

Therapy After Selective Dorsal Rhizotomy For Clients Who Have Had Surgery OUTSIDE of Ontario

Children post-Selective Dorsal Rhizotomy (SDR) will require intensive physiotherapy and occupational therapy to learn and practice new motor patterns, resulting from reduced spasticity, to achieve long-term goals.

If your surgery is done outside of Ontario you MAY NOT eligible for funding provided under the Ontario SDR Program. However, CTN will do our best to ensure you receive the services needed.

If your child's surgery is occurring outside of Ontario and you will need post-surgical rehabilitation from CTN, **YOU MUST NOTIFY YOUR CHILD'S THERAPIST BEFORE THE SURGERY TO MAKE A PLAN FOR REHABILITATION.**

As parents and caregivers, you know your child the best. You know their strengths and abilities, as well as their needs and challenges. Your active participation will be essential in supporting your child in order to reach their targeted therapy goals.

Here is what you can expect:

Your therapist(s) will work with you as a team to set goals and develop a treatment plan to maximize the beneficial effects from the SDR surgery and that meets your family's/child's needs. Your consistent involvement and support will be important in making a meaningful and lasting impact.

An essential part of therapy is for therapists to provide your child and family with the skills and knowledge to perform the therapy activities at home.

- An important factor in meeting therapy goals is the client/parent follow-through of the home program provided.
- Participating in both home and community-based activities and improving your child's quality of life are a central focus of therapy intervention.

Therapy may occur at a CTN site, in a pool (hydrotherapy), through a home program, or in a group environment. Therapy may be delivered by a physiotherapist, occupational therapist, and/or rehabilitation assistant.

Duration and Frequency of Therapy following SDR surgery

The most appropriate frequency and duration of therapy will be determined by you and your child's therapists based on your child's individual needs and the functional goals of the SDR surgery. These recommendations may not look the same for all children who receive SDR surgery outside of Ontario.

Your child's progress will be reassessed often. Frequency will change over the course of your child's rehabilitation to reflect his or her ongoing needs.

Return to Ontario (Discharge to three months):

If SDR surgery occurs outside of Ontario, your physician may request a post-operative rehabilitation stay at Holland Bloorview. **These requests are not guaranteed, and may be declined.** Requests are triaged by Holland Bloorview based on several factors including bed availability, etc. CTN is not involved with these requests.

If your child returns home prior to 3 months post-surgery and requires therapy, CTN may be able to assist. However, CTN does not have the capacity to replicate the intensity of services provided by inpatient therapy programs. Frequency of therapy during this time **MUST** be discussed PRIOR to surgery. Failure to do so may limit therapist availability during a critical time of recovery for your child.

Three to Six Months Post-surgery

During this period your child's CTN team will see your child two times per week for physiotherapy and once per week for occupational therapy, if required. The therapy may be delivered by a rehabilitation assistant.

The focus of therapy will be on strengthening, balance, and walking with emphasis on achieving the highest level of functional mobility and endurance while decreasing walking support. Clients who are able to walk independently prior to surgery are usually able to resume walking independently again between three to six months post-SDR with the potential for improved alignment and efficiency.

Six to 12 months Post-surgery

Once your child is six months post-surgery, physiotherapy may be available one to two times per week if required. Occupational therapy will be provided using a traditional CTN therapy model.

The focus of therapy during this period is to improve walking endurance, static and dynamic balance, and to continue to build strength. Activities are individualized to each child's level of progress and specific functional goals.

One Year Post-surgery

After 12 months, therapy will be provided in a traditional CTN therapy model.

If you have any questions about your child's rehabilitation plan please speak with your CTN therapy team.

If you have any other questions please feel free to contact: Kim Hesketh, Rehabilitation Manager, Children's Treatment Network at 705 305 4560 or khesketh@ctnsy.ca