Management of Neck Weakness in MND/ALS: Finding Uplifting Solutions

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Background

• Incidence Rate of Head Drop
  – 1.3% - 2.9% (Gourie-Devi et al, 2003; Uemura et al, 2013)
  – Head drop onset MND/ALS= 0.6% (Pinto et al, 2013)

• Onset of Head Drop
  – 3 months to 8 years post diagnosis (Gourie-Devi et al, 2003; Uemura et al, 2013)

• Correlation with poor respiratory function (De Carvalho et al, 2010; Nakamura et al, 2013)
Issues associated with Head Drop

- Swallow
- Breathing/NIV
- Visual Field
- AT for communication/computer access
- Pain
- Pressure injuries
- Social embarrassment
- Carer stress

(Gourie-Devi et al, 2003; Alghadir et al, 2017; Burakgazi et al, 2019; Oliver, 2019)
Head Support Strategies

- Positioning
  - Recliner
  - High Back Chair
  - Wheelchair

- Neck collars
  - Soft collar
  - Hard collar

- Wheelchair Headrests
Positioning
Collars

Soft Collar  Hensinger  Oxford  Headmaster

LA Wire  Aspen Vista  Philadelphia  Head Up

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Headrests
Case Study 1
Case Study 2
Case Study 3
Case Study 5
Summary

- Positioning is vital
- There is no recipe
- Patient centred care
- Adapt to MND progression
- Be creative with head supports!
• De Carvalho M, Pinto S, Swash M. Association of paraspinal and diaphragm denervation in ALS. Amyotroph Lateral Scler. 2010;11(1-2):63-6
• Pinto S, de Carvalho M. Dropped head presentation in ALS. Amyotroph Lateral Scler Frontotemporal Degener. 2013 Apr;14(3):235
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