Management of Spasticity After Stroke Checklist

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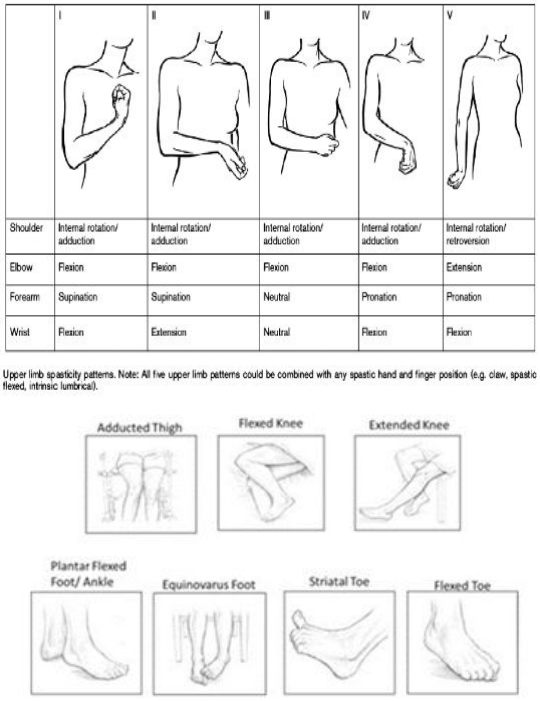
The Management of Spasticity After Stroke Checklist has been developed to assist the healthcare team, doctors and allied health professionals, in managing spasticity for post-stroke patients. The checklist is meant for usageboth in the inpatient and outpatient setting. This activity is part of the World Stroke Academy Life After Stroke project, that aims to improve the quality of support and educational material available globally on the topic of Life After Stroke.

	Question	Answer selection
1	Is spasticity present?  Upper limb spasticity patterns. Note: All five upper limb patterns could be combined with any spastic hand and finger position (e.g. claw, spastic flexed, intrinsic lumbrical).	◯ Yes ◯ No
2	Time since onset of spasticity	_____ years _____ months _____ weeks _____ days

	I	II	III	IV	V
Shoulder	Internal rotation/ adduction	Internal rotation/ adduction	Internal rotation/ adduction	Internal rotation/ adduction	Internal rotation/ retroversion
Elbow	Flexion	Flexion	Flexion	Flexion	Extension
Forearm	Supination	Supination	Neutral	Pronation	Pronation
Wrist	Flexion	Extension	Neutral	Flexion	Flexion

3	Which part of the body is affected by spasticity? Check all that apply:	☐ Orofacial Upper limb Either one region or a mixture of locations: ☐ Shoulder ☐ Elbow ☐ Arm ☐ Forearm ☐ Wrists ☐ Fingers Lower Limb Either one region or a mixture of locations: ☐ Hip ☐ Knee ☐ Ankle ☐ Toes
4	Distribution of spasticity?	◯ Bilateral ◯ Unilateral Which side? ☐ Left ☐ Right
5	Does the spasticity cause pain?	◯ Yes ◯ No
6	Is the spasticity associated with fatigue?	◯ Yes ◯ No
7	Is the spasticity associated with spasms?	◯ Yes ◯ No
8	Does the spastic limb have contractures?	◯ Yes ◯ No

9	Does spasticity limit patient care or activities of daily living ?(Examples are hygiene, grooming, dressing and feeding)	○ Yes ○ No
10	Does spasticity limit mobility ?(Examples are transfer, gait, standing)	○ Yes ○ No
11	Does spasticity limit the patient's participation in any other activities? Examples are leisure activities, driving, employment, social, family and professional participation)	○ Yes ○ No
12	What are the treatments given for spasticity?	Stretching Range of motion exercises Physical modalities Oral medication Botulinum toxin injection Casting Intrathecal baclofen Surgery
13	Is the patient compliant to spasticity treatment? Stretching Medications Orthosis usage	○ Yes ○ No ○ Yes ○ No ○ Yes ○ No

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What barriers to spasticity management have you faced, if any?

Difficulty to access a spasticity specialist

- ◯ Yes
- ◯ No

Difficulty to perform positioning/exercises

- ◯ Yes
- ◯ No

Lack of access to occupational or physical therapy

- ◯ Yes
- ◯ No

Others, please state:

Treatment options for spasticity:

1. NONPHARMACOLOGIC TREATMENT OF SPASTICITY

- [ ] Stretching
- [ ] Fitting of splints/braces and serial casting
- [ ] Thermotherapy
- [ ] Neuromuscular electrical stimulation (NEMS)
- [ ] Functional electrical stimulation of upper and lower extremity
- [ ] Kinesiotherapy (PT/OT)
- [ ] Muscle strengthening
- [ ] Task training
- [ ] Aerobic training
- [ ] Use of robotics
- [ ] Use of virtual reality

2. PHARMACOLOGIC TREATMENT OF SPASTICITY

- [ ] Oral medications (Baclofen, Tizanidine, Dantrolene, Diazepam)
- [ ] Phenol/alcohol neurolysis
- [ ] Botulinum toxin
- [ ] Intrathecal baclofen
- [ ] Cryoneurolisis

3. SURGICAL TREATMENT OF SPASTICITY

- [ ] Orthopedic procedures
- [ ] Neurosurgical procedures

References

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