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題目 (Title):

腦性麻痺兒童接受手術前後的步態分析參數及行走活動

Gait Analysis Parameters and Walking Activity Pre- and Postoperatively in Children With Cerebral Palsy.

摘要中文翻譯**目的：**

本研究調查手術前及手術後其步態偏差指數 (Gait Deviation Index, GDI) 和行走活動之間的關係。

方法：

74 名腦性麻痺少年的 GDI 和行走活動資料被納入分析。手術前的 GDI 是採計開刀前 1 至 16 個月期間的臨床步態分析所收集的步態參數；手術後的 GDI 則採計開刀後 10 至 26 個月期間的臨床步態分析所收集的步態參數。

結果：

平均 GDI 的變化與改變的步幅兩者之間呈現微弱的相關；因手術所改變的 GDI 與步幅的變化則具有中度的相關性。

結論：

單次多層的手術處理可改善腦性麻痺兒童的步態偏差；然而，步態模式的改善與手術後行走活動改變的相關性有限。我們的研究結果證實，手術須結合其它的療育以促進長期的行走活動能力。

Original Abstract

PURPOSE:

This study examined the relationship between the Gait Deviation Index (GDI) and walking activity preoperatively and postoperatively.

METHODS:

The GDI and walking activity from 74 youth with cerebral palsy (CP) were included in the analysis. The preoperative GDI was calculated using gait parameters collected during a clinical gait analysis 1 to 16 months prior to surgery. The postoperative GDI was calculated using gait parameters collected during a clinical gait analysis 10 to 26 months following surgery.

RESULTS:

A weak correlation was present between the change in the average GDI and the change in strides. A moderate correlation was found between the change in the Surgery GDI and the change in strides.

CONCLUSION:

Single-event multilevel surgery improves gait deviations in children with CP. However, the improvement in gait pattern has limited correlation with postoperative change in walking activity. Our results demonstrate a need to pair surgical with additional intervention to affect long-term improvements in walking activity.

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