An article on rnweb.com entitled, “New Hope for Stroke Patients,” as well as articles in the New York Times and Los Angeles Times, discussed the benefits of a new type of neuro-rehabilitation therapy for stroke victims. Pioneered by Edward Taub, a psychology professor at the University of Alabama at Birmingham (UAB), the technique called Constraint-Induced Movement Therapy (CIMT) encourages stroke patients to use their affected limb by constricting the unaffected limb. By using the affected limb, stroke patients can begin to regain and restore motor function.

Researchers studying strokes have found that the “brain can compensate for function lost as a result of a stroke. The plasticity of the brain—its ability to adapt and reorganize—and a natural rewiring of the neural connections make it possible for one part of the brain to change functions and take up the work of the injured part.” CIMT assists this component of the brain through the utilization of the affected limb, helping reorganize the neurons and return motor function to the limb. Not only do patient’s learn to use the limb affected by a stroke, one study of CIMT showed that “after 12 days using the therapy, not only was use returning to the arm, but the mapped area of the brain had nearly doubled in size.” To prevent the use of the unaffected hand, patients wear a mitt or other restraining device for the majority of the day. This strategy forces them to use their affected limb, causing it to gradually regain function. In a study of 222 patients, it was shown that patients who underwent ‘constraint induced’ therapy within three to nine months of their strokes were more capable of performing an array of tasks than those who were not forced to use their affected arm.

Forcing stroke patients to use an impaired arm by immobilizing their good one produces significant long-term improvements in the function, boosting mobility and quality of life.

The constrained patients in the study “scored higher on physical tests up to a year later when compared with stroke patients who underwent customary rehabilitation.” According to Dr. Elias A. Zerhouni, director of the National Institutes of Health, the study is “likely to have a significant impact on clinical care for stroke survivors.”

Posey offers a wide variety of Mitts to help with your patient’s physical therapy needs. Posey Mitts have an ambidextrous design that fits either hand and are padded for comfort. The Mitts secure with a hook and loop strap and some models come with a mesh back to facilitate skin checks, while also allowing the skin to breathe. The use of Posey Mitts and Slings, in conjunction with CIMT can help your client build back the motor functions they have lost.

POSEY PEEK-A-BOO MITTS

- Features a double-padded design that limits hand use.
- Quick-Check flap enables circulation checks, without having to remove Mitt.
- No finger separators and the ambidextrous design fits either hand.
- One size fits all adult hands. Machine washable.
- One pair per package.

2811  Peek-A-Boo Mitts

POSEY EZ-ON MITTS

- Three finger separators provide ease of application and help reduce patient dexterity.
- Mesh bask allows skin to breathe and to facilitates circulation checks.
- Ambidextrous design fits either hand.
- One size fits all adult hands. Machine washable.
- One pair per package.

2817  EZ-On Mitts

POSEY ECONOMY MITTS

- Palm of each Mitt is filled with foam and secures around the wrist with hook and loop strap.
- Closed-end mesh back facilitates skin checks and the ambidextrous design fits either hand.
- Three finger separators and one size fits all adult hands. Machine washable.
- One pair per package.

2826  EZ-On Mitts

POSEY ARM SLING

- Comfortable arm sling positions and stabilizes arms.
- Machine washable.
- One per package.

7411S  Arm Slings, small
7411M  Arm Slings, medium
7411L  Arm Slings, large

DIMENSIONS: 7411S - 14"L x 7"W
7411M - 16"L x 7"W
7411L - 18"L x 8"W