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題目 (Title):

促進痙攣型雙邊腦性麻痺兒童髖部柔軟度的站立治療方案

(Standing Programs to Promote Hip Flexibility in Children With Spastic Diplegic Cerebral Palsy)

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目的 (Purpose):

探討一個站立治療方案對痙攣型雙邊腦性麻痺兒童髖外展關節活動度的影響。

(To investigate the effects of a standing program on the range of motion (ROM) of hip abduction in children with spastic diplegic cerebral palsy.)

方法 (Methods):

參與者為 13 位兒童，其粗大動作功能分類系統為第三個階級，並接受過物理治療以及一個使用量身訂製的站立架的每日站立治療方案。兒童由 12-14 個月進行到五歲大。在基準期和參與者五歲時使用關節活動度測量器評估髖外展關節活動度評量成效。

(The participants were 13 children, Gross Motor Functional Classification System level III, who received physical therapy and a daily standing program using a custom-fabricated stander from 12 to 14 months of age to the age of 5 years. Hip abduction ROM was goniometrically assessed at baseline and at 5 years.)

結果 (Results):

基準期髖外展關節活動度為 42 度，參與者五歲時其角度為 43 度。

(Baseline hip abduction was 42° at baseline and 43° at 5 years.)

結論 (Conclusions):

角度改變在臨床上未具顯著意義，但對於髖內收肌痙攣腦性麻痺兒童，每日的站立治療方案顯示可維持他們前五年的髖外展關節活動度。

(This small difference was not clinically significant, but did demonstrate that it was possible to maintain hip abduction ROM in the spastic adductor muscles of children with cerebral palsy with a daily standing program during the children's first 5 years of development.)

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