

What is Physiatry?

**What we do
and
how we might help you**

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What is a Physiatrist?

- Greek *Physikos* (Physical) and *iatreia* (art of healing)
- Specialist in Physical Medicine & Rehabilitation (PM&R)
- NOT a Physical Therapist –we work closely with them
- NOT a Psychiatrist –we may help with emotional support.
- Evolved initially in WWI, and further in WWII and with polio to address needs of veterans and polio survivors.
- Training: 4 years of medical school + 4 years of residency and possibly fellowship.
- NON-surgical. Now over 7000 providers in US

What is a Physiatrist?

- **Focus on restoring function and whole person**
 - Treating pain
 - Focus: mobility, communication, and cognition
 - Return to life physically, psychologically, and socially
 - Return to community, work, driving, and leisure



Outpatient Neuro-Physiatry Services

- What kind of patients do we see?
- **Neurologic conditions**
 - Stroke
 - Brain Injury
 - Multiple Sclerosis
 - Spinal Cord Injury
 - Peripheral Neuropathies
 - Conditions from birth
- **Other**
 - Amputation
 - Rheumatologic
 - Orthopedic
 - Cardiovascular



Examples

What is a Physiatrist?

How are we different from Neurology

- Clear overlap
- less diagnostic, more treatment
- Functional focus/holistic



When can we help after stroke?:

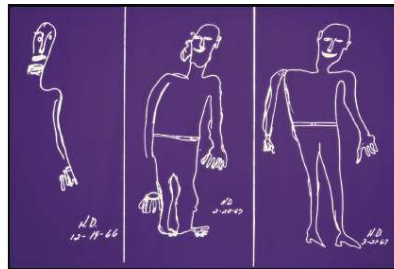
- Hospital: consultation and acute rehab unit
- Skilled nursing facility
- Outpatient clinic – anytime -1 month out to 5 years+
out we may have a role towards making life easier
– medication, equipment, therapy refresher



Stroke Rehab



- Most common rehab condition at Swedish
 - Inpatient & outpatient rehab
- Managing Complications
 - Shoulder Pain
 - Bladder/Bowel issues
 - Depression /adjustment
 - Cognition
 - Vision
 - Swallowing
 - Aphasia
 - Pain
 - Spasticity



Treatment Options



□ In clinic we discuss:

- **Diagnostic steps** in confirming a condition.

- Imaging, nerve, muscles studies

- **Treatment steps** including

- Medication options (ex pain/spasticity): oral/injectable

- Therapy resources: Physical Therapists, Occupational Therapists, and Speech therapists, Vocational Rehab.

- Pushing Boundaries

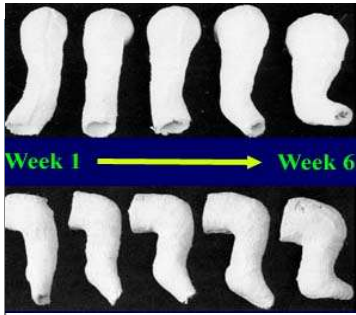
- Outdoors for All

- **Equipment:** Canes, crutches, wheelchairs, communication devices, ADL aids,

- **Bracing**

- **Home modifications**





Spasticity

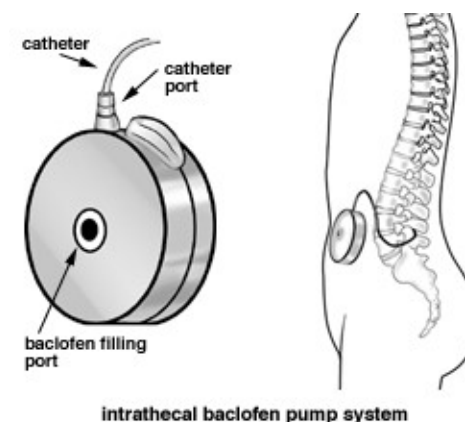


- **Increased tightness in muscles**
 - Hamstrings (difficulty straightening knee)
 - Quadriceps (stiff legged gait)
 - Calf muscles (pointed foot/ankle turned in)
 - Inner thighs (narrow, legs crossing each other)
- Seen in Stroke and other neurologic conditions
- Goal of treatment: to improve
 - Position
 - Mobility, maintain range.
 - Pain
 - Ease of self care



Spasticity - Treatment

- Anti-spastic positioning, ROM exercises, Stretching
- Splinting
 - Resting Hand Splints
 - Posterior Foot Splints
 - Dynamic Splinting
- Serial casting
- Oral Medications
 - Baclofen, tizanidine, dantrolene, benzos
- Botulinum toxin injections
 - EMG, muscle stimulation guidance
- Referral timing/needs
 - Intrathecal baclofen
 - Surgical contracture releases



Swedish Neurological Rehabilitation Medicine

- Providers
 - Paul Chuwn Lim, MD: Cherry Hill
 - Jeffrey Moo, MD: Cherry Hill
 - John Benson, MD: Cherry Hill
 - Kim Middleton, MD: Issaquah and Cherry Hill
- Swedish Cherry Hill Hospital in Seattle
- Swedish Issaquah hospital



Neurological Rehabilitation Medicine

- Other Local Providers for Neurologic Stroke Rehab needs
 - Evergreen Medical Center
 - Harborview Medical Center
 - University of Washington Medical Center
 - Virginia Mason Medical Center
 - Valley Medical Center

Thanks



Questions?

