



CASEY HOUSE

Casey House Hospice
Case Study
for
Rehabilitation in the Context of HIV Workshop
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CWGHR Definitions

Impairment

- Refers to loss of physiological or psychological functions such as weakness or impaired cognition

Disability

- Refers to lack of ability to perform activities such as walking or bathing

Handicap

- Refers to disadvantage that limit fulfillment of a role that is considered normal for a person, such as the inability to return to work

Client Description

- 50 year old woman
- HIV + since 1990
- Casey House, Community Program client since June 1999 (CHAP)
- Psychological Diagnosis:
 - depression, agoraphobia, anxiety
 - history of sexual abuse
 - recovering from drug & alcohol addiction
- History 1993:
 - neuropathy in hands, feet, legs & back
 - bilateral mastectomy
- Current:
 - approximately 200 lbs.
 - right knee injury

Challenges: Massage Therapist

- Client acceptance of massage therapy
- Client introduction facilitated by Community Nurse
- October 3, 2002 first therapy
 - Community Nurse came with her
 - she was in a scooter
 - she wore an elastic brace that was uncomfortable for her

Challenges: Massage Therapist

(cont.)

Treatment Plan	Goals	Modalities Used
<ul style="list-style-type: none">• Build trust• Wait for MRI results on knee• FBM excluding right leg• Treat side laying• Teach yoga breathing exercise to help her relax• On-going treatment 1X 1 week	<ul style="list-style-type: none">• Therapeutic relationship• Get client comfortable on massage table using pillows to support right leg• Relaxation	<ul style="list-style-type: none">• Heat low back & hips which were sore from compensating for knee injury• Aromatherapy with 2% geranium massage lotion whole body for emotional well being & relaxation• Swedish massage• Yoga breathing exercise

Challenges: Massage Therapist

(cont.)

Result:

Status: Finalized

MRI RIGHT KNEE

MRI of the right knee was obtained on 25 September 02

No meniscal tear is identified. Degenerative signal changes are noted in the anterior horn of the medial meniscus. There is a full thickness tear of the proximal aspect of the anterior cruciate ligament, as well as of the proximal aspect of the posterior cruciate ligament. There is a complete tear of the medial collateral ligament proximally. A high-grade partial tear of the medial patellar retinaculum is noted. There is a lateral femoral condyle marrow edema consistent with a bone contusion. Moderate sized joint effusion is present. Subchondral degenerative changes are noted within the medial femoral condyle along the articular surface. Cartilage loss of the medial and lateral patellar facets is compatible with moderate chondromalacia patella.

IMPRESSION:

1. Complete tear of the proximal aspects of the anterior cruciate and posterior cruciate ligaments.
2. Complete tear of the medial collateral ligament proximally, as well as high-grade partial tear of the medial patellar retinaculum. Lateral femoral condyle bone contusion may be secondary to a transient lateral patellar dislocation, although no marrow edema is visualized within the patella. Alternatively, the lateral femoral condyle bone bruise may be due to direct trauma.

Challenges: Massage Therapist

(cont.)

October 17, 2002 Massage Treatment

Goals

- Relax client after disappointing news from orthopedic surgeon
- **Work right leg (unaffected areas) which were cramping at night**
- Support
- Continue to see 1 X 1 week

Modalities

- Swedish massage
- Tiger balm on right calf
- Yoga breathing as tension reduction tool
- Heat on back & neck for comfort & tension reduction
- 2% geranium massage lotion

Successes: Massage Therapist

- Client committed to massage treatment
- Decreased pain in right leg
- Client using yoga breathing on daily basis to help deal with situations in her life
- Arrangements made for access to sauna & whirlpool (partial to water & misses baths)

Challenges: Client

- Pain
 - walking
 - unable to get into bath tub
- Disappointment regarding surgery news
- Trust
- Physical contact
- Decreased mobility
- Dealing with both AIDS & a disability

Successes: Client

- Willing to be touched
- Benefiting from massage treatments
- Interdisciplinary care team with RN & RMT
- Functioning better with new brace & scooter
- Benefits from yoga breathing for daily relaxation
- Pain management through two approaches:
 1. massage (from pain to discomfort)
 2. medication (able to use morphine comfortably)

Did We Meet Client Needs?

Why:

- Pain management
- Coordinated care by RN & RMT
- Holistic approach to services

Why Not:

- Health care system takes long time to provide some services (i.e. knee surgery)

Did We Identify All Client Needs & Issues?

Client's disability presents on-going
& emerging rehabilitation issues

coupled with

Complex care due to on-going & emerging
AIDS related issues and abusive history

Outside Agencies

- 410 Sherbourne
- CHAP

Summary

- Multiple and interrelated issues
 - emotional
 - physical
- We need to continue providing coordinated team care to this client & address the 'whole person'
- Rehabilitation
 - disability