

EARLY WALKING AND MOBILIZATION DURING HOSPITALIZATION OF PATIENTS WITH CHRONIC DISEASE: A SYSTEMATIC REVIEW AND META-ANALYSIS OF EXPERIMENTAL STUDIES

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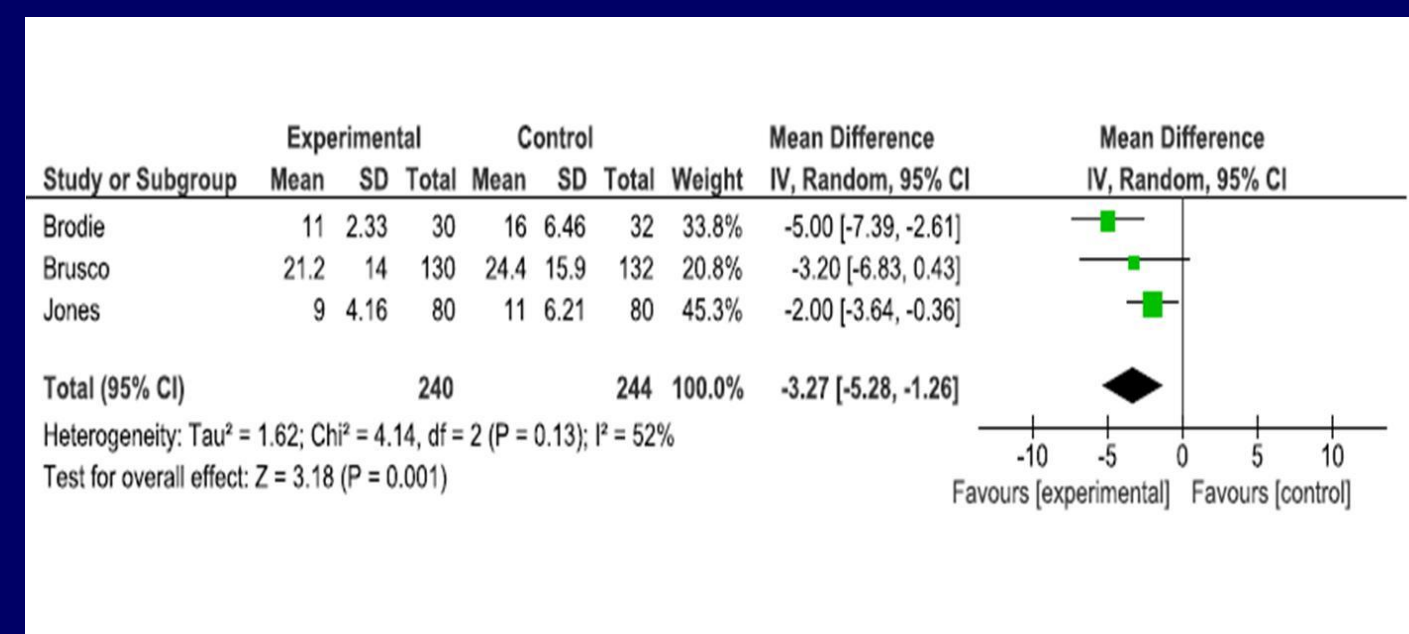
RATIONALE

1. Physical activity (PA) prevents decline and maximize functional independence of in-hospital patients with chronic disease.
2. Benefits of in-hospital early mobilization (EA) strategies need to be assessed and implemented.

METHODS II

4. Included Studies :
 - * RCTs, In any language
 - * Comparing older adults hospitalized with chronic disease.
 - * Patients randomized to walking or control group.

RESULTS: Improvement in mobility (minute walk scale)



PURPOSE

To determine the impact of mobilization or walking on the recovery of functional capacity and other events in hospitalized adults with chronic disease.

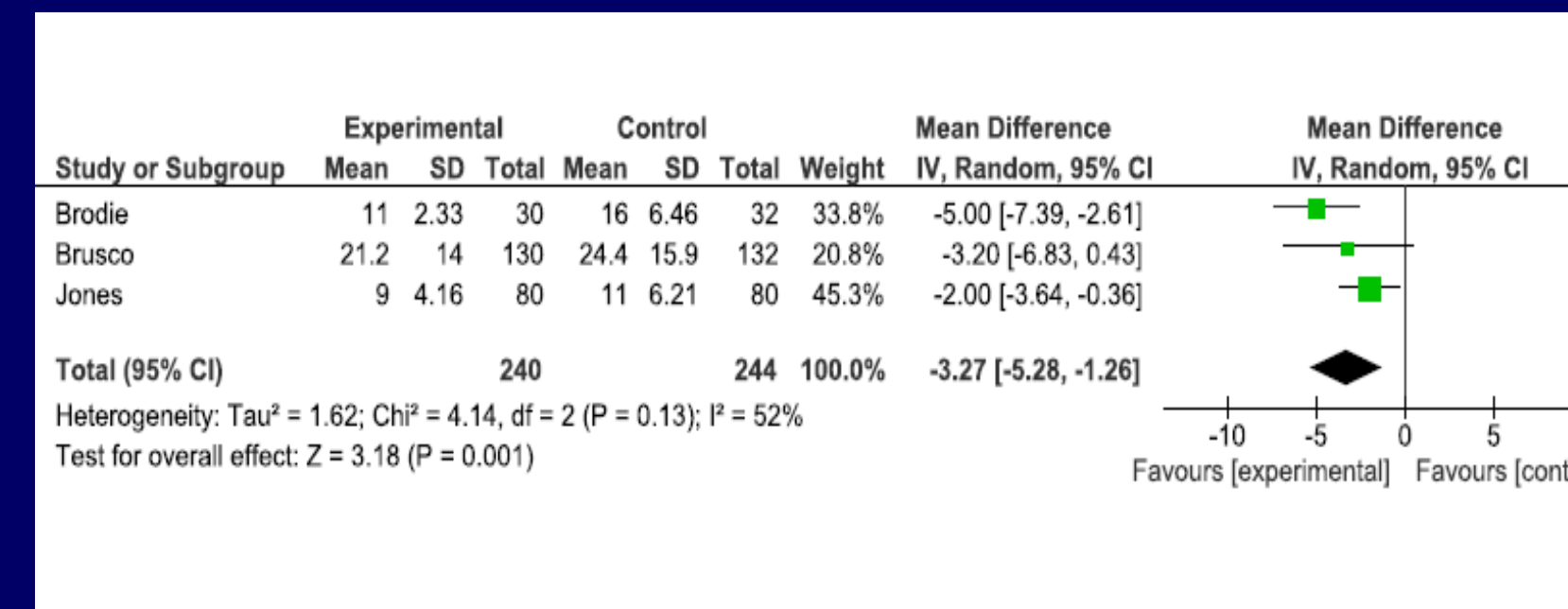
METHODS III

Evaluated study eligibility and quality of the studies

- Assessed
- * standardized mean differences (SMD) or
 - * random effects model (random effect)
 - * heterogeneity (I2 analysis)

Outcomes were: improved mobility (measured by multiple scales), long stay, falls, and pulmonary thromboembolism.

RESULTS: Reduction in-hospital length of stay

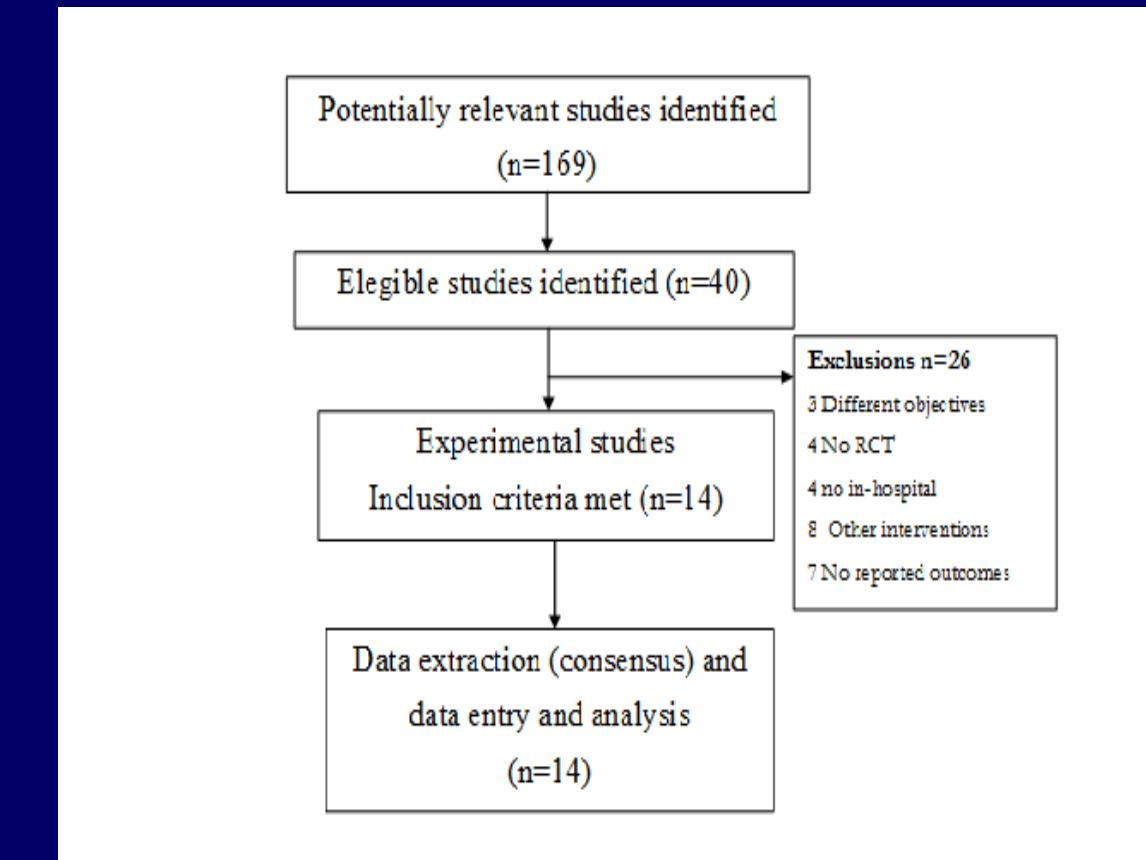


METHODS I

1. Systematic review and meta- analysis.
2. Data Sources included were MEDLINE, CINAHL online, HealthStar, EMBASE, Registered Clinical Trials in the Cochrane Library, LILACS, and manual review.
3. Studies were reviewed between 2000-2012

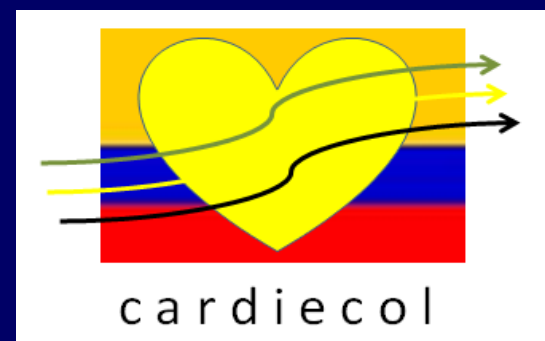
RESULTS

FLOWCHART OF INCLUDED STUDIES



CONCLUSION

Our meta-analysis showed an improvement in patients who were exposed to mobilization /walked during hospitalization and a reduction in hospital stay.



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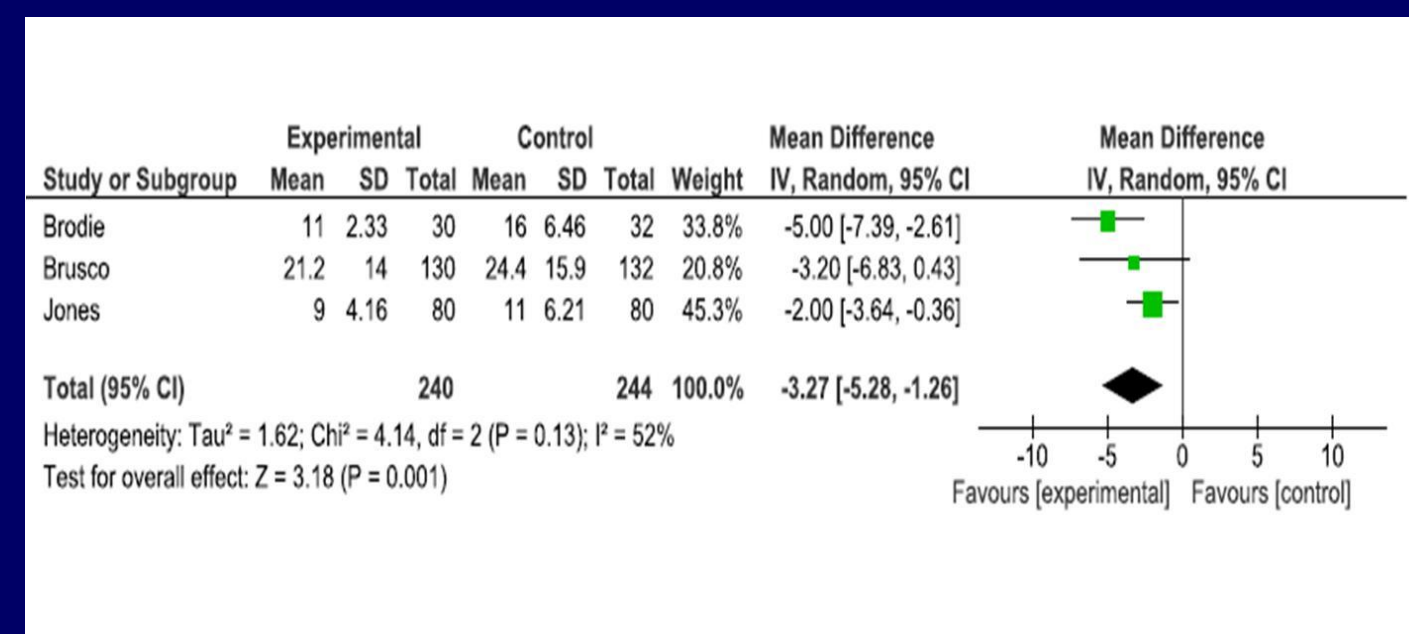
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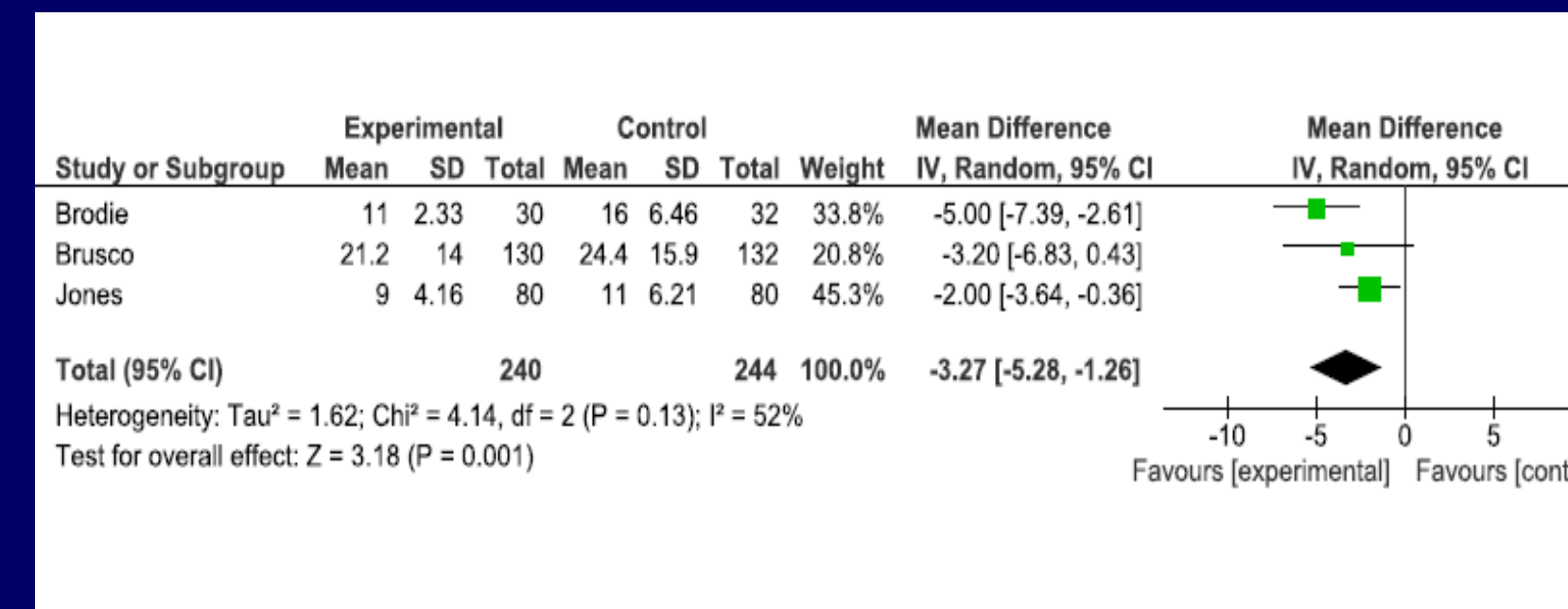
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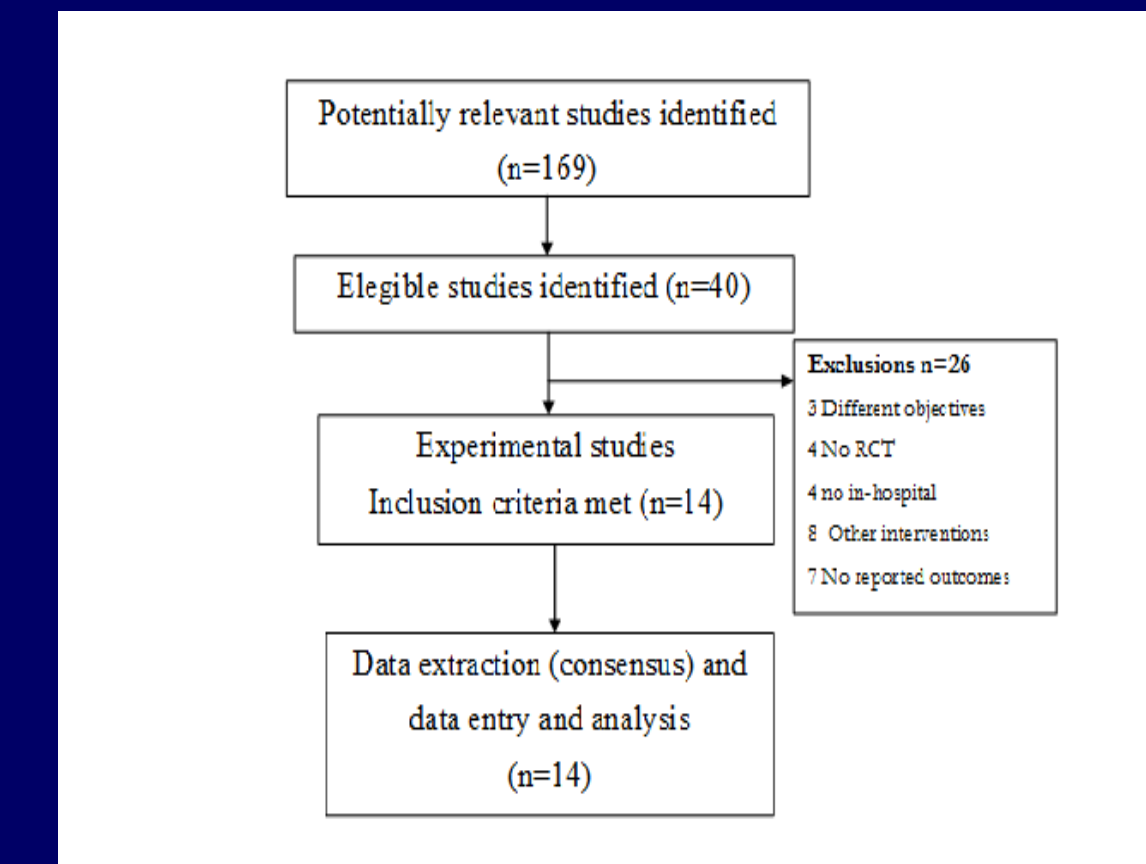


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