

# Rehabilitation post Major Trauma

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# Rehabilitation Medicine

- Physical Medicine & Rehabilitation
- Physiatry

# Viewpoint of rehabilitation Medicine



- 31 years old lady  
Referred from advance trauma team for pre-amputation counselling

Open fracture of supracondylar right femur and distal tibia, right phalangeal fracture in March 2019 after alleged MVA

Management:

- Ilizarov external fixator insertion, removed on January 2020
- musculo-cutaneous flap at right knee







- Rehab Issues:

1. Right non functional lower limb secondary to extensive bone and soft tissue loss at knee, leg and foot, traumatic neurovascular injury
2. Complex regional pain syndrome (CRPS) at right lower limb (knee and foot)
3. Right knee extension contracture & ankle PF contracture
4. Limb length discrepancy, shortened right lower limb

## Bio-psycho-social Model of Functioning, Disability and Health

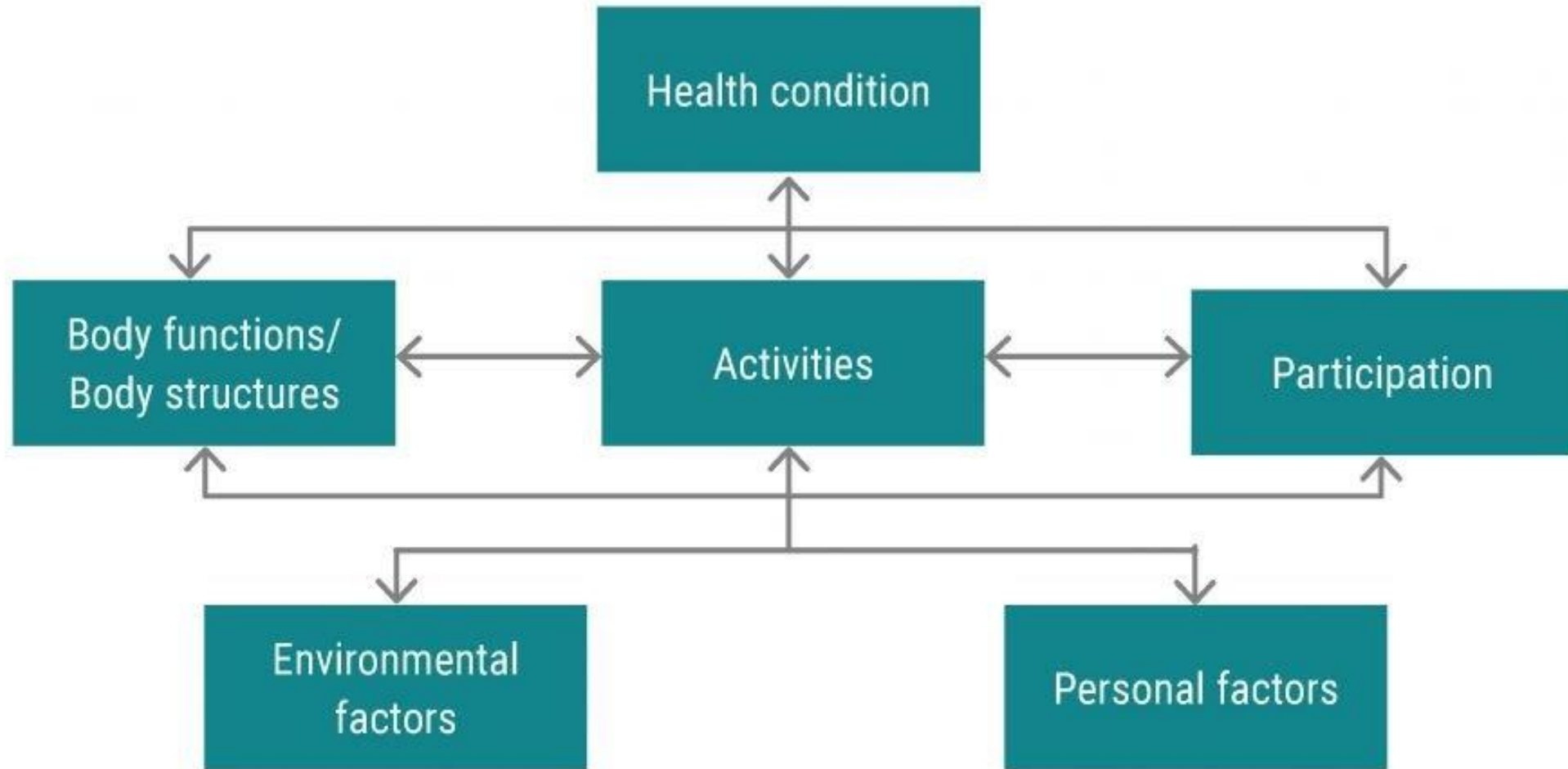


Figure 1: Bio-psycho-social model of the International Classification of Functioning, Disability and Health (ICF)



MVA March 2019:

### Body structure/ function

Severe Neuropathic pain-  
Complex regional pain  
syndrome at rt knee and  
foot: NRS 10/10

Rt knee extension  
contracture

Rt LL shortening by 5 cm

Severe osteopenia

Low mood

Personal factor:

Environment factor:

LSS done and 1st Rehab Medicine review July 2020 (combined clinic)

### Activity

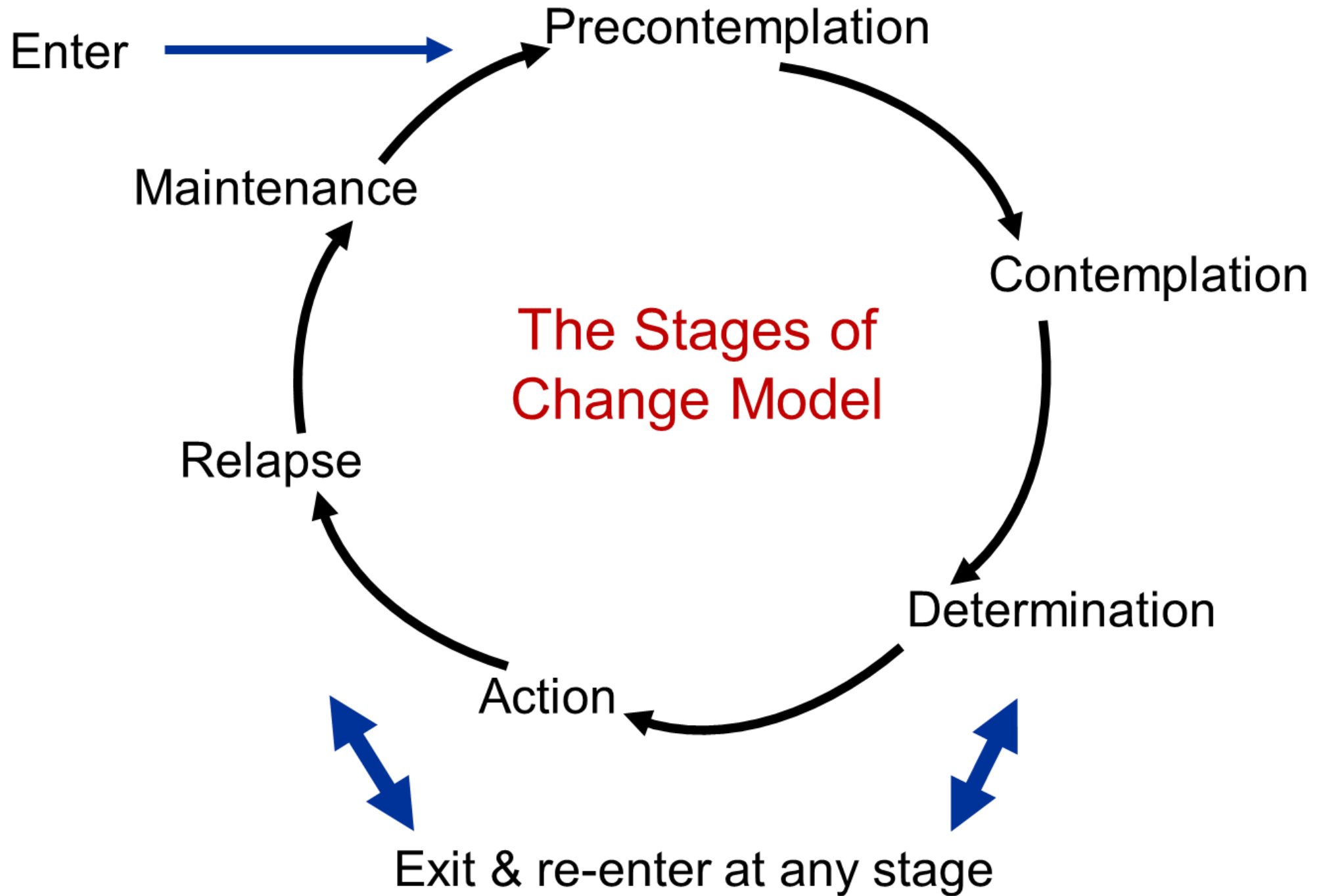
- Sit with extended knee
- Can't stand
  - Fear of triggering pain
  - Unable to perform stand transfer/ walk
  - Fear of fall
- Compromised hygiene
  - Perineal care (diapers)
  - Bathing irregularly

### Participation

- Driving
- Renumerative employment
- Organized religion
- Leisure- social isolation

Very motivated lady

Lives in rural area, far from rehab facility



- Post op D3 right transfemoral stump



Review 3 months  
post op:

Body structure/  
function

No pain

Phantom sensation:  
occasional

Stump issues:  
- bulbous stump  
- contact dermatitis to  
various bandage type

Personal factor:

Environment factor:

Activity

- Stand on 1 leg
- Mobility: walk with frame
- Not able to hop/ stair climbing
- pADL: independent

Very motivated lady

Lives in rural area, far from rehab facility,  
accessibility, public transport

Participation

- Renumerative employment
- Driving
- Leisure- social isolation

- Post op 3 months



# Rehabilitation Team

NCMRR 1993  
National Center for Medical Rehabilitation Research



## Bio-psycho-social Model of Functioning, Disability and Health

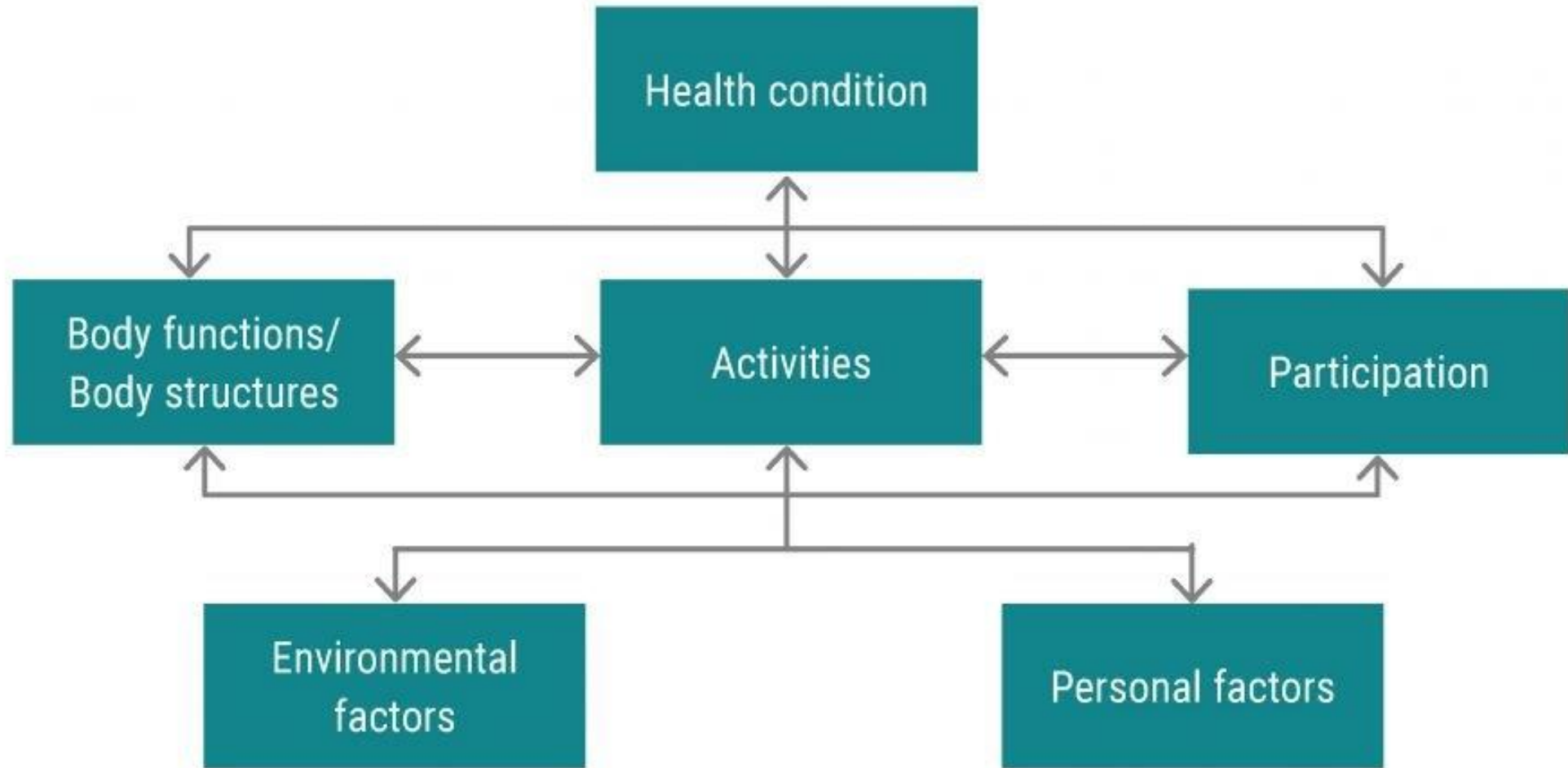
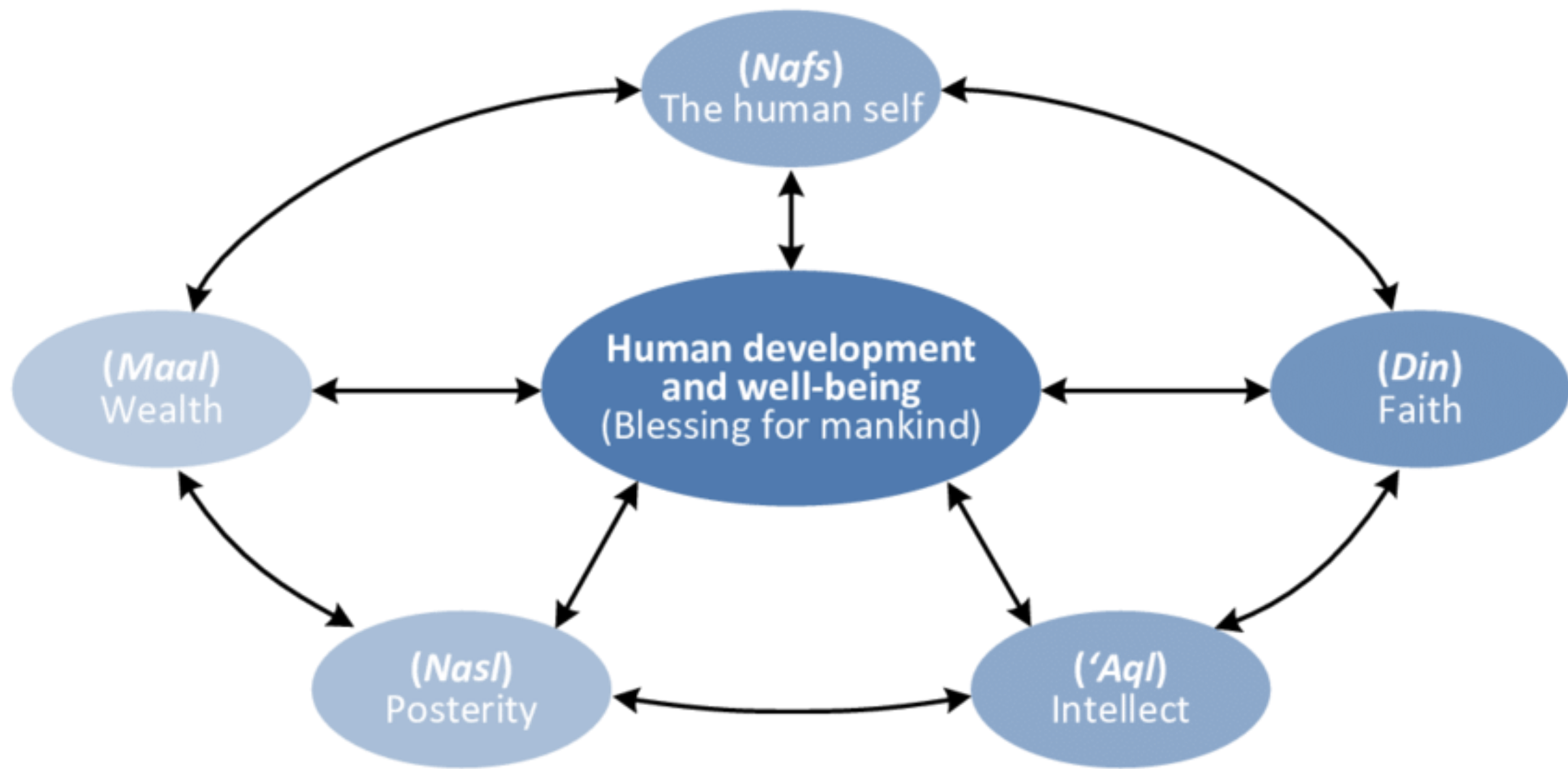


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THANK YOU