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Research Abstract

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Extra physical therapy reduces patient length of stay and improves functional outcomes and quality of life in people with acute or subacute conditions: a systematic review.

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Abstract

OBJECTIVES:

To investigate whether extra physical therapy intervention reduces length of stay and improves patient outcomes in people with acute or subacute conditions.

DATA SOURCES:

Electronic databases CINAHL, MEDLINE, AMED, PEDro, PubMed, and EMBASE were searched from the earliest date possible through May 2010. Additional trials were identified by scanning reference lists and citation tracking.

STUDY SELECTION:

Randomized controlled trials evaluating the effect of extra physical therapy on patient outcomes were included for review. Two reviewers independently applied the inclusion and exclusion criteria, and any disagreements were discussed until consensus could be reached. Searching identified 2826 potentially relevant articles, of which 16 randomized controlled trials with 1699 participants met inclusion criteria.

DATA EXTRACTION:

Data were extracted using a predefined data extraction form by 1 reviewer and checked for accuracy by another. Methodological quality of trials was assessed independently by 2 reviewers using the PEDro scale.

DATA SYNTHESIS:

Pooled analyses with random effects model to calculate standardized mean differences (SMDs) and 95% confidence intervals (CIs) were used in meta-analyses. When compared with standard physical therapy, extra physical therapy reduced length of stay (SMD=-.22; 95% CI, -.39 to -.05) (mean difference of 1d [95% CI, 0-1] in acute settings and mean difference of 4d [95% CI, 0-7] in rehabilitation settings) and improved mobility (SMD=.37; 95% CI, .05-.69), activity (SMD=.22; 95% CI, .07-.37), and quality of life (SMD=.48; 95% CI, .29-.68). There were no significant changes in self-care (SMD=.35; 95% CI, -.06-.77).

CONCLUSIONS:

Extra physical therapy decreases length of stay and significantly improves mobility, activity, and quality of life. Future research could address the possible benefits of providing extra services from other allied health disciplines in addition to physical therapy.

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