

Continuity of Care

Continuity of care is one of the greatest contributions that the GP can provide to the patient with a chronic condition such as LEOP. Many of these patients may develop new symptoms over time and require ongoing evaluation of their medical condition to monitor their progress. The GP, who is often the patient's first contact with the health care system can provide this ongoing evaluation and refer the patient to other health professionals and services as required. GPs are uniquely placed in the health care system to advocate for their patients because of the good rapport that can be established between patient and doctor. Good rapport in the doctor/patient relationship is important in order to:

- Provide information and support;
- Develop a comprehensive treatment plan with the patient and partner/carer; and
- Refer as appropriate to health professionals and services.

Referral to Other Health Professionals

Although the GP can provide a comprehensive service to the post-polio patient, it is vital for them to recognise the importance of specialists and allied health professionals in the management of this condition. Due to the complex nature of LEOP it is often necessary to refer these patients to other health professionals who have specialist skills and knowledge that can assist the patient to manage their often disabling symptoms.

Specialists

Specialist physicians, in particular neurologists, orthopaedic surgeons and respiratory physicians, can occupy a key position in the health care of post-polio patients.

The benefits of referring to a specialist include:

- Confirmation of a diagnosis (in particular identifying other diagnoses that may be causing symptoms);
- Establishing a shared management plan;
- Access to the specialised skills and knowledge of the specialist; and
- Access to comprehensive assessment and treatment procedures.

Allied Health Professionals

Allied health professionals have specific skills that can assist the patient with a history of polio. In particular physiotherapy, occupational therapy, and social work have been utilised in post-polio clinics throughout the world and have been found to be essential in the assessment and management of all patients with a history of polio. Therapists can be accessed through both the public and private sectors, however to provide a comprehensive service to the post-polio patient, it is important that they have a thorough understanding of this condition.

A resource manual and training package has been developed by the Queensland Department of Health and distributed to Queensland Health Districts throughout the state. These resources were developed to increase the awareness of medical and allied health staff of LEOP and provide them with the necessary information that is required to provide a comprehensive service to these patients.

Physiotherapist

Through a variety of hands-on treatments, education and exercise prescription, physiotherapists can assist the post-polio patient in maximising their level of function and minimising future deterioration.

Assessments conducted by the physiotherapist may include:

- Manual muscle testing;
- Measurement of joint range of motion and leg length;
- Evaluation of posture; and
- Analysis of activities and positions that provoke or relieve muscle and joint pains.

Treatment programs for the post-polio patient may include the following:

- Prescription of an exercise program, designed for the individual;
- Correction of postural alignment;
- Pain management;
- Application of therapeutic modalities;
- Joint mobilisation;
- Referral to appropriate services;
- Hydrotherapy; and
- Prescription and training in the use of mobility aids and/or braces.

Occupational Therapist

Occupational therapists use various methods to help their patients achieve the highest level of functioning and wellness attainable in their daily lives, and to cope with the physical and emotional aspects of their disability. Occupational therapy assessment and treatment for the post-polio patient may include:

- Assessment of home and workplace environments and recommendations for necessary adaptation;
- Evaluation of activities that produce weakness, pain or fatigue;
- Recommendations and training in the use of adaptive equipment;
- Vocational counselling and rehabilitation;
- Education of the patient regarding energy conservation, joint protection and work simplification; and
- Guidance to family members and carers in safe and effective methods of caring for the patient.

Social Worker

The social worker can provide a valuable service to the post-polio patient by facilitating ongoing adjustment to physical and lifestyle changes. This may be achieved through:

- Assessing how new health problems and functional loss impact on the patient and their family, friends and colleagues;
- Assisting the patient to identify coping strategies used;
- Increasing personal and external resources – facilitate referrals to community services;
- Providing education and support; and
- Counselling.

Other Health Professionals

Referral to other health professionals for the assessment and management of some of the symptoms experienced by post-polio patients may be required including:

- *Speech Pathologists* for evaluation and management of swallowing and speech difficulties.
- *Orthotists* for prescription and fabrication of orthoses / braces.
- *Podiatrists* for assessment and treatment of foot conditions (commonly present in patients with a history of polio).
- *Psychologists* to provide counselling, education and support in regard to psychological difficulties the patient may experience.
- *Dieticians* to provide education and management strategies regarding weight management.