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**Hospital based motor cognitive rehabilitation training. What after? An intervention aimed at patients support between admissions**

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Rehabilitation therapies are recognized as part of the treatment of PD. Occupational, speech, and motor-cognitive therapy in specialized units demonstrated to be effective, but generally there is no follow up between admissions at hospital-based treatments.

The present intervention aimed at evaluating the adherence to the suggested training after dismissal and to help patients coping with problems they experienced once back home.

Caregivers were involved for helping the understanding of patient's clinical status and needs; on the occasion, they were also offered a space to talk about their own feelings and coping strategies.

As the use of telemedicine has spread widely, teleconsultation was chosen as a valuable tool to broaden the hospital-based care to include home-based care.

A trained neuropsychologist enrolled 51 PD patients (age:  $68.6 \pm 7.9$ ; disease duration:  $14.6 \pm 7.5$ ; UPDRSIII on therapy:  $33.8 \pm 11.6$ ; M=35) who completed the multidisciplinary aerobic motor-cognitive rehabilitation training at our department. Patients were contacted by regular video or phone-calls once every 6-8 weeks after hospital discharge. A semi structured interview assessing their impression about cognition, mood and anxiety, adherence to speech and physical therapy training and their main problems (falls, dysphagia, ADL) was performed at each contact.

Results showed that 90% of the patients carries on with physical therapy at home (half of them at least 3 times a week) while 43% of the patients performs speech therapy exercises. Results are stable at each contact. No differences were found in clinical variables nor in cognition, mood and anxiety between patients who do and don't adhere to therapy.

Noteworthy, the intervention was useful in terms of clinical efficacy with thirteen patients helped to cope with difficulties regarding therapy or neuropsychiatric changes and the compliance was good as most of the patients and caregivers reported to benefit from the support and requested to continue with regular follow ups.