

原作者及出處 (Original):

Lardinois KL, Guge N.

Pediatr Phys Ther. 2019 Jul;31(3):E8-E14. doi: 10.1097/PEP.0000000000000630.

翻譯者 (Translator):

劉天慧

奇美醫院物理治療師，臺南，臺灣

校閱者 (Reviewer):

陳麗秋

輔英科技大學物理治療學系助理教授，高雄，臺灣

題目 (Title):

兒童交替性偏癱的物理治療：個案報告

Physical Therapy for a Patient with Alternating Hemiplegia of Childhood: A Case Report.

摘要中文翻譯**目的：**

兒童交替性偏癱(alternating hemiplegia of childhood, AHC)是一種罕見的神經疾患，會在動作發展的關鍵期影響姿勢及動作。尚未有文章描述AHC兒童的物理治療。本個案報告之目的是呈現對一位AHC兒童之物理治療評估、介入及效果的範例。

重點摘要：

物理治療的服務是在個案14至52個月大期間提供9次連續性照護計畫。兒童的進步呈現於動作控制、16.5個月大時可獨立行走、粗動作功能評估量表-88(GMFM-88)的分數從27個月時的78%進步至52個月時的95%。

結論與臨床實務建議：

本個案的重點是對個案提供了多系統的治療介入、謹慎的考慮介入頻率、並討論兒童交替性偏癱的獨特性。

Original Abstract

PURPOSE:

Alternating hemiplegia of childhood (AHC) is a rare neurological disorder that can influence posture and movement during critical periods of motor development. There are no descriptions of physical therapy for children with AHC. The purpose of this case report is to present an example of physical therapy evaluation, intervention, and outcomes for a child with AHC.

SUMMARY OF KEY POINTS:

Physical therapy services were provided over 9 sequential plans of care between 14 and 52 months of age. The child demonstrated improvements in motor control, walked independently at 16.5 months of age, and her Gross Motor Function Measure-88 score increased from 78% to 95% between 27 and 52 months of age.

CONCLUSIONS AND RECOMMENDATIONS FOR CLINICAL PRACTICE:

The importance in this case lies in the use of a multisystem approach to treatment, careful consideration of frequency of intervention, and discussion of the unique features of AHC.

Lippincott Williams & Wilkins, a business of Wolters Kluwer Health and its affiliates take no responsibility for the accuracy of the translation from the published English original and are not liable for any errors which may occur.

威科集團醫療衛生業務部門之一：Lippincott Williams & Wilkins，及威科集團醫療衛生業務部門的其他附屬機構不承擔因從英文原文翻譯的準確性而導致的任何責任，也不承擔由於翻譯錯誤而導致的任何法律責任。