



Stroke Recovery Solutions

From an Occupational Therapy Perspective

By: Mark Ritter *OTR/L, CHT, Northern AZ Healthcare*

So you've had a stroke, one of the most life changing events that one can experience. It was unplanned, a complete turn of events that takes so much away from you it can be hard to recognize yourself. The person you were may not be the person you currently are.

This is a universal hurdle for everyone as people try so desperately to hold on to the person they were prior to the stroke. This can lead to frustration, anger, resentment, depression, and discontent. It doesn't help when progress may be slow or painfully difficult. The turning point is when one accepts that this body, this brain, this path that is now a new path is challenging, difficult, but also potentially rewarding. Rewarding in the respect of seeing things differently, seeing people differently, and seeing how strong one can be in the face of this crazy thing called a stroke.

I started working with individuals who suffered strokes, all different kinds of strokes, about 25 years ago. My name is Mark Ritter and I am an occupational therapist (OT).

via www.strokerecoverysolutions.com



Stroke Recovery Solutions

If anyone reading this has had a stroke, I bet you know what an occupational therapist is now, but most people who have not had a stroke do not know what one is.

We are a secret. We get lots of descriptions, "That's like physical therapy right? Is that the "other" therapy? Do you help people find jobs? Do you do crafts all day?"

Well, OT is a discipline that works extremely well with a physical therapist and a speech therapist, as well as recreational therapists, clinical psychologists, physicians, nursing staff, and a host of other professionals to build a team to get people on the road to independence. An OT has a master's degree or a clinical doctorate currently, but when I went to school a bachelor's degree was required, so that tells you that I'm older. The grays are starting to show.

OT's got their start working with people who have mental illness. They discovered people improved when given purposeful activities to perform. Later during the WWI and WWII eras, OT's became very important working with men who had physical ailments, long hospital stays for months, and had developing depression and psychological trauma.

via www.strokerecoverysolutions.com



Stroke Recovery Solutions

OT's roots were in psychosocial treatment so that worked well combating depression. It was soon realized that getting these men out of bed, showering, shaving, going to breakfast, developing structure, going to group treatment sessions where men could share their experiences and work through their trauma *WHILE* performing craft activities such as leatherwork, woodworking, etc. - suddenly allowed them to heal.

Men were feeling better, better enough to start addressing their physical dysfunction, became more independent, and no longer needed to stay in the hospital. People were leaving the hospital much earlier and happier. This was pretty cool they decided, (the National Society for the Promotion of OT, now known as the American Occupational Therapy Association), so let's make schools teach this curriculum and incorporate this discipline into the medical model.

OT was born and full steam ahead to today: OT continues to work in mental health, rehab centers, burn units, nursing homes, skilled nursing facilities, schools, outpatient clinics, and much more. OT's can specialize in many different areas so I chose specializing in the upper extremity.

I became a certified hand therapist (CHT) in 2008, which required five years and four-thousand hours working in hand therapy, while also seeing

via www.strokerecoverysolutions.com



Stroke Recovery Solutions

post-surgical patients after shoulder surgery, elbow surgery, wrist surgery, and hand surgery.

Then came the board certification exam (which was a bit of a nightmare), but passing it allowed me to use the credential **CHT**. Therefore, my background is in neurological rehabilitation, as well as hand therapy: a nice combination for working with individuals suffering from upper extremity tightness, pain, incoordination, weakness, numbness, and more after a stroke.

THIS COULD BE A GOOD PART TO BREAK AT, BEGIN PART TWO WITH THE FOLLOWING:

The art of hand recovery is a blend of science and the art of experience. *The hand is typically the last part of your body to come back after a stroke.*

Speaking in general terms, because everyone is different, there are no two people alike, making it extra hard for the medical community to figure out the magic cocktail for the best recovery. This makes researching it hard.

Things we do know because of research, is that *people can continue healing indefinitely*. Doctors used to say six months and that's it.

Don't believe that.

via www.strokerecoverysolutions.com



Stroke Recovery Solutions

I see improvement in people who had strokes five, ten, even fifteen years ago. Improvement comes in all forms, but it takes work and motivation.

Another thing we know is that the brain has **neuroplasticity**.

This is the brain's ability to reorganize itself by forming new neural connections throughout life. It allows the nerve cells in the brain to compensate for injury and disease and to adjust their activities in response to new situations or changes in their environment.

That's a lot of fancy words for the part of the brain that wasn't affected is able to pick up some of the responsibilities the affected part once did. New pathways can be created BUT they aren't created by watching TV, they are created by doing things that are purposeful and challenging, which translates to hard and intense.

This makes the brain work and *anything that makes it work, makes it heal*.

Recovery typically occurs from the top down.

People start walking with physical therapy with various assistive devices; the shoulder starts to move better, then the elbow, then the wrist, then the grasp, then finally the release or opening the fingers. The fingers are typically the most challenging because they are the farthest away from the brain.

via www.strokerecoverysolutions.com



Stroke Recovery Solutions

When working your butt off in therapy and you are not getting the results you want right away, one of the toughest words is **patience**. Easy for a therapist to say to be patient, because they aren't seeing it day in and day out - only one to three times per week. It would be interesting to trade bodies for a day, I bet.

The point I'm trying so poorly to make is that *it takes a long time*. In that time being positive, optimistic, and hard-working are all the building blocks for brain recovery.

Hard-working comes to mind because when someone goes to the gym they do three sets of ten of this and three sets of ten of that - don't my biceps looks huge! After a stroke, for neuroplasticity to occur, we need three sets of two-thousand for the brain to comprehend this is a movement pattern that should be automatic, but it isn't.

It is the simplest movement that one has to think about, force the hand to perform, and **celebrate** when it does it in less than 30 seconds, because before it took 1 second without even thinking about it.

There is so much to talk about because of the complexity of strokes. There's [spasticity](#) or tone. We like to give things multiple names to

via www.strokerecoverysolutions.com



Stroke Recovery Solutions

confuse everyone. That's a whole other topic. There are exercises specifically designed for people who have strokes.

There is specific technology that we utilize to help with function and getting a higher number of repetitions for the brain to understand the movement. Of course, there is the topic of finding the right therapist that works for you. A therapist that you can talk to who understands your unique set of circumstances, who works well with your team, and is willing to go to bat for you when it matters.

Having someone you trust and someone who motivates you to *be the best version of yourself* is key. Therapists come in all shapes and sizes, so you have to do your research and ask questions. You are the consumer, we therapists actually work for you by working with you, so don't settle for less.

You may have had a stroke but you are still the boss, a good thing to keep in mind.

Mark Ritter OTR/L, CHT

via www.strokerecoverysolutions.com