

Background

Walkers from GATE are an important part of rehab physiotherapy at Sweden's biggest publicly run back clinic. Early mobilisation and ambulatory therapy are key to successful rehabilitation for patients in Ward 16 for orthopaedic oncology and back surgery at Sahlgrenska University Hospital in Gothenburg.

In all, Ward 16 has 28 beds – 18 for back surgery and 10 for tumour surgery. This makes it the largest publicly run back clinic. Anders Danemo has been Ward Manager there for 14 years:

“We perform around 900 back operations per year at the clinic, and our catchment area is mainly regional and national, although we also have patients from the rest of Scandinavia.”

Patients receive care on the ward before and after operations to the vertebral column, as do patients with tumours in such parts of in the locomotor system as nerves, muscles, tendons, skeleton, connective tissue and fatty tissue. Patients need a great deal of care after an operation, which usually means a long, arduous recovery period with a great deal of physiotherapy and adjustment.

“The first step on the road to recovery following surgery is early mobilisation and ambulatory therapy. This is absolutely crucial if patients are to get their ‘normal’ everyday lives back,” Anders tells us, and adds: “Unless they get mobile at an early stage, patients face major medical risks such as pulmonary embolisms, blood clots and bed sores. Patients suffering pulmonary embolisms are at great risk of death.”



Case Study

A walker is an important tool of great significance for early mobilisation, and there are a total of nine of varying kinds on the ward, all with electric height adjustment. In order to meet the differing needs of every patient, the ward has several models from GATE; Bure Rise & Go with power rise, Bure XL for heavy users, Bure Double with a flexible lower frame for patients with a broad gait but also for use in confined spaces, as well as Bure Standard.

“We’ve always used walkers on the ward, and since 2010 only walkers with electric height adjustment. This makes all the difference during standing manoeuvres, and is much appreciated by both patients and personnel,” says Anders Danemo, who also notes an improvement in staff sick leave.

“It’s extremely rare for us to have ward staff off sick due to neck, shoulder and back injuries, in spite of a heavy patient clientele that demands a lot of care, which is an excellent testimony to how well the rehab aids work.”

Socio-economic benefits and shorter treatment times

Electric walkers are used in the initial stage of the rehabilitation process, and the patient switches as soon as possible to other aids such as rollators or walking frames, before finally walking completely unaided. While physiotherapists and occupational therapists initiate therapy programmes for each individual patient, all staff are well trained in the importance of early mobilisation and ambulatory therapy.

“Early mobilisation is not only important for the patient and for shortening patient care times, but is also of great consequence from a socio-economic point of view as it allows an increase in the flow of patients,” explains Anders.

During 2014, Ward 16 achieved the performance target of treating patients in just less than 10 months compared to 12 months in 2011. This is a productivity increase of almost 20 per cent at very nearly the same staffing level. A result Anders Danemo is extremely satisfied with:

“Our capable, dedicated staff and their outstanding rehab aids are the principle reasons for the excellent results, and we are pleased and proud of them. They make it pretty clear that our methods work.”

Product Details

Bure™ Double 2.0

Max user weight: 150kg

Width: 64-95cm

Length: 87cm

Height: 85-125cm