# Physiotherapy after stroke

A stroke can cause weakness or paralysis on one side of your body, and problems with movement and carrying out everyday activities. This guide explains how physiotherapy can help you to recover, and what treatment involves.

## How can a stroke affect my movement?

* You may experience weakness, or even complete paralysis (called hemiplegia) in the muscles of one side of your body. This can make it difficult to move or use your limbs and get about. Your limbs may move in a different way when you try to use them. For example your hip may move upwards when you want to step forwards, or your elbow may move out to the side when you want to lift something.
* The affected side of your body may feel different. Your limbs may feel heavy because the weakness makes them difficult to move, or they may feel numb. Some people have more unusual sensations such as pins and needles, hot and cold sensations or feeling as though water is running down their limb. Occasionally these can be painful.
* You may have problems with your posture and balance, making it more likely to trip or have a fall.
* Joints on your affected side, such as your shoulder, may be vulnerable to injury, for example if your arm is pulled or its weight is allowed to ‘drag’. This can cause a partial dislocation (called subluxation) or ‘frozen shoulder’, where your shoulder becomes painful and difficult to move.
* Some muscles on the affected side may become stiff (most often at the wrist, fingers and the ankle) which can limit your movement at the joint, and some people may develop muscle spasms or a type of stiffness called spasticity.

You can read more about these effects of stroke in our guides ‘Physical effects of stroke’ and ‘Balance problems after stroke’.

## What is physiotherapy?

If you have lost movement in part of your body, physiotherapy can help you learn to move so that you can get around. It can help you learn to use your arm and hand in everyday activities as much as possible.

Some physiotherapists specialise in conditions caused by changes in the brain, such as stroke and other neurological conditions such as brain injury. They can be known as neuro physios or neurological physiotherapists.

## How can physiotherapy help?

After a stroke, our brains cannot grow new cells to replace the ones that have been damaged, but the brain has the ability to reorganise its undamaged cells and make up for what has been lost. This is called neuroplasticity. This process can be guided by the rehabilitation you receive following your stroke, and your physiotherapist will provide expert guidance on how to relearn movement and regain function.

Physiotherapists often work with other professionals to help you with the range of problems that stroke can cause. You may be helped by occupational therapists, speech and language therapists, doctors, nurses and social workers. This is called the multi-disciplinary team, or stroke team.

## When can physiotherapy begin?

From 24 hours after a stroke, you will be encouraged to get up and about as much as you are able to, whether this is continuing with your previous activities or just sitting in a chair.

In the early stages, physiotherapy focuses on preventing complications and helping your recovery. Later, it can help you find ways to enable you to do things that are important to you, such as getting in and out of bed, or doing sports. You might use equipment, or find different movements patterns to complete a task. A physiotherapist can also help you adapt an activity or task so you can do it independently.

## Where will it take place?

If you were admitted to hospital following your stroke, your physiotherapy will begin on the stroke ward. Once you are ready, you should progress to more active sessions, which you might happen in a rehabilitation area or physiotherapy gym.

You may be moved out of the stroke unit to a rehabilitation unit to continue your treatment. In some places a specialist community rehabilitation team will support you to continue your recovery at home. Other places offer a transition period between hospital and home in an intermediate care centre.

If you didn’t stay in hospital after your stroke, or didn't see a therapist while in hospital, you can still have physiotherapy. Ask your GP to refer you to a hospital stroke team or community rehabilitation team for help with any problems. You may also be able to refer yourself.

## What does physiotherapy involve?

### Early assessment and care

Following your stroke, you should be assessed by a physiotherapist as soon as possible after being admitted to hospital. This assessment should take account of any health problems you had before your stroke. It should make sure that any movement problems are identified at the start, so that care can be organised to give you every chance of making a good recovery.

Good care in the early days is important to help prevent joint stiffness or muscle tightness. A therapist will advise on how to get comfortable and to move around if your mobility is limited. For example how to roll over or to get in and out of bed. They can advise on when and how you can get up and about and what equipment (such as a walking stick or splint) might help you.

If you have one-sided paralysis, correct positioning is important to prevent spasm or injury. If you are unable to move, you will need a special mattress and the nurses may need to help you change position at regular intervals (usually every two hours) to prevent pressure ulcers.

If you are unable to move, you may be given chest physiotherapy to keep your lungs clear. If possible, you will helped to sit up in a chair, as this will help avoid blood clots in your legs, improve your breathing and help your recovery.

### Moving again

The more therapy you have and the more active you are after a stroke, the better. Guidelines recommend that you should receive at least 45 minutes of each type of therapy you need per day for as long as you need it.

Once you are medically stable, the aim will be to get you moving and doing as much for yourself as you can as soon as possible. Depending on how much you are able to do, this may include moving around your bed, then from bed to chair. It can also include standing balance, and walking with and without support. For many people this is a gradual process, and it is important to get each step right so that you are safe and regain your confidence.

It is important to get out of bed as soon as possible, even if this is just to sit in a chair. Moving helps your balance, aids breathing and skin care, and prevents blood clots in your legs. The physiotherapist will advise on the best type of chair and position for you. They can advise how to use cushions to support you, particularly for a weak arm.

If you cannot stand, the physiotherapist and nurses will use a hoist to help you get onto your feet. This will give you a chance to support your own weight and encourage the muscles of your trunk, hips and legs to work. Your therapist may not encourage you to walk straight away if you need time to recover your strength and stamina.

### Exercises

During physiotherapy you may do exercises to strengthen weak muscles and build up your stamina. Stretching exercises can reduce muscle and joint stiffness. You may also work on specific skills that you need to improve. For example, if you are having difficulty keeping your balance, you may be asked to stand up a lot. If you have difficulty lifting your arm, you will need to do activities that make you lift and use your arm. If you are having difficulty walking you need to walk as much as possible.

There are many ways to exercise and practise. You may work on a one-to-one basis with a physiotherapist, particularly on the tasks and the movements you are learning to do. You may also work with a physiotherapy assistant, or in a group. You will have activities to practise on your own outside of therapy sessions.

### Equipment

Although most people regain the ability to walk, some do not and others are only able to walk short distances such as around the house. If this is the case for you, your physiotherapist and occupational therapist will provide walking aids such as a stick or ankle splint and, if necessary a wheelchair and teach you and your family or carers how to use it.

After an assessment, they will also arrange for any other equipment you may need such as a hoist to help you get in and out of a chair or bed. You may need adaptations to the house when you go home, such as a ramp or wider doors. For more information see our guides ‘Equipment for independent living and mobility’ and ‘Accommodation after stroke’.

### Your hopes and plans

Your therapist will work with you to set a goals, or priorities that you want to be able to do in the immediate future. This will take into account your hopes and plans and is a way to make sure that your treatment is focussed on the things that are important to you. Your goals will depend on how your stroke has affected you, your abilities and interests, and the life you hope to lead in the future. Your goals may be small to start with and involve a simple task, such as reaching for and grasping an object.

## How can my family or carer help?

In most cases, is possible for members of your family, friends or carers to attend rehabilitation sessions with you. They can also be involved after you have left hospital, if you want them to be.

If you need help with daily tasks such as getting in and out of bed or using the stairs, your physiotherapist can teach your family or carer how to help, and how to use any equipment you have been given.

## Physiotherapy after leaving hospital

Some people can have Early Supported Discharge, usually after a mild or moderate stroke. This means continuing your recovery and rehabilitation in your home, supported by a team of stroke professionals. You should get the same amount of therapy as you would in hospital. This service typically lasts for up to six weeks. You might go on to a community rehabilitation team if you need longer term support.

If you need a lot of support after leaving hospital, you can be referred to a community rehabilitation team who will see you in your home. If you are able to travel, you might have physiotherapy appointments in the outpatients department of your local hospital.

### Staying active after a stroke

When you get home, try to keep as active as you can. Moving and being active can help your recovery, reduce your risk of another stroke, and improve your wellbeing. Your physiotherapist can advise you on ways to build up activity levels and overall health.

Some areas offer an ‘exercise referral scheme’ or specialist rehabilitation groups Ask your GP or physiotherapist what is available near you.

For ideas about moving more and staying active after a stroke, read our guide ‘Getting active after a stroke’.

## When will my therapy end?

Most people recover quickly in the first weeks after their stroke. After approximately three months, recovery usually slows down.

After this time, improvements usually happen because you have become fitter and stronger, rather than due to recovery from the brain damage caused by the stroke itself.

When you start physiotherapy, you set goals and plan exercises with the therapist. You should have therapy for as long as you need it. Therapy can end when you have reached your goals, such as walking or improving your balance. It can also end if the therapist assesses that further therapy wouldn’t benefit you, because the therapy isn’t helping you make progress.

At any time, if new problems arise or old ones return, you can ask your GP to refer you to a physiotherapist. In some areas they offer a ‘direct referral’ system, where you can contact the team or department directly to make an appointment without having to go through your doctor. If you find it hard to get the support you need, call our Helpline for advice and information.

## Private therapy

You may wish to consult a private physiotherapist if you feel you could benefit from further therapy, provided you’re not having the same treatment from an NHS therapist. Let your NHS therapist know you are seeing a private therapist, both as a courtesy and to ensure you continue your treatment and goals.

Check that the private therapist has substantial experience of stroke rehabilitation and the appropriate qualifications. Look for the initials MCSP (Member of the Chartered Society of Physiotherapy) and SRP (State Registered Physiotherapist) after their name. Check that you understand their fee structure, how many sessions are likely to be involved and whether you can be treated at home. For further information, see our guide ‘Private treatment’.

## Where to get help and information

### From the Stroke Association

#### Helpline

Our Helpline offers information and support for anyone affected by stroke, including family, friends and carers.

Call us on **0303 3033 100**,from a textphone **18001 0303 3033 100**

Email [helpline@stroke.org.uk](mailto:helpline@stroke.org.uk).

#### Read our information

Get more information about stroke online at **stroke.org.uk**, or call the Helpline to ask for printed copies of our guides.

#### My Stroke Guide

The Stroke Association’s online tool My Stroke Guide gives you free access to trusted advice, information and support 24/7. My Stroke Guide connects you to our online community, to find out how others manage their recovery.

Log on to **mystrokeguide.com** today.

### Other sources of help and information

Chartered Society of Physiotherapy

Website: [csp.org.uk](http://www.csp.org.uk)

Has a register of therapists who are members of the Association of Chartered Physiotherapists interested in Neurology (ACPIN).

Physio First

Website: [physiofirst.org.uk](http://www.physiofirst.org.uk)

Tel: 01640 684 960

Email: minerva@physiofirst.org.uk

Has an online database of qualified physiotherapists, which can be searched by location and specialism.

## About our information

We want to provide the best information for people affected by stroke. That’s why we ask stroke survivors and their families, as well as medical experts, to help us put our publications together.

#### How did we do?

To tell us what you think of this guide, or to request a list of the sources we used to create it, email us at [feedback@stroke.org.uk](mailto:feedback@stroke.org.uk).

#### Accessible formats

Visit our website if you need this information in audio, large print or braille.

**Always get individual advice**

This guide contains general information about stroke. But if you have a problem, you should get individual advice from a professional such as a GP or pharmacist. Our Helpline can also help you find support. We work very hard to give you the latest facts, but some things change. We don’t control the information provided by other organisations or websites.

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Version 3. Published July 2020

To be reviewed: April 22

Item code: A01 F16

Every five minutes, stroke destroys lives. We need your support to help rebuild them. Donate or find out more at **stroke.org.uk**.

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