social services (PSS) perspective. Further detail on the methods can be found in 'The guidelines manual' (see 'Further information').

#### **4.6      *Status***

##### **4.6.1    *Scope***

This is the consultation draft of the scope. The consultation dates are 28 January to 24 February 2010.

##### **4.6.2    *Timing***

The development of the guideline recommendations will begin in April 2010.

### **5          *Related NICE guidance***

#### **5.1      *Published guidance***

##### **5.1.1    *NICE guidance to be incorporated***

This guideline will incorporate the following NICE guidance.

- Depression in adults with a chronic physical health problem. NICE clinical guideline 91 (2009). Available from [www.nice.org.uk/guidance/CG91](http://www.nice.org.uk/guidance/CG91)

- Functional electrical stimulation for drop foot of central neurological origin. NICE interventional procedure guidance 278 (2009). Available from [www.nice.org.uk/guidance/IPG278](http://www.nice.org.uk/guidance/IPG278)
- Faecal incontinence. NICE clinical guideline 49 (2007). Available from [www.nice.org.uk/guidance/G49](http://www.nice.org.uk/guidance/G49)
- Nutrition support in adults. NICE clinical guideline 32 (2006). Available from [www.nice.org.uk/guidance/CG32](http://www.nice.org.uk/guidance/CG32)

### **5.1.2 Other related NICE guidance**

- Depression in adults (update). NICE clinical guideline 90 (2009). Available from [www.nice.org.uk/guidance/CG90](http://www.nice.org.uk/guidance/CG90)
- Managing long-term sickness and incapacity for work. NICE public health guidance 19 (2009). Available from [www.nice.org.uk/guidance/PH19](http://www.nice.org.uk/guidance/PH19)
- Stroke NICE clinical guideline 68 (2008). Available from [www.nice.org.uk/guidance/CG68](http://www.nice.org.uk/guidance/CG68)

## **5.2 Guidance under development**

NICE is currently developing the following related guidance (details available from the NICE website).

- Neuropathic pain – pharmacological management. NICE clinical guideline. Publication expected March 2010.
- Anxiety (partial update). NICE clinical guideline. Publication expected January 2011.

## **6 Further information**

Information on the guideline development process is provided in:

- 'How NICE clinical guidelines are developed: an overview for stakeholders' the public and the NHS'
- 'The guidelines manual'.

These are available from the NICE website ([www.nice.org.uk/GuidelinesManual](http://www.nice.org.uk/GuidelinesManual)). Information on the progress of the guideline will also be available from the NICE website ([www.nice.org.uk](http://www.nice.org.uk)).