Rehabilitation of the Amyloidosis Patient

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Purpose/Background

The Comprehensive Amyloidosis Clinic (CAC) at The Ohio State University (OSU) is a multidisciplinary clinic that allows patients to see neurology, nephrology, cardiology, hematology, and physical therapy in one 3 hour visit.

Currently, specific guidelines for the rehabilitation of amyloidosis patients have yet to be established. The Outpatient Oncology Rehabilitation department at OSU has structured specific guidelines to assess functional impairments at diagnosis and throughout treatment to improve quality of life, functional mobility and reduce the risk of decline. This study aims to assess functional limitations and rehab needs of patients with TTR amyloidosis as compared to the same age and gender normative values.

Methods

Physical Therapy Evaluation wild-type and hereditary TTR patients completed during clinic visit:

• Chart review completed by therapist
• Patient subjective information collected during the clinic visit including their functional limitations, home set up, and goals for rehab.
• Range of motion and manual muscle testing
• Timed Up and Go (TUG) Outcome score
• 30 second sit to stand
• Physical function section of the Short Form 36
• Therapist prescribed therapeutic exercise, home modifications, adaptive equipment, compression garments or further physical therapy treatment.

Conclusions

Patients with wild-type and hereditary TTR amyloidosis present with physical impairments including reduced activity tolerance, muscle weakness and impaired balance as a result of disease side effects when compared to same age and gender normative data. Therefore, their risk for falls and further functional decline increases. PT intervention is beneficial to improve patients’ physical function, quality of life, and reduce their risk of further decline. The future development of the role of physical therapy within the CAC will look to include specific cardiovascular and balance outcome tools.