Results evaluation in a cohort of cerebral palsy children attending the Preschoolers Functional Development National Program. Teleton Chile 2007-2009

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ABSTRACT

Introduction: To evaluate the effect of the Preschoolers Functional Development National Program (FDPN) is of fundamental interest to Teleton Chile (ITCh).

Objectives: To estimate the adherence and the effect in functionality of FDPN in preschool children with cerebral palsy (CP) without major cognitive impairment according to age, diagnosis, ITCh, and socioeconomic status.

Patients and Methods: We studied a cohort of preschool children with PC from 3 to 5.9 years in FDPN, 2007-2009. The adherence to the program, with the dates of assessments as a time scale, was analyzed by Kaplan-Meier statistics. The effect on functionality was measured using WeeFIM at admission, discharge and in a four month follow-up. The goal was achieved when an increase of four points was observed in functionality.

Results: Of 498 preschoolers, 37.6% completed the follow-up, the overall median of the follow-up time was 148 days (IC95%:146.4-150.6), which differs significantly according to ITCh. In the 187 preschool children who completed the follow-up, on average 74.3% achieved progress in the motor area and 58.8% in cognition. The behavior of the achievements is similar in motor and cognitive areas according to age, topographic diagnosis and socioeconomic status. Limitations: It was assumed that the study factors of the children who were follow do not differed from those who left the study.

Conclusions: The high dropout from the program puts in evidence the lack of compliance of the program’s objectives. The median time of adherence to FDPN is relatively higher than expected. In children who completed the PNDF, there are advances in functionality, lower than expected. This program needs to be refocused, seeking to increase the adherence, a greater effectiveness in the cognitive area and a higher impact on the family.

Key words: Preschooler, CP, WeeFIM, Global program in rehabilitation.