



UNDER THE HIGH PATRONAGE
OF HIS MAJESTY KING MOHAMMED VI



ISPRM 2025 PROGRAM



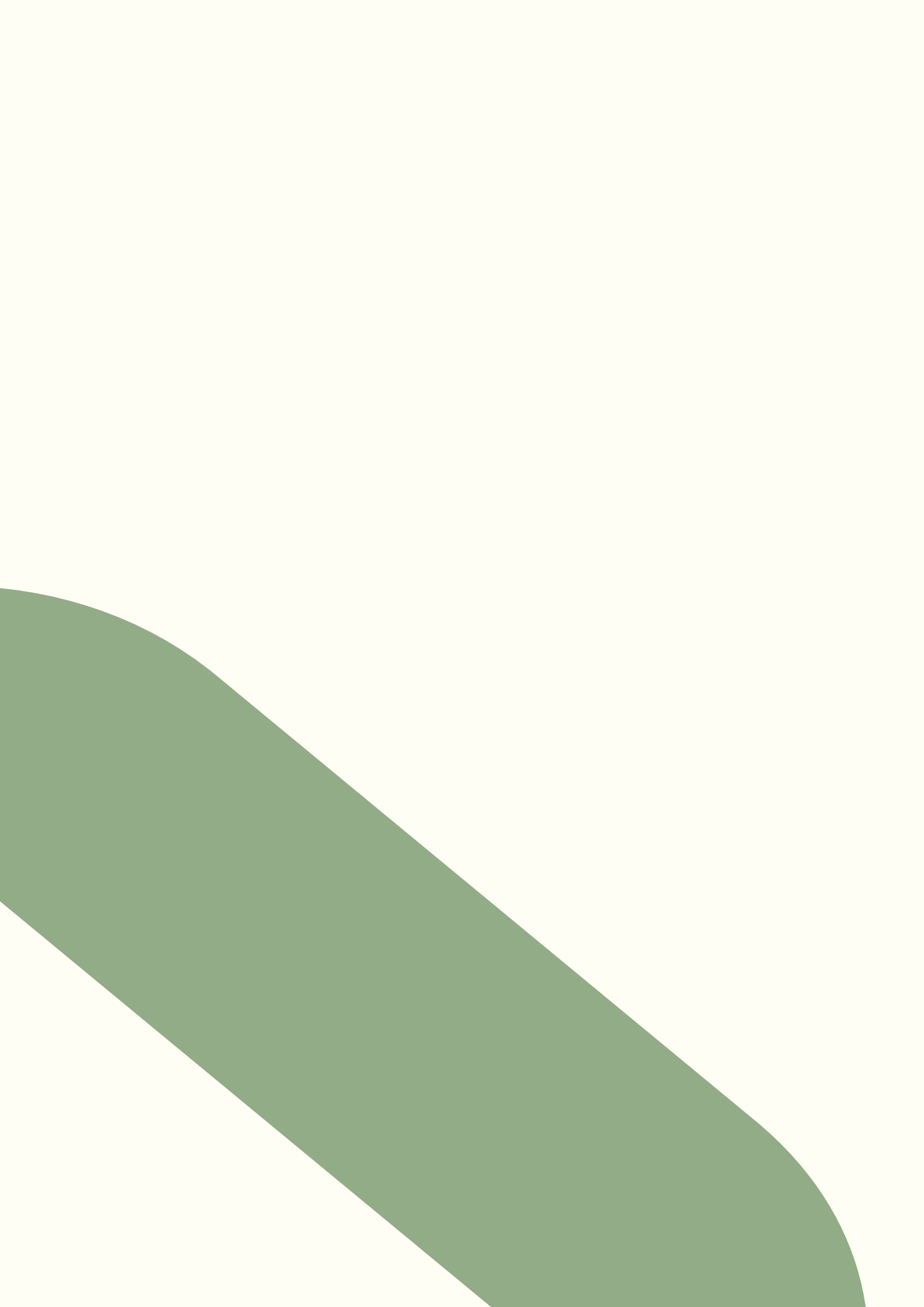




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UNDER THE HIGH PATRONAGE OF HIS MAJESTY KING MOHAMMED VI



WE HAVE ALWAYS BEEN COMMITTED TO PLACING THE MOROCCAN CITIZEN AT THE CENTER OF THE DEVELOPMENT PROCESS, OF WHICH HE CONSTITUTES THE MAIN PURPOSE. ALSO, WE HAVE ALWAYS CONSIDERED THAT THE MAJOR AFFAIRS OF THE COUNTRY SHOULD BE HANDLED WITHIN THE FRAMEWORK OF A PARTICIPATORY AND INCLUSIVE APPROACH TO GUARANTEE THE INVOLVEMENT OF ALL THE VITAL FORCES OF THE NATION.

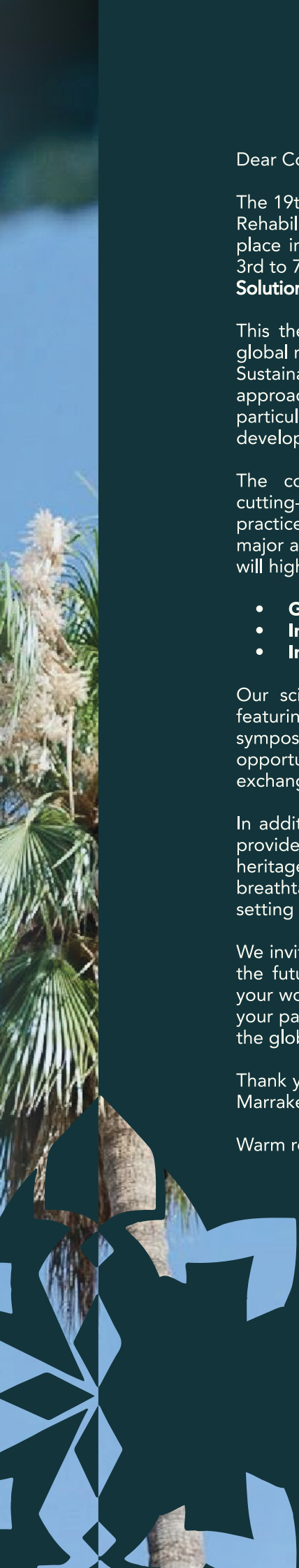
HIS MAJESTY KING MOHAMMED VI

EXTRACT FROM THE SPEECH TO THE NATION ON THE OCCASION OF THE 66TH ANNIVERSARY OF THE REVOLUTION OF THE KING AND THE PEOPLE AUGUST 2020

MESSAGE FROM THE CONGRESS PRESIDENT



Pr. Samia KARKOURI,
President of the 19th ISPRM
World Congress Marrakesh 2025
(ISPRM25)



Dear Colleagues,

The 19th World Congress of the International Society of Physical and Rehabilitation Medicine (ISPRM) will be an exceptional event taking place in the beautiful city of Marrakesh, Morocco, from November 3rd to 7th, 2025. This congress will be held under the theme **“Global Solutions in Rehabilitation: (Re)visiting Africa Before 2030.”**

This theme underscores the critical role Africa plays in advancing global rehabilitation solutions while aligning with the United Nations’ Sustainable Development Goals. Together, we will explore innovative approaches to address rehabilitation needs worldwide, with a particular emphasis on inclusivity, equity, and sustainable development.

The congress will serve as a dynamic platform for sharing cutting-edge research, groundbreaking discoveries, and innovative practices in physical and rehabilitation medicine. While covering all major areas of clinical and scientific interest in the field, the program will highlight topics that resonate deeply with the theme, including:

- **Global Challenges and Opportunities in Rehabilitation**
- **Innovative Technologies for Accessible Care**
- **Integrated Rehabilitation Systems and Policies**

Our scientific program promises to be engaging and enriching, featuring pre-congress workshops, plenary sessions, thematic symposia, and free paper presentations. Participants will have the opportunity to learn from distinguished international experts and exchange knowledge with peers from across the globe.

In addition to the scientific sessions, the 19th ISPRM Congress will provide a unique opportunity to experience Morocco’s rich cultural heritage and hospitality. Marrakesh, with its vibrant history, breathtaking landscapes, and diverse traditions, offers the perfect setting for a memorable congress.

We invite you to join us in Marrakesh as we come together to shape the future of rehabilitation medicine. Whether through presenting your work, engaging in discussions, or exploring new collaborations, your participation will help us create a lasting impact and strengthen the global rehabilitation community.

Thank you for your support, and I look forward to welcoming you to Marrakesh in November 2025.

Warm regards,

MESSAGE FROM THE PRESIDENT OF SOMAREF



Dear Colleagues,

As President of SOMAREF and Chair of the Scientific Committee, it is with great pleasure that I invite you to join us in Marrakesh, the historic and vibrant cultural heart of Morocco, for the 19th ISPRM Congress.

This event represents a unique opportunity to combine Moroccan hospitality with rich and dynamic scientific discussions, all aimed at advancing global rehabilitation practices and enhancing patient care worldwide.

The central theme of this year's congress, "Global Solutions in Rehabilitation: 'Re'visiting Africa Before 2030," reflects our shared vision of building innovative, inclusive, and evidence-based approaches to rehabilitation. This theme invites us to explore the multifaceted and interdisciplinary nature of our field, focusing on improving functional outcomes for individuals through advanced diagnosis, treatment, and management of impairments and disabilities.

We warmly encourage you to actively participate in shaping this congress by submitting your abstracts, workshops, and proposals.

Your contributions will be integral to creating a program that showcases the latest research, innovations, and evidence-based practices in rehabilitation.

Together, we are dedicated to fostering a platform for meaningful exchanges, groundbreaking ideas, and collaborative innovation.

Join us in Marrakesh for this extraordinary event, where science, culture, and global collaboration intersect to shape the future of rehabilitation. We look forward to welcoming you to what promises to be an unforgettable and impactful congress.

Thank you

Pr. Abdellatif EL FATIMI,
President of SOMAREF

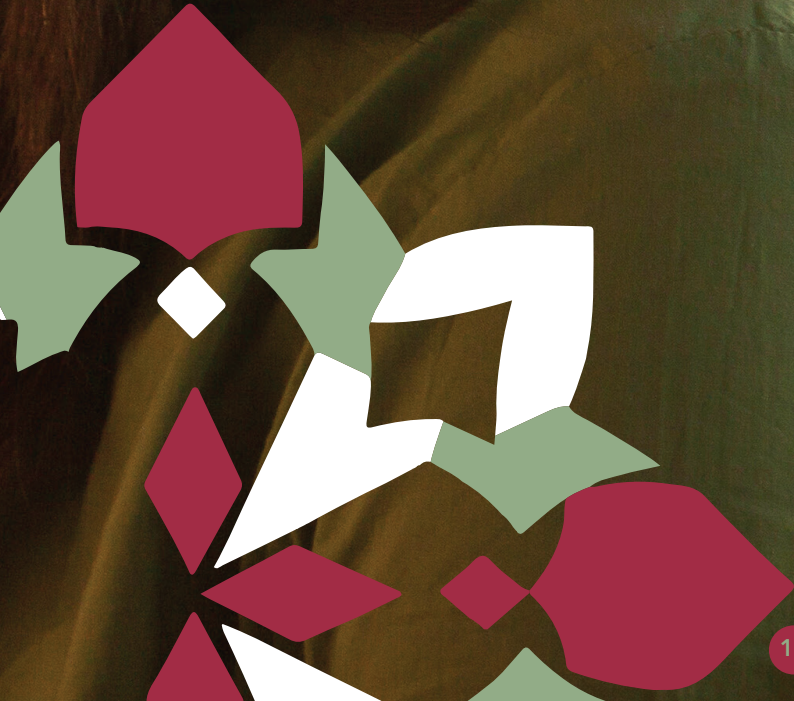




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ISPRM

INTERNATIONAL SOCIETY OF PHYSICAL
AND REHABILITATION MEDICINE

The International Society of Physical and Rehabilitation Medicine (ISPRM) serves as the global authority in PRM, uniting a worldwide network of professionals dedicated to promoting rehabilitation and disability management.

ISPRM plays a crucial role in bridging PRM practices between diverse regions, cultures, and disciplines, creating a platform for knowledge-sharing, policy advocacy, and the development of global standards in physical and rehabilitation medicine. This commitment to excellence makes ISPRM a key partner for SOMAREF and a driving force behind the 2025 World Congress.

The mission of the International Society for Physical and Rehabilitation Medicine (ISPRM) is to optimize functioning and health-related quality of life and minimize disability in persons with disabilities and medical problems throughout the world.



SOMAREF

MOROCCAN SOCIETY OF PHYSICAL
AND REHABILITATION MEDICINE

SOMAREF, the Moroccan Society of Physical and Rehabilitation Medicine, represents a passionate community of professionals dedicated to the advancement of physical and rehabilitation medicine (PRM) across Morocco.

Our mission is to support the highest standards of care and to foster collaboration, research, and education within the PRM field. By uniting healthcare practitioners, researchers, and educators, SOMAREF drives innovative approaches to rehabilitation and advocates for the development of accessible, high-quality rehabilitation services throughout the country.

Through workshops, conferences, and continuous learning opportunities, we are committed to empowering practitioners and enriching patient lives with the latest advancements in rehabilitation medicine.



EXPECTED IMPACT

The 19th ISPRM World Congress Marrakesh 2025 (ISPRM25) is more than a gathering of professionals; it is a transformative event with far-reaching implications for the field of physical and rehabilitation medicine (PRM). Scheduled to take place in Marrakesh, Morocco, from November 3-7, 2025, the congress represents a global platform for collaboration, innovation, and progress, with a profound impact on practitioners, patients, and the discipline as a whole.



Advancing Scientific Excellence

ISPRM25 will provide an unparalleled opportunity for researchers and practitioners to present their latest findings and techniques. By offering a platform for the dissemination of evidence-based practices and innovative solutions, the congress will contribute to the advancement of rehabilitation medicine. Keynote speeches, workshops, and scientific sessions will highlight cutting-edge research, fostering a culture of continuous learning and improvement among attendees. This exchange of knowledge will not only enhance the skills of individual practitioners but also set new standards for the global PRM community.

Encouraging Global Collaboration

With participants from across the globe, ISPRM25 will serve as a melting pot of ideas and experiences. The congress encourages interdisciplinary and cross-cultural collaboration, which is essential for addressing the diverse challenges faced by patients with disabilities and impairments. By creating networks of professionals from different regions, the congress fosters partnerships that transcend borders, enabling the development of universal solutions tailored to varying healthcare landscapes. Such collaboration ensures that advances in rehabilitation medicine benefit patients worldwide, irrespective of geographic or socioeconomic barriers.

Highlighting Africa's Role in Rehabilitation Medicine

The theme of ISPRM25, "Global Solutions in Rehabilitation: (Re)visiting Africa Before 2030," underscores the critical role of Africa in shaping the future of the discipline. Marrakesh, a city known for its rich history and vibrant culture, provides a fitting backdrop to explore how Africa's unique challenges and innovations can inform global strategies. By focusing on the region, the congress will shine a spotlight on local expertise, resources, and practices, inspiring a broader adoption of innovative approaches rooted in resilience and adaptability.

Enhancing Patient Outcomes

At its core, the mission of ISPRM25 is to improve patient outcomes. By advancing the diagnosis, treatment, and management of disabilities, the congress aims to empower healthcare providers with tools and knowledge that directly impact patients' lives. Discussions will emphasize personalized and inclusive care, ensuring that individuals with disabilities achieve optimal functional outcomes and an improved quality of life.

Boosting Local and Global Visibility

Hosting ISPRM25 in Marrakesh also carries significant economic and cultural benefits. Locally, the event will boost Marrakesh's profile as a hub for medical and scientific advancement, encouraging future investments in healthcare infrastructure and research. Globally, it positions the city and Morocco as a leader in hosting impactful events, reinforcing its importance in the global health landscape.

A Legacy of Innovation and Collaboration

The impact of ISPRM25 will extend far beyond the congress itself. By uniting experts, facilitating groundbreaking discussions, and showcasing innovations, the event will leave a lasting legacy on the field of PRM. It is a unique opportunity to shape the future of rehabilitation medicine, making it more inclusive, effective, and accessible for patients worldwide.

ISPRM25 is not just an event

It is a movement toward a better future in rehabilitation medicine.



www.isprm.org





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THE SPORTS & REHABILITATION SESSIONS

WHEN PERFORMANCE MEETS RECOVERY

Sport & Exercise in Rehabilitation

A Central Theme Driving Innovation, Function and Inclusion at ISPRM 2025

As the burden of chronic disease, disability, and age-related decline continues to rise, Physical and Rehabilitation Medicine (PRM) must boldly integrate physical activity and sport as core therapeutic pillars. At ISPRM 2025, this vision takes center stage with a rich series of sessions and workshops under the theme:

“Sport & Exercise in Rehabilitation” — uniting science, clinical innovation, and human rights.

Held in Marrakesh, under the global theme “Global Solutions in Rehabilitation: (Re)visiting Africa Before 2030”, this congress brings together leading experts to explore how movement restores not just function—but confidence, participation, and equity.

Why This Track Matters

- These sessions reflect PRM’s expanding role in health promotion, social participation, and long-term disability care.
- They support WHO Rehabilitation 2030 goals and global disability rights frameworks.
- They offer scalable models for both high-resource and low-resource settings.

At ISPRM 2025, sport and exercise are not just adjuncts—they are accelerators of recovery and catalysts for societal change.

Because every person deserves to move, recover, and belong.

AFRICA TAKES THE LEAD WITH ITS FIRST-EVER DEDICATED SESSION

A STRATEGIC TURNING POINT FOR GLOBAL REHABILITATION

At **ISPRM 2025**, Africa takes the lead with its first-ever dedicated session. This milestone will highlight the continent's leadership, innovation, and commitment to advancing **Physical and Rehabilitation Medicine (PRM)**.

For the first time in ISPRM history, Africa will not only be represented—it will be leading the conversation. Hosted in Marrakesh, where cultures and continents intersect, the Africa Session marks a strategic shift in global rehabilitation dynamics.

As a result, Africa is no longer seen solely as a recipient of solutions. Instead, it is emerging as a provider of scalable, resilient models that can inform global practice.

Aligned with the theme “Global Solutions in Rehabilitation: (Re)visiting Africa Before 2030,” the session provides a space to explore practical answers to shared challenges. More importantly, it invites the world to learn from African perspectives and innovations.

Furthermore, the session will feature speakers from Morocco, Tunisia, Ghana, Namibia, Türkiye, Pakistan, the UK, and the US. Together, they will explore topics ranging from clinical system development to emergency care and peer engagement.

Africa takes the lead with its first-ever dedicated session, offering a forward-looking vision that connects regional experience with global impact.

Session Highlights

- Keynote: *State of PRM in Africa*
- Regional insights from North and Sub-Saharan Africa
- South-South exchange on spinal cord injury and pain management
- Workshop: *Education and sustainability in low-resource settings*
- Dialogues on peer engagement and innovation in care

In conclusion, this session is not a sidebar—it is a central pillar of ISPRM25. It invites institutions, NGOs, ministries, and private partners to collaborate and amplify Africa's voice in shaping tomorrow's rehabilitation systems.

Join us in Marrakesh, November 3–7, 2025. Be part of a global turning point—led from Africa.

The background of the advertisement is a photograph of a modern, industrial-style office. It features a large wooden table with several leather chairs. On the table are various items like papers, a laptop, a coffee cup, and a glass of water. A large window with a brick wall and a potted plant are also visible. The ceiling has exposed wooden beams and a black metal track with a light fixture.

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ARTIFICIAL INTELLIGENCE & NEW TECHNOLOGIES

EXPLORING THE FUTURE FRONTIERS OF REHABILITATION

As **Physical and Rehabilitation Medicine (PRM)** enters a new technological era, the integration of Artificial Intelligence (AI), digital platforms, connected sensors, robotics, and digital twins is profoundly transforming clinical practice. ISPRM25 will dedicate a dynamic and multidisciplinary session to these emerging innovations, bringing together experts, researchers, and clinicians to examine the opportunities and challenges of this ongoing revolution.

Highlights of this cutting-edge session include:

The use of LLMs (Large Language Models) such as Gemini and ChatGPT to generate patient education materials, clinical documentation, and literature reviews.

Hybrid care models combining tele-rehabilitation, intelligent platforms, and remote monitoring — featuring practical insights from Digi-CaRe in oncology and Skåne Online in Sweden.

Precision and personalized rehabilitation powered by AI: functional neuroimaging, biomarkers, and multidimensional data (psychosocial, genetic, environmental) to predict rehabilitation trajectories.

Immersive and interactive technologies: digital twins, virtual reality, wearable sensors, and movement simulators enabling more effective and engaging rehabilitation.

AI-driven clinical decision-making tools and intelligent triage to optimize human and logistical resources, especially in fragile or recovering healthcare systems.

This transversal session includes plenary lectures, hands-on workshops, oral communications, and tech showcases, with broad international participation from Sweden, Poland, Portugal, the USA, China, Morocco, and beyond.



UNDER THE HIGH PATRONAGE OF HIS MAJESTY KING MOHAMMED VI

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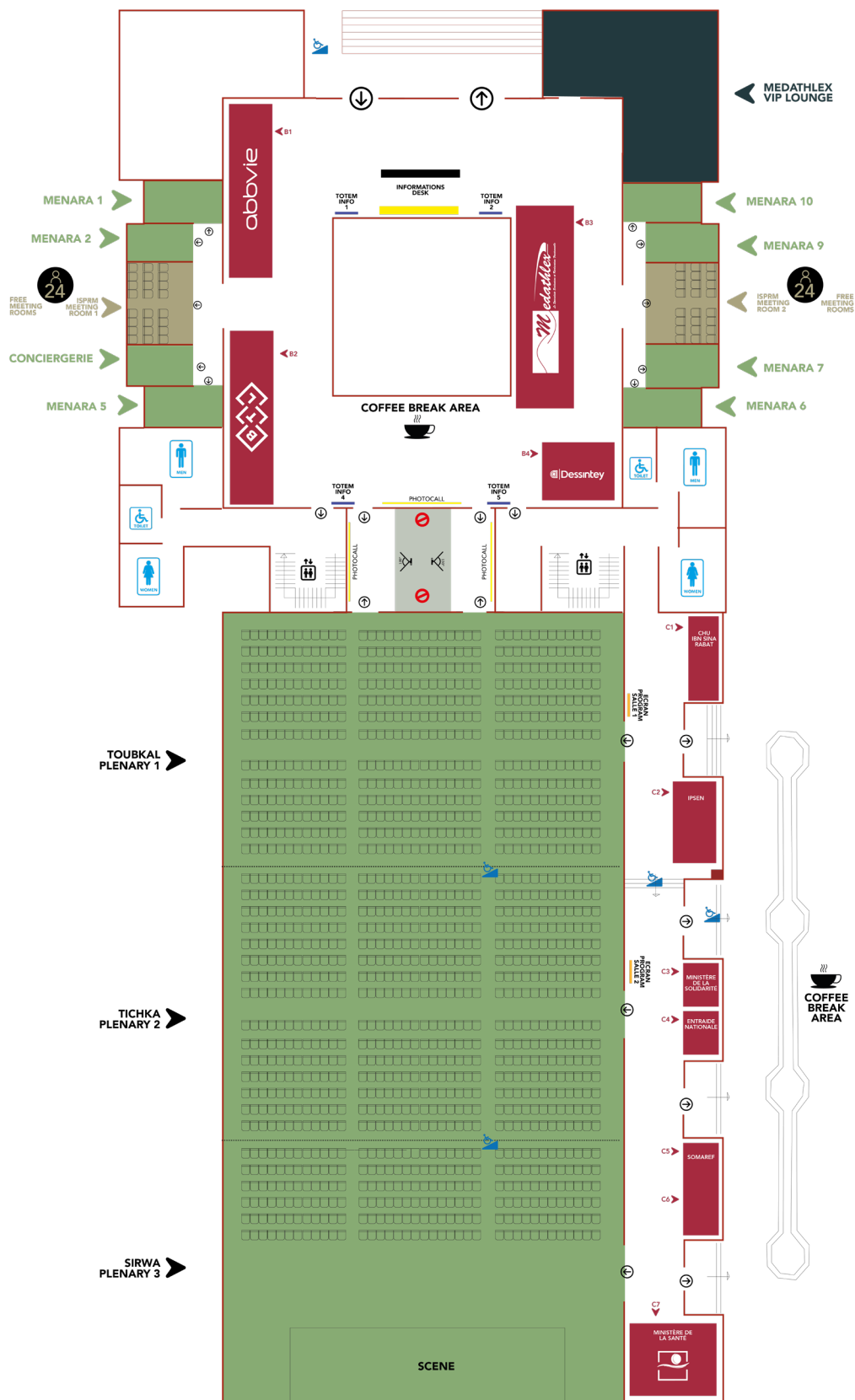


REGISTRATION
AND BADGING
AREA

OUTSIDE
MAIN ACCESS
TO VENUE

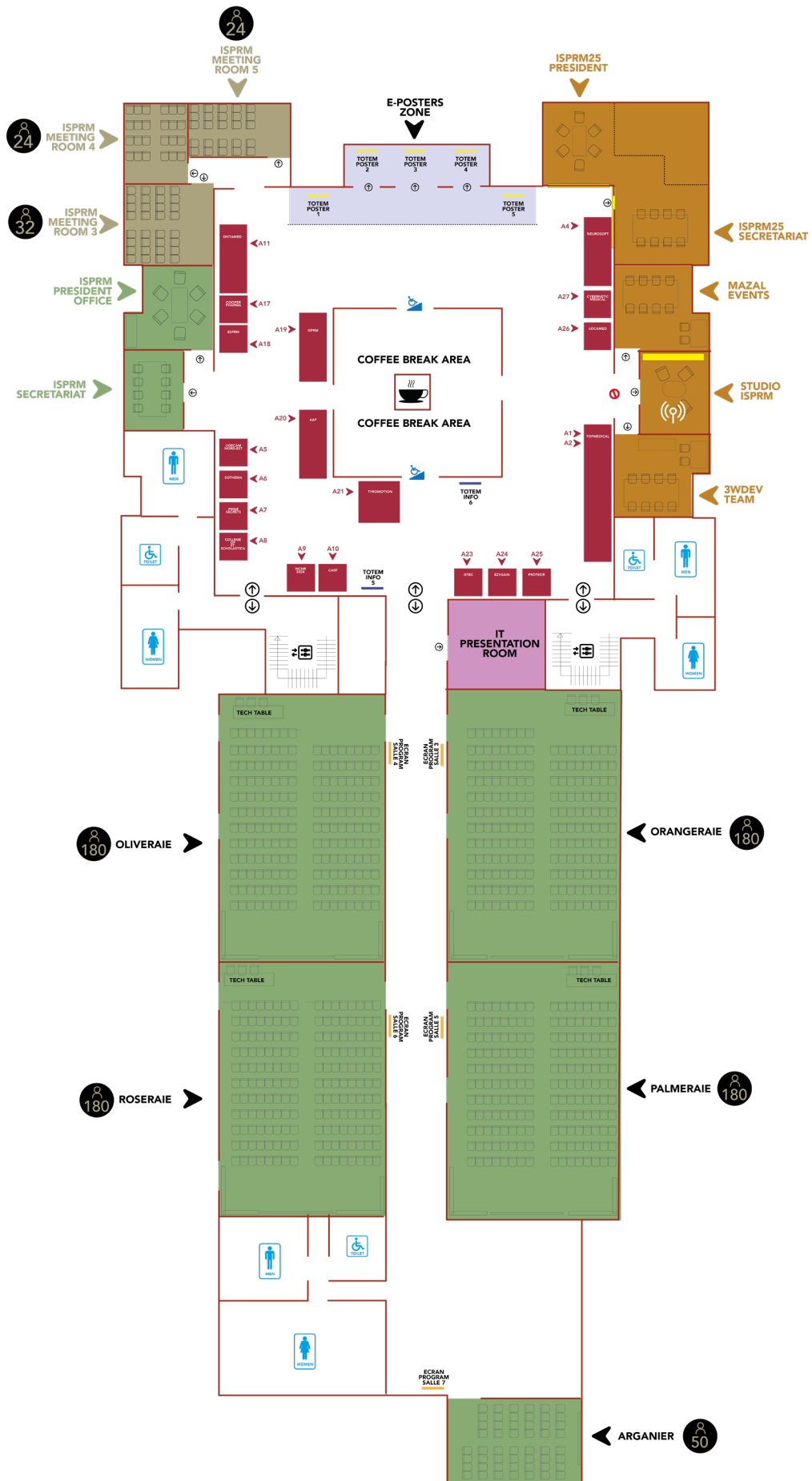
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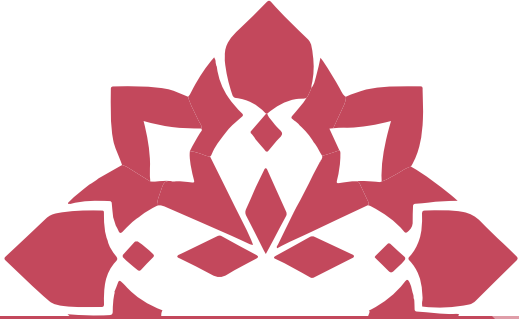
FLOOR PLAN



SUB LEVEL

FLOOR PLAN





PROGRAM DAY 1

SUNDAY 2/11/2025



08:30 - 12:30**OLIVERAIE**

COURSE

USPRM COURSE BASIC**INSTRUCTORS (ALPHABETICAL ORDER)**

AHMED EL-OUIMRI, AMIT BHARGAVA, BERKAN ABACIOĞLU, BERKAYYALÇINKAYA, CARMELO PIRRI, CHRIS VISCO, FATİH TOK, FAZİL AKSAKAL, FURKAN ÇOLAK, HASANOCAK, JAKUB JACISKO, JORGE BARBOSA, KAMAL MEZIAN, LEVENT ÖZÇAKAR, NAVITA NYVAS, NIMISH MITTAL, PELİN ANALAY

ONLINE LECTURERS (ALPHABETICAL ORDER)

KE-VIN CHANG, MURAT KARA, BAYRAM KAYMAK, BUĞRA İNCE, VINCENZO RICCI, CHUEH-HUNG WU

08.30

OPENING

08.45

MUSCULOSKELETAL US IN PRM

09.30

BASIC PRINCIPLES AND SETTINGS

10.15

COFFEE BREAK

10.30

EVALUATION OF THE SHOULDER

10.45

PRACTICE

08:30 - 12:30**ORANGERAIE**

COURSE

USPRM COURSE ADVANCED**INSTRUCTORS (ALPHABETICAL ORDER)**

AHMED EL-OUIMRI, AMIT BHARGAVA, BERKAN ABACIOĞLU, BERKAYYALÇINKAYA, CARMELO PIRRI, CHRIS VISCO, FATİH TOK, FAZİL AKSAKAL, FURKAN ÇOLAK, HASANOCAK, JAKUB JACISKO, JORGE BARBOSA, KAMAL MEZIAN, LEVENT ÖZÇAKAR, NAVITA NYVAS, NIMISH MITTAL, PELİN ANALAY

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08.30

OPENING

08.45

MUSCULOSKELETAL US IN PRM

09.30

BASIC PRINCIPLES AND SETTINGS

10.15

COFFEE BREAK

10.30

SHOULDER PATHOLOGIES

11.00

ELBOW PATHOLOGIES

11.30

WRIST/HAND PATHOLOGIES

12.00

DISCUSSION

08:30 - 12:30**ROSERAIIE**

LONG WORKSHOP

**LEARNING FROM MENTORS IN REHABILITATION MEDICINE: PERSPECTIVES AROUND THE GLOBE****ID 14****TOPIC** EDUCATION & TRAINING

SPEAKERS M.TAWAB KHALIL (PAKISTAN)
FARY KHAN (AUSTRALIA)
FAROOQ RATHORE (PAKISTAN)
PAUL WINSTON (CANADA)
ROCHELLE DY (USA)
NIÑA CARMELA R. TAMAYO (USA)
TASLEEM UD DIN (BANGLADESH)

CHAIR M.TAWAB KHALIL, FARY KHAN

ATTENDEES 60

EXTRA FEES 50 €

REHABILITATION MEDICINE, A DYNAMIC AND RAPIDLY EVOLVING FIELD, REQUIRES A COMPREHENSIVE AND COLLABORATIVE APPROACH TO PATIENT CARE. AS THE DEMANDS ON HEALTHCARE SYSTEMS INCREASE AND PATIENT NEEDS BECOME MORE COMPLEX, THE ROLE OF MENTORS IN SHAPING THE FUTURE OF REHABILITATION MEDICINE IS MORE CRUCIAL THAN EVER. THIS PROPOSED SCIENTIFIC SESSION AIMS TO EXPLORE THE SIGNIFICANCE OF MENTORSHIP IN EQUIPPING RESIDENTS WITH THE KNOWLEDGE, SKILLS, AND INSIGHTS NEEDED TO EXCEL IN THEIR CAREERS.

MENTORSHIP TRANSCENDS GEOGRAPHICAL BOUNDARIES, AND THIS SESSION WILL BRING TOGETHER EXPERTS AND PRACTITIONERS FROM VARIOUS CORNERS OF THE GLOBE TO SHARE THEIR PERSPECTIVES AND EXPERIENCES. FROM NORTH AMERICA TO EUROPE, ASIA TO AFRICA, AND BEYOND, WE WILL DELVE INTO THE UNIQUE CHALLENGES AND OPPORTUNITIES THAT MENTORSHIP PRESENTS IN DIVERSE CULTURAL AND HEALTHCARE CONTEXTS. WHY IS MENTORSHIP IN REHABILITATION MEDICINE SO VITAL?

MENTORS SERVE AS GUIDES, IMPARTING NOT ONLY CLINICAL KNOWLEDGE BUT ALSO THE ART OF PATIENT-CENTERED CARE, ETHICAL DECISION-MAKING, AND LEADERSHIP SKILLS. FURTHERMORE, MENTORS INSPIRE AND EMPOWER THE NEXT GENERATION OF REHABILITATION MEDICINE PROFESSIONALS, FOSTERING A CULTURE OF CONTINUOUS LEARNING AND INNOVATION.

8H30

INTRODUCTION OF PANELEST AND OPENING REMARKS. M.TAWAB KHALIL

8H35

GLOBAL MENTORSHIP MODELS IN PMR: COMPARATIVE PERSPECTIVES. M.TAWAB KHALIL

8H40

GROUP DISCUSSION: "CHALLENGES FACED FOR IMPLEMENTATION OF VARIOUS GLOBAL MENTORSHIP MODELS" FAROOQ AZAM RATHORE, FARY KHAN, PAUL WINSTON, ROCHELLE DY, TASLEEM UDDIN, NIÑA CARMELA R. TAMAYO, MUHAMMAD TAWAB KHALIL

9H00

PANEL AND GROUP DISCUSSION: CROSS CULTURAL MENTORSHIP: NAVIGATING GLOBAL DIVERSITY IN PMR. FAROOQ AZAM RATHORE, FARY KHAN, PAUL WINSTON, ROCHELLE DY, TASLEEM UDDIN, NIÑA CARMELA R. TAMAYO, MUHAMMAD TAWAB KHALIL,

10H30

PANEL DISCUSSION: INNOVATIVE APPROACHES TO MENTORSHIP IN PMR: LEVERAGING TECHNOLOGY AND NEW MODELS. FAROOQ AZAM RATHORE, FARY KHAN, PAUL WINSTON, ROCHELLE DY, TASLEEM UDDIN, NIÑA CARMELA R. TAMAYO, MUHAMMAD TAWAB KHALIL

11H00

CLOSING REMARKS. M.TAWAB KHALIL

08:30 - 12:30

PALMERAIE

LONG WORKSHOP



ENHANCING DIGITAL-CLINICAL COMPETENCE IN CANCER REHABILITATION

ID 60

TOPIC ONCOLOGY

SPEAKERS PATRIK GÖRANSSON (SWEDEN)
CARL JOHAN ORRE (SWEDEN)

CHAIR PATRIK GÖRANSSON, CARL JOHAN ORRE

ATTENDEES 60

EXTRA FEES 50 €

WORKING UNDER A PANDEMIC SITUATION WITHIN SPECIALIZED CANCER REHABILITATION 2020-2023 HAD ITS CHALLENGES BUT PROVIDED ALSO AT WINDOW OF OPPORTUNITY WHEN IT COMES TO RETHINK HOW TO MAKE CANCER REHABILITATION MORE AVAILABLE TO OUR PATIENTS.

DIGI-CARE IS A COMPREHENSIVE PROJECT PLATFORM AIMED AT DEVELOPING DIGITAL-CLINICAL COMPETENCE AND ENHANCING PERSON-CENTERED CARE WITHIN CANCER REHABILITATION. WITH THE ESTABLISHMENT OF CANCER REHABILITATION SKÅNE ONLINE, AN INTERDISCIPLINARY TEAM UTILIZING DIGITAL TOOLS, THE PROJECT HAS SIGNIFICANTLY INCREASED ACCESS TO ADVANCED CANCER REHABILITATION IN SKÅNE, SWEDEN.

CONTINUOUS DEVELOPMENT PROJECTS ARE IN PROGRESS TO FURTHER THIS MISSION. DIGITAL-CLINICAL COMPETENCE IS AN IMPORTANT SKILL IN FUTURE HEALTHCARE, COMBINING TRADITIONAL CLINICAL PRACTICE WITH DIGITAL TOOLS AND ENVIRONMENTS.

8H30

- WELCOME AND INTRODUCTION OF WORKSHOP LEADERS
- OVERVIEW OF OBJECTIVES AND EXPECTED OUTCOMES.
- PARTICIPANT EXPERIENCE-SHARING: O BRIEF INTRODUCTIONS (WHO ARE YOU? WHAT IS YOUR EXPERIENCE WITH DIGITAL REHABILITATION?)
- INTERACTIVE POLL OR SHORT DISCUSSION ON DIGITAL CHALLENGES IN CANCER REHABILITATION.

9H00

- MINI-PRESENTATIONS (10-15 MIN EACH):
- LESSONS LEARNED FROM DIGI-CARE, CANCER REHABILITATION SKÅNE ONLINE, AND AMBER.
- DISCUSSION ON KEY SUCCESS FACTORS: PATIENT SAFETY, DIGITAL LITERACY, AND INTEGRATION INTO CANCER CARE.
- PARTICIPANT REFLECTIONS:
- WHAT RESONATES WITH YOUR EXPERIENCE?
- WHAT CHALLENGES DO YOU SEE IN YOUR OWN SETTING?

9H45

- SMALL GROUP ACTIVITY:
- PARTICIPANTS SELECT OR BRING THEIR OWN REAL-LIFE CASE.
- USE A STRUCTURED TEMPLATE (A3-MODEL) TO MAP:
- CURRENT REHABILITATION PROCESS.
- DIGITAL INTERVENTIONS USED OR CONSIDERED.
- BARRIERS AND ENABLERS FOR IMPLEMENTATION.
- FACILITATED GROUP DISCUSSION:
- SHARING INSIGHTS ACROSS GROUPS.
- IDENTIFYING COMMON THEMES AND CHALLENGES.

10H45

- BREAK

11H00

- SCENARIO-BASED WORKSHOP:
- GROUPS DEVELOP A DIGITAL REHABILITATION INTERVENTION FOR A HYPOTHETICAL OR REAL CASE.
- FOCUS ON PATIENT PATHWAYS, DIGITAL TOOLS, AND INTERDISCIPLINARY COLLABORATION.
- ROLE-PLAYING EXERCISE:
- SIMULATING DIGITAL CONSULTATIONS OR PATIENT INTERACTIONS.
- EXPLORING HOW TO INTEGRATE DIGITAL SOLUTIONS INTO THE CLINICAL WORKFLOW.
- FEEDBACK & REFINEMENT:
- GROUPS PRESENT THEIR SOLUTIONS.
- PEER AND EXPERT FEEDBACK ON FEASIBILITY AND IMPLEMENTATION STRATEGIES.

12H00

- KEY TAKEAWAYS FROM THE WORKSHOP.
- OPEN DISCUSSION: HOW CAN PARTICIPANTS APPLY THESE INSIGHTS IN THEIR OWN SETTINGS?
- FINAL REFLECTIONS & NETWORKING.

08:30 - 12:30

ARGANIER

LONG WORKSHOP



STANDARD APPROACHES TO ASSESSING AND REPORTING INDIVIDUAL FUNCTIONING – FROM THE ICF TO CLINFIT

ID 115

TOPIC DIAGNOSTIC & PRACTICE

SPEAKERS MELISSA SELB (SWITZERLAND)
BHASKER AMATYA (AUSTRALIA)
XIAOLEI HU (SWEDEN)
MARTA IMAMURA (BRAZIL)
GEROLD STUCKI (SWITZERLAND)
JULIA PATRICK ENKGASAN (MALAYSIA)

CHAIR JULIA PATRICK ENKGASAN, XIAOLEI HU

ATTENDEES 30

EXTRA FEES 50 €

THIS ENGAGING AND INTERACTIVE WORKSHOP WILL BEGIN WITH A PRACTICAL MINI-ICF TRAINING THAT INCLUDES INTERACTIVE EXERCISES TO INTRODUCE THE BIOPSYCHOSOCIAL FRAMEWORK OF THE ICF AND THE BASIC STRUCTURE AND CODES OF THE CLASSIFICATION. THE WORKSHOP WILL CONTINUE WITH AN INTRODUCTION OF ISPRM'S ICF-BASED CLINICAL TOOL, USING A CASE TO EXEMPLIFY THE USE OF THE "STANDARD" VERSION OF CLINFIT IN PRACTICE, WHEREBY ALSO HIGHLIGHTING SOME CONSIDERATIONS REGARDING THE DIFFERENT RATING OPTIONS.

WITH BASIC KNOWLEDGE OF WHAT CLINFIT IS, THE WORKSHOP WILL PRESENT THE RESULTS OF METHODOLOGICAL WORK AIMED TO DEVELOP PATIENT GRADING AND SUBSCALES AND TO ESTABLISH MINIMAL CLINICALLY IMPORTANT DIFFERENCE FOR CLINFIT, AS WELL AS THE EXPLORATION OF THE POTENTIAL USE OF FUNCTIONING TRAJECTORIES FOR CLINICAL DECISION-MAKING.

ILLUSTRATIVE CASE EXAMPLES TO ENGAGE THE WORKSHOP PARTICIPANTS WILL BE GIVEN. IN ADDITION TO THIS METHODOLOGICAL WORK, THE CLINFIT COMMITTEE HAS ADVANCED ITS WORK ON A VERSION OF CLINFIT FOR ASSESSING AND REPORTING FUNCTIONING OF PERSONS WITH A MUSCULOSKELETAL CONDITION CALLED "CLINFIT-MSK".

THE WORKSHOP WILL PRESENT THE CURRENT STATUS OF THIS INITIATIVE. THE WORKSHOP WILL ALSO PROVIDE A PLATFORM FOR PARTICIPANTS TO PROVIDE INPUT AND IDEAS FOR ADVANCING CURRENT CLINFIT COMMITTEE INITIATIVES IN A "SOUNDBOARD" SESSION. THIS WILL BE FOLLOWED BY A SESSION ON INSIGHTS FROM THE LAST 7 YEARS OF CLINFIT WORK AND A VISION FOR THE CLINFIT COMMITTEE'S CONTRIBUTION TO FULFILLING ISPRM'S FOUR-PILLAR STRATEGIC PLAN.

ALTHOUGH THERE WILL BE AN OPPORTUNITY TO ASK QUESTIONS AFTER EACH OF THE AFOREMENTIONED SESSIONS, THERE WILL ALSO BE A FINAL OPPORTUNITY TO ASK QUESTIONS OR MAKE COMMENTS IN A QUESTION & ANSWER SESSION BEFORE THE WORKSHOP CONCLUDES.

8H30

WELCOME AND INTRODUCTION OF WORKSHOP BACKGROUND AND OBJECTIVES

8H35

BRINGING THE ICF CLOSER TO HOME – A PRACTICAL MINI-ICF TRAINING WITH SHORT INTERACTIVE EXERCISES, THIS SESSION WILL INTRODUCE THE BIOPSYCHOSOCIAL FRAMEWORK OF THE ICF AND THE BASIC STRUCTURE AND CODES OF THE CLASSIFICATION.

CLINFIT - ISPRM'S ICF-BASED CLINICAL TOOL

THIS PART OF THE WORKSHOP WILL INTRODUCE THE ELEMENTS OF THE "STANDARD" VERSION OF CLINFIT AND WILL USE A CASE TO EXEMPLIFY THE USE OF CLINFIT AND TO HIGHLIGHT SOME CONSIDERATIONS THE DIFFERENT RATING OPTIONS. Q&A WILL FOLLOW. ENHANCING CLINFIT'S UTILITY IN REAL-LIFE CLINICAL PRACTICE

THIS SESSION WILL PRESENT THE RESULTS OF METHODOLOGICAL WORK TO DEVELOP PATIENT GRADING AND SUBSCALES, ESTABLISH MINIMAL CLINICALLY IMPORTANT DIFFERENCE, AND EXPLORE THE POTENTIAL USE OF FUNCTIONING TRAJECTORIES FOR CLINICAL DECISION-MAKING. ILLUSTRATIVE CASE EXAMPLES TO ENGAGE THE WORKSHOP PARTICIPANTS WILL BE GIVEN. Q&A WILL FOLLOW.

10H35

CLINFIT-MSK – A NEW FRONTIER IN THE FUNCTIONAL ASSESSMENT OF PERSONS WITH A MUSCULOSKELETAL CONDITION.

THE ASSESSMENT AND REPORTING OF FUNCTIONING OF PERSONS WITH A MUSCULOSKELETAL CONDITION (MSK) HAS TAKEN A STEP FORWARD TOWARD STANDARDIZATION. THIS PART OF THE WORKSHOP WILL PRESENT THE CURRENT STATUS OF

THE WORK TO DEVELOP THE CLINFIT VERSION FOR MSKS. Q&A WILL FOLLOW.

SOUNDBOARD OF IDEAS FOR ONGOING CLINFIT COMMITTEE WORK

THIS PART OF THE WORKSHOP WILL BRIEFLY INTRODUCE THE CLINFIT COMMITTEE INITIATIVES, E.G. PLANNED INTERNATIONAL STUDIES TO TEST AND VALIDATE THE FINDINGS FROM THE ONGOING PROJECTS, CLINFIT WEEK, APP DEVELOPMENT, ETC. AND WILL ACTIVATE THE WORKSHOP PARTICIPANTS TO PROVIDE INPUT AND IDEAS FOR ADVANCING THESE INITIATIVES.

LOOKING BACK AND BEYOND THE HORIZON - INSIGHTS AND OUTLOOK FOR CLINFIT WORK - OUTGOING CO-CHAIR GEROLD STUCKI WILL SHARE HIS INSIGHTS FROM THE LAST 7 YEARS OF CLINFIT WORK AS WELL AS A VISION FOR THE CLINFIT COMMITTEE'S CONTRIBUTION TO FULFILLING ISPRM'S FOUR-PILLAR STRATEGIC PLAN.

11H30

QUESTION & ANSWER (Q&A) AND CLOSING REMARKS

10H30

SESSION 3: NOTEBOOK LM

- INTRODUCTION TO NOTEBOOK LM FOR RESEARCH SUMMARIZATION AND DATA ANALYSIS.
- GUIDED RESEARCH TASK: ANALYZING PMR PATIENT OUTCOMES AND GENERATING A SUMMARY PAPER.

11H15

SESSION 4: ADVANCED PROMPTING AND INTEGRATION

- ITERATIVE PROMPTING, LANGUAGE STYLE, AND CREATIVE APPLICATIONS.
- INTEGRATING GEMINI WITH EXISTING CLINICAL WORKFLOWS.

11H45

Q&A AND WRAP-UP: OPEN DISCUSSION AND KEY TAKEAWAYS.

12:30 - 14:00

BREAK

14:00 - 18:00

OLIVERAIE

COURSE

USPRM COURSE BASIC



INSTRUCTORS (ALPHABETICAL ORDER)

AHMED EL-OU MRI, AMIT BHARGAVA, BERKAN ABACIOĞLU, BERKAYYALÇINKAYA, CARMELO PIRRI, CHRIS VISCO, FATİH TOK, FAZİL AKSAKAL, FURKAN ÇOLAK, HASANOCAK, JAKUB JACISKO, JORGE BARBOSA, KAMAL MEZIAN, LEVENT ÖZÇAKAR, NAVITA NYVAS, NIMISH MITTAL, PELIN ANALAY

ONLINE LECTURERS (ALPHABETICAL ORDER)

KE-VIN CHANG, MURAT KARA, BAYRAM KAYMAK, BUĞRA İNCE, VINCENZO RICCI, CHUEH-HUNG WU

08.30

OPENING

08.45

MUSCULOSKELETAL US IN PRM

09.30

BASIC PRINCIPLES AND SETTINGS

10.15

COFFEE BREAK

10.30

EVALUATION OF THE SHOULDER

10.45

PRACTICE

14:00 - 18:00**ORANGERAIE**

COURSE

USPRM COURSE ADVANCED**INSTRUCTORS (ALPHABETICAL ORDER)**

AHMED EL-OUNRI, AMIT BHARGAVA, BERKAN ABACIOĞLU, BERKAYYALÇINKAYA, CARMELO PIRRI, CHRIS VISCO, FATİH TOK, FAZİL AKSAKAL, FURKAN ÇOLAK, HASANOCAK, JAKUB JACISKO, JORGE BARBOSA, KAMAL MEZIAN, LEVENT ÖZÇAKAR, NAVITA NYVAS, NIMISH MITTAL, PELIN ANLAY

ONLINE LECTURERS (ALPHABETICAL ORDER)

KE-VIN CHANG, MURAT KARA, BAYRAM KAYMAK, BUĞRA İNCE, VINCENZO RICCI, CHUEH-HUNG WU

08.30

OPENING

08.45

MUSCULOSKELETAL US IN PRM

09.30

BASIC PRINCIPLES AND SETTINGS

10.15

COFFEE BREAK

10.30

SHOULDER PATHOLOGIES

11.00

ELBOW PATHOLOGIES

11.30

WRIST/HAND PATHOLOGIES

12.00

DISCUSSION

14:00 - 16:00**ROSERAIE**

SHORT WORKSHOP

**CLINICAL EVALUATION AND ADVANCED****ID 78****TOPIC** MUSCULOSKELETAL

SPEAKERS FATIMA LMIDMANI (MOROCCO)
ABDELLATIF EL FATIMI (MOROCCO)

CHAIR ABDELLATIF EL FATIMI, FATIMA LMIDMANI**ATTENDEES** 60**EXTRA FEES** 50 €

THIS WORKSHOP WILL FOCUS ON THE CLINICAL EVALUATION OF THE FOOT, WITH A COMPREHENSIVE APPROACH THAT INCLUDES CLINICAL EXAMINATION, OPTICAL PODOSCOPY, AND ELECTRONIC PODOSCOPY. PARTICIPANTS WILL LEARN HOW TO EFFECTIVELY ASSESS FOOT HEALTH THROUGH A SYSTEMATIC CLINICAL EXAM, EXPLORING BOTH TRADITIONAL AND ADVANCED DIAGNOSTIC TECHNIQUES. THE SESSION WILL COVER THE USE OF OPTICAL AND ELECTRONIC PODOSCOPY TO DETECT ABNORMALITIES IN FOOT STRUCTURE AND FUNCTION, OFFERING A DEEPER UNDERSTANDING OF THESE TOOLS' APPLICATIONS IN PRACTICE.

CLINICAL CASE PRESENTATIONS WILL BE USED TO ILLUSTRATE COMMON AND COMPLEX FOOT CONDITIONS, ALLOWING PARTICIPANTS TO APPLY THEIR LEARNING IN REAL-WORLD SCENARIOS. ADDITIONALLY, ATTENDEES WILL HAVE THE OPPORTUNITY TO PERFORM EVALUATIONS ON-SITE, REINFORCING THEIR SKILLS THROUGH HANDS-ON PRACTICE.

THIS WORKSHOP IS DESIGNED TO ENHANCE PARTICIPANTS' DIAGNOSTIC CAPABILITIES, ENABLING THEM TO PROVIDE BETTER CARE FOR PATIENTS WITH VARIOUS FOOT-RELATED ISSUES.

14H00

INTRODUCTION : OVERVIEW OF WORKSHOP OBJECTIVES AND THE IMPORTANCE OF FOOT EVALUATION IN REHABILITATION..

14H15

SESSION 1 : PRINCIPLES OF CLINICAL FOOT EXAMINATION

14H45

SESSION 2 : INTRODUCTION TO PODOSCOPY (OPTICAL & ELECTRONIC).

15H15

BREAK : NETWORKING AND DISCUSSION

15H30

INTERACTIVE SESSION: CASE STUDIES DEMONSTRATING COMMON FOOT PATHOLOGIES AND THEIR CLINICAL IMPLICATIONS. HANDS-ON TRAINING IN PODOSCOPY AND FOOT EVALUATION TECHNIQUES.

15H50

Q&A AND WRAP-UP : OPEN DISCUSSION AND KEY TAKEAWAYS.



THE LEADER IN REHABILITATION EQUIPMENT IN MOROCCO

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Top Medical Rabat

2, rue Tissa sur Av. Allal Ben Abdellah
(derrière le musée d'art contemporain Med VI) - Rabat Centre.
Tél : 05 37 70 06 04 / 48 27 - Fax : 05 37 70 51 06
Vos contacts : Amina ALOUAT 06 61 39 65 39
Hiba BENKATTABA 06 66 67 95 85

Top Medical Casablanca

52, Bd Abdelmoumen. Rés. Al Manar
(entrée principale). Magasin n° 25.
Tél : 05 22 25 09 10 / 41 03 - Fax : 05 22 99 35 89
Votre contact : Fatima Ezzahrae 06 66 87 79 50

Top Medical Fès

Résidence Safae n°176. Quartier El Wafa. Face à la Faculté
de Médecine.
Tél : 05 35 61 65 53 / 65 54 - Fax : 05 35 61 65 52
Votre contact : Rajae EL HASSANI 06 61 30 64 11

Top Medical Marrakech

Villa n°32 lotissement Boumessmar. Avenue Ibn Sina.
Amerchich.
Tél : 05 24 30 71 94 / 74 04 - Fax : 05 24 30 71 81
Vos contacts : Fatima AFTATAH 06 61 30 44 19
Manal NIAGO 06 66 43 75 32



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14:00 - 16:00

PALMERAIE

SHORT WORKSHOP



THE MULTIDISCIPLINARY NEURO-ORTHOPEAEDIC APPROACH FOR PEOPLE WITH POLIO SEQUELAE

ID 123

TOPIC DIAGNOSTIC AND PRACTICE

SPEAKERS VINCENT CARPENTIER (FRANCE)
 PHILIPPE MARQUE (FRANCE)
 FRANÇOIS GENÊT (FRANCE)
 MARJORIE SALGA (FRANCE)

CHAIR PHILIPPE MARQUE

ATTENDEES 60

EXTRA FEES 50 €

DESPITE THE NEAR ERADICATION OF POLIO WORLDWIDE THANKS TO THE VACCINE, PATIENTS WITH POLIO SEQUELAE REMAIN NUMEROUS AND CHALLENGING IN TERMS OF THEIR REHABILITATION CARE. THE CARE OF PATIENTS WITH POLIO SEQUELAE WAS AT THE HEART OF THE STRUCTURING OF THE PRM SPECIALTY AND REMAINS A MODEL FOR LEARNING THE DISCIPLINE.

THE AIM OF THIS WORKSHOP IS TO PRESENT THE CURRENT GLOBAL AND TRANSDISCIPLINARY APPROACH TO PATIENTS WITH POLIO SEQUELAE, IN TERMS OF PREVENTION, ORTHOSIS AND NEURO-ORTHOPEAEDICS.

14H00 INTRODUCTION. FRANÇOIS GENÊT
 14H05 POLIO & FUNCTIONAL ANATOMY. FRANÇOIS GENÊT
 14H30 POLIO & FRACTURE RISK. VINCENT CARPENTIER
 14H40 POLIO & NEURO ORTHOPEAEDICS. MARJORIE SALGA
 15H05 POLIO & ORTHOSIS. FRANÇOIS GENÊT
 15H25 POLIO & PRIMARY PREVENTION. VINCENT CARPENTIER
 15H40 CASES STUDIES, Q&A. VINCENT CARPENTIER, FRANÇOIS GENÊT, MARJORIE SALGA

14:00 - 16:00

ARGANIER

SHORT WORKSHOP



DEVELOPING SPECIALIST REHABILITATION SERVICES IN SUB-SAHARAN AFRICA

ID 43

TOPIC COMMUNITY

SPEAKERS ABAYOMI SALAWU (UK)
 CYNTHIA UDENSI (UK)
 AISHA ANIMASHAWUN (UK)
 FEMI WILLIAMS (UK)
 IHUOMA OKEREKE (UK)

CHAIR ABAYOMI SALAWU, PAUL BOLAJI

ATTENDEES 30

EXTRA FEES 50 €

ORGANISED REHABILITATION SERVICES ARE POORLY DEVELOPED IN SUB-SAHARAN AFRICA. THERE ARE ONGOING EFFORTS BY VARIOUS INDIVIDUALS AND GROUPS TO CHANGE THE NARRATIVE AND SUPPORT LOCAL AGENCIES IN DEVELOPING REHABILITATION SERVICES.

THIS SESSION AIMS TO DELIVER PRESENTATIONS BY REHABILITATION MEDICINE PHYSICIANS FROM AFRICA AND INTERNATIONAL AGENCIES TO EXPLORE VARIOUS STRATEGIES IN DEVELOPING REHABILITATION SERVICES. IT WILL EXPLORE HOW THE SUCCESSFUL DEVELOPMENT OF REHABILITATION SERVICES IN SOME COUNTRIES CAN BE LEVERAGED TO OTHERS. IT WILL HAVE A FOCUS ON NIGERIA, BEING THE MOST POPULOUS COUNTRY IN AFRICA AND AN ECONOMIC POWERHOUSE.

IT IS ENVISAGED THAT IF SERVICES CAN BE DEVELOPED IN NIGERIA, THERE IS LIKELY TO BE A CASCADE EFFECT TO THE WEST AFRICA REGION AND THE REST OF THE CONTINENT. THE SESSION WILL EXPLORE THE MULTIFACETED APPROACH (INCLUDING THE BARRIERS AND FACILITATORS) THAT ARE REQUIRED TO ENGENDER REHABILITATION AS A KEY COMPONENT OF HEALTHCARE DELIVERY IN SUB-SAHARAN AFRICA. TO ACHIEVE THE AIM AND LEARNING OBJECTIVES OF THE SESSION, THE PRESENTATIONS WILL ADDRESS THE FOLLOWING KEY POINTS AND STRATEGIES: REHABILITATION SERVICES CAPACITY BUILDING: COMMUNITY HEALTH WORKERS (CHWS) ARE INTEGRAL COMPONENT OF THE HEALTHCARE SYSTEM IN MOST AFRICAN COUNTRIES AND PLAY A SIGNIFICANT ROLE IN DELIVERING PHYSICAL REHABILITATION SERVICES. THEY ARE INVOLVED IN ASSESSMENTS, CASE MANAGEMENT, HEALTH EDUCATION, COMMUNITY SUPPORT, HEALTH SYSTEMS LINKAGE, AND ADMINISTRATION. THEY DELIVER SERVICES THROUGH HOME-BASED, COMMUNITY-BASED, FACILITY-BASED, OR A COMBINATION OF THESE MODES. COMMUNITY BASED REHABILITATION: HOSPITAL BED BASE IS SEVERELY LACKING ACROSS MOST AFRICAN COUNTRIES.

COMMUNITY BASED REHABILITATION ESPECIALLY HOME BASED, IS LIKELY TO BE THE CORNERSTONE TO SUCCESSFUL DEVELOPMENT OF ENDURING REHABILITATION SERVICES ACROSS MANY SUB-SAHARAN AFRICAN COUNTRIES. INNOVATIVE TECHNOLOGIES IN REHABILITATION: WITH THE RECENT ADVANCES IN DIGITAL TECHNOLOGY AND TELEREHABILITATION, AFRICAN COUNTRIES CAN LEVERAGE ON THIS TO FURTHER ENHANCE THE DELIVERY OF REHABILITATION SERVICES. EXPLORING THE USE OF AFFORDABLE AND LOCALLY AVAILABLE TECHNOLOGIES TO SUPPORT THE DEVELOPMENT OF REHABILITATION SERVICES AND TO GAIN ACCESS TO INTERNATIONAL EXPERTISE THROUGH THE USE OF COMMUNICATION TECHNOLOGY. PARTNERSHIPS AND COLLABORATION: THE INTERNATIONAL REHABILITATION FORUM HAS SUCCESSFULLY SUPPORTED THE DEVELOPMENT OF REHABILITATION SERVICES IN SOME AFRICAN COUNTRIES. SUCH PARTNERSHIPS WITH INTERNATIONAL ORGANISATIONS WILL SUPPORT REHABILITATION INITIATIVES AND TRAINING.

14H00 INTRODUCTION: OVERVIEW OF WORKSHOP OBJECTIVES AND TOPICS.

14H05 SESSION 1 : BUILDING CAPACITY FOR REHABILITATION SERVICES: TRAINING HEALTHCARE PROFESSIONALS AND COMMUNITY HEALTH WORKERS IN REHABILITATION TECHNIQUES AND PRACTICES. DR PAUL BOLAJI, DR AISHA ANIMASHAWUN

14H30

SESSION 2: COMMUNITY-BASED REHABILITATION (CBR): STRATEGIES FOR INTEGRATING REHABILITATION SERVICES INTO COMMUNITY SETTINGS TO IMPROVE ACCESSIBILITY AND EFFECTIVENESS. DR ZACCHAEUS FALOPE, DR CYNTHIA UDENSI

14H55

SESSION 3 : INNOVATIVE TECHNOLOGIES IN REHABILITATION: EXPLORING THE USE OF AFFORDABLE AND LOCALLY AVAILABLE TECHNOLOGIES TO ENHANCE REHABILITATION SERVICES. DR SALAWU

15H20

SESSION 4 PARTNERSHIPS AND COLLABORATION: FOSTERING PARTNERSHIPS BETWEEN GOVERNMENTS, NGOS, AND INTERNATIONAL ORGANIZATIONS TO SUPPORT REHABILITATION INITIATIVES. INTERNATIONAL REHABILITATION FORUM

15H45

Q&A AND WRAP-UP: OPEN DISCUSSION AND SUMMARY.

16:00 - 16:30

BREAK

16:30 - 18:30

OLIVERAIE

COURSE

USPRM COURSE BASIC



INSTRUCTORS (ALPHABETICAL ORDER)

AHMED EL-OU MRI, AMIT BHARGAVA, BERKAN ABACIOĞLU, BERKAYYALÇINKAYA, CARMELO PIRRI, CHRIS VISCO, FATİH TOK, FAZIL AKSAKAL, FURKAN ÇOLAK, HASANOCAK, JAKUB JACISKO, JORGE BARBOSA, KAMAL MEZIAN, LEVENT ÖZÇAKAR, NAVITA NYVAS, NIMISH MITTAL, PELIN ANALAY,

ONLINE LECTURERS (ALPHABETICAL ORDER)

KE-VIN CHANG, MURAT KARA, BAYRAM KAYMAK, BUĞRA İNCE, VINCENZO RICCI, CHUEH-HUNG WU

14.00

EVALUATION OF THE ELBOW

14.15

PRACTICE

15.30

COFFEE BREAK

16.00

EVALUATION OF THE WRIST/HAND

16.15

PRACTICE

17.30

CLOSING

16:30 - 18:30

ORANGERAIE

COURSE

USPRM COURSE ADVANCED



INSTRUCTORS (ALPHABETICAL ORDER)

AHMED EL-OU MRI, AMIT BHARGAVA, BERKAN ABACIOĞLU, BERKAYYALÇINKAYA, CARMELO PIRRI, CHRIS VISCO, FATİH TOK, FAZIL AKSAKAL, FURKAN ÇOLAK, HASANOCAK, JAKUB JACISKO, JORGE BARBOSA, KAMAL MEZIAN, LEVENT ÖZÇAKAR, NAVITA NYVAS, NIMISH MITTAL, PELIN ANALAY,

ONLINE LECTURERS (ALPHABETICAL ORDER)

KE-VIN CHANG, MURAT KARA, BAYRAM KAYMAK, BUĞRA İNCE, VINCENZO RICCI, CHUEH-HUNG WU

14.00

HIP PATHOLOGIES

14.30

KNEE PATHOLOGIES

15.00

ANKLE/FOOT PATHOLOGIES

15.30

COFFEE BREAK

16.00

PRACTICE

17.30

CLOSING

16:30 - 18:30

ROSERAIE

SHORT WORKSHOP



A NEUROMUSCULAR APPROACH TO PELVIC PAIN: FROM ANATOMY TO REHABILITATION STRATEGIES

ID 27

TOPIC PAIN

SPEAKERS MARYAM SULTAN (USA)
AREERAT SUPUTTITADA (THAILAND)

CHAIR MARYAM SULTAN

ATTENDEES 60

EXTRA FEES 50 €

THE GOAL OF THIS SESSION IS PROVIDE CLINICIANS WITH A COMPREHENSIVE FRAMEWORK FOR EVALUATING AND APPROPRIATELY TREATING PATIENTS PRESENTING WITH PELVIC PAIN.

A FOCUS WILL BE PLACED ON DIFFERENTIAL DIAGNOSIS AND THE TECHNICAL EXPLANATION OF INTERVENTIONAL TREATMENTS, AS WELL AS THE AVAILABLE EVIDENCE SURROUNDING THESE PROCEDURES. PHYSIATRISTS WILL BE ENCOURAGED TO STEP INTO THE ROLE OF TEAM LEADER IN MANAGING THESE PATIENTS' PELVIC DYSFUNCTION AND PAIN. STRATEGIES TO MANAGE A MULTIDISCIPLINARY TEAM WILL BE SHARED.

16H30

PELVIC FLOOR ANATOMY: BONES, MUSCLES, NERVES. AREERAT SUPUTTITADA (RECORDED)

16H50

THE INITIAL EVALUATION: PELVIC FLOOR HISTORY AND PHYSICAL EXAM. AREERAT SUPUTTITADA (RECORDED)

17H10

COMMON NEUROMUSCULAR PATHOLOGIES WITHIN THE PELVIS: DIAGNOSIS AND TREATMENT. MARYAM SULTAN

17H30

PELVIC FLOOR PHYSICAL THERAPY: APPROPRIATE REFERRALS AND INTERVENTIONS. MARYAM SULTAN

17H50

THE PHYSIATRIST AS TEAM LEADER. PANEL DISCUSSION

18H10

Q&A. PANEL DISCUSSION

16:30 - 18:30

PALMERAIE

SHORT WORKSHOP



APPROACHING ADAPTIVE EXERCISE PRESCRIPTIONS FOR PATIENTS WITH PHYSICAL AND INTELLECTUAL DISABILITIES

ID 24

TOPIC SPECIFIC CONDITION AND DISABILITIES

SPEAKERS SIMRAN PRAKASH (USA)
CAROLINE JONES (USA)

CHAIR SIMRAN PRAKASH, CAROLINE JONES

ATTENDEES 60

EXTRA FEES 50 €

THIS WORKSHOP EMPHASIZES INCLUSIVITY AND ACCESSIBILITY FOR PWDS IN THE REALM OF EXERCISE. BY MAKING EXERCISE AN ACCESSIBLE OPTION FOR PWDS, INSTEAD OF ONLY NONDISABLED INDIVIDUALS, THE WORKSHOP ALIGNS WITH CONFERENCE GOALS OF INCLUSIVITY AND EQUITY.

BY ENSURING THAT PHYSICIANS AND PEOPLE KNOW HOW TO MODIFY EXERCISE TO SUPPORT BROADER ABILITY LEVELS, THIS WORKSHOP HELPS ESTABLISH EXERCISE AS A SUSTAINABLE PREVENTATIVE AND THERAPEUTIC MEASURE. THIS TACKLES THE GLOBAL CHALLENGE OF POOR DISABILITY KNOWLEDGE/EDUCATION FROM THE ROOT CAUSE AND WORKS TOWARD THE SDGS OF "GOOD HEALTH AND WELL-BEING" AND "REDUCED INEQUALITIES."

THESE GOALS ARE TIMELY AND IMPORTANT GIVEN THE RISING RATES OF DISABILITY GLOBALLY: 16% OF THE WORLD HAS A DISABILITY ACCORDING TO THE WHO, A FIGURE THAT IS ONLY GROWING. AMONG PWDS, RATES OF OBESITY AND CHRONIC ILLNESS ARE SIGNIFICANTLY HIGHER, AND CURRENTLY, EXERCISE IS NOT A COMMON PRESCRIPTION TO PWDS DESPITE BEING A COMMON PREVENTATIVE HEALTH MEASURE.

THIS WORKSHOP CAN CHANGE THAT STEREOTYPE. BY EDUCATING PHYSICIANS AND THE GENERAL PUBLIC ON PREVENTATIVE AND THERAPEUTIC EXERCISE MODIFICATIONS, THIS WORKSHOP CAN HELP INDIVIDUALS TACKLE THEIR HEALTH AT-HOME AND DISABILITY HEALTH OUTCOMES CAN BE IMPROVED BEFORE PROGRESSING TO SEVERE COMPLICATIONS SUCH AS OBESITY AND CHRONIC ILLNESS.

16H30

INTRODUCTION AND OVERVIEW OF WORKSHOP OBJECTIVES AND TOPICS.

16H35

HISTORY SESSION/ PRESENTATION OF KEY POLICIES, RECENT ADVANCEMENTS IN ADAPTIVE EXERCISE, AND BARRIERS FOR PWDS.

17H05

PHYSICIAN PREPAREDNESS: DISCUSS GAPS IN EDUCATION, INTERACTIVE SAMPLE NEEDS ASSESSMENT ACTIVITY, EXPLAIN APPROACH TO ADAPTIVE EXERCISE PLANS.



PROGRAM DAY 2
MONDAY 3/11/2025



08:30 - 12:30

OLIVERAIE

COURSE

USPRM COURSE BASIC



INSTRUCTORS (ALPHABETICAL ORDER)

AHMED EL-OUIMRI, AMIT BHARGAVA, BERKAN ABACIOĞLU, BERKAYYALÇINKAYA, CARMELO PIRRI, CHRIS VISCO, FATİH TOK, FAZİL AKSAKAL, FURKAN ÇOLAK, HASANOCAK, JAKUB JACISKO, JORGE BARBOSA, KAMAL MEZIAN, LEVENT ÖZÇAKAR, NAVITA NYVAS, NIMISH MITTAL, PELİN ANALAY,

ONLINE LECTURERS (ALPHABETICAL ORDER)

KE-VIN CHANG, MURAT KARA, BAYRAM KAYMAK, BUĞRA İNCE, VINCENZO RICCI, CHUEH-HUNG WU

08.30

US IMAGING/GUIDANCE FOR INTERVENTIONS

09.00

EVALUATION OF THE HIP

09.15

PRACTICE

10.30

COFFEE BREAK

11.00

EVALUATION OF KNEE

11.15

PRACTICE

08:30 - 12:30

ORANGERAIE

COURSE

USPRM COURSE ADVANCED



INSTRUCTORS (ALPHABETICAL ORDER)

AHMED EL-OUIMRI, AMIT BHARGAVA, BERKAN ABACIOĞLU, BERKAYYALÇINKAYA, CARMELO PIRRI, CHRIS VISCO, FATİH TOK, FAZİL AKSAKAL, FURKAN ÇOLAK, HASANOCAK, JAKUB JACISKO, JORGE BARBOSA, KAMAL MEZIAN, LEVENT ÖZÇAKAR, NAVITA NYVAS, NIMISH MITTAL, PELİN ANALAY,

ONLINE LECTURERS (ALPHABETICAL ORDER)

KE-VIN CHANG, MURAT KARA, BAYRAM KAYMAK, BUĞRA İNCE, VINCENZO RICCI, CHUEH-HUNG WU

08.30

US IMAGING/GUIDANCE FOR INTERVENTIONS

09.00

EURO-MUSCULUS/USPRM SPASTICITY APPROACH

09.30

UPPER LIMB NERVES/MUSCLES

10.00

LOWER LIMB NERVES/MUSCLES

10.30

COFFEE BREAK

11.00

PRACTICE

08:30 - 12:30

ROSEIRAIE

LONG WORKSHOP



BUILDING A SIMULATION-BASED PRM CURRICULUM: PRACTICAL STRATEGIES FOR LMICS

ID 103

TOPIC EDUCATION & TRAINING

SPEAKERS MARYAM FORTASSI (MOROCCO)
MOHAMMED MOUHAOU (MOROCCO)

CHAIR MARYAM FORTASSI, MOHAMMED MOUHAOU

ATTENDEES 25

EXTRA FEES 50 €

THIS HANDS-ON WORKSHOP EQUIPS PRM EDUCATORS AND CLINICIANS WITH PRACTICAL STRATEGIES TO DEVELOP LOW-COST, HIGH-IMPACT SIMULATION TRAINING IN RESOURCE-LIMITED SETTINGS.

PARTICIPANTS WILL DESIGN AND IMPLEMENT ADAPTABLE SIMULATION SCENARIOS USING LOCALLY AVAILABLE MATERIALS, EXPLORE FACULTY TRAINING METHODS, AND DISCUSS SUSTAINABILITY STRATEGIES. ALIGNED WITH THE CONGRESS'S FOCUS ON ADVANCING REHABILITATION EDUCATION, THIS WORKSHOP EMPOWERS PHYSIATRISTS TO ENHANCE PRM TRAINING GLOBALLY, BRIDGING GAPS IN CLINICAL SKILLS DEVELOPMENT AND CAPACITY BUILDING IN LMICS.

8H30

INTRODUCTION : OVERVIEW OF WORKSHOP OBJECTIVES, RELEVANCE TO PRM TRAINING IN LMICS, AND PARTICIPANT EXPECTATIONS.

8H45

SESSION 1 : PRESENTATION ON LOW-COST SIMULATION STRATEGIES, CHALLENGES, AND IMPLEMENTATION IN RESOURCE-LIMITED SETTINGS.

9H15

SESSION 2 : HANDS-ON GROUP ACTIVITY—DESIGNING AND PRESENTING LOW-RESOURCE SIMULATION SCENARIOS FOR PRM TRAINING.

11H15

BREAK : SHORT INTERMISSION FOR NETWORKING AND DISCUSSION.

11H30

SESSION 3 : DEVELOPING AN IMPLEMENTATION PLAN—TRAINING FACULTY, ASSESSING OUTCOMES, AND ENSURING SUSTAINABILITY.

12H15

Q&A AND WRAP-UP : DISCUSSION, KEY TAKEAWAYS, AND RESOURCE SHARING.

08:30 - 12:30

PALMERAIE
LONG WORKSHOP



8TH ANNUAL WORKSHOP ON GLOBAL APPROACHES TO THE REHABILITATION OF CANCER PATIENTS

ID 16

TOPIC ONCOLOGY

SPEAKERS ADY CORREA (USA)
VISHWA RAJ (USA)
KRYSTAL SONG (AUSTRALIA)
ANDREA CHEVILLE (USA)
FRANCESCA KONIG (USA)
BIRGIT LEIBBRAND (GERMANY)
PINAR BORMAN (TÜRKIYE)
FAROOQ RATHORE (PAKISTAN)
MONICA PINTO (ITALY)
NANDITA KEOLE (USA)
ALYSSA MIXON (USA)
SWATEE JENA (AUSTRALIA)
STEVEN FAUX (AUSTRALIA)
DIANA MOLINARES (USA)
TERRY CAROLAN (USA)

CHAIR VISHWA RAJ

ATTENDEES 60

EXTRA FEES 50 €

SURVIVAL RATES FOR INDIVIDUALS WITH CANCER CONTINUE TO RISE, DUE TO IMPROVED SCREENING METHODS, EARLIER DETECTION, AND REDUCED TOXICITIES FROM TREATMENT. WITH IMPROVED SURVIVAL, HOWEVER, CANCER SURVIVORS STILL EXPERIENCE A SIGNIFICANT AMOUNT OF DISABILITY WORLDWIDE.

IN 2022, IT WAS ESTIMATED THAT NEARLY 20 MILLION PEOPLE WERE DIAGNOSED WITH CANCER THROUGHOUT THE WORLD. 59% OF THESE CASES WERE IN ASIA, WITH A SIGNIFICANT PROPORTION IN EUROPE, AFRICA, AND NORTH AND SOUTH AMERICA.

WITH LONGER LIFE EXPECTANCY, INDIVIDUALS HAVE BEEN FOUND TO EXPERIENCE SIGNIFICANT AND UNEXPECTED PHYSICAL, COGNITIVE, AND PSYCHOLOGICAL DEFICITS AS A RESULT OF THE CANCER ITSELF OR TREATMENT EFFECTS. THIS WORKSHOP AIMS TO EXAMINE IMPAIRMENTS ASSOCIATED WITH ONCOLOGICAL DIAGNOSES AMENABLE TO REHABILITATION INTERVENTIONS.

8H30

INTRODUCTION. VISHWA RAJ

8H45

CLINICAL PRACTICE GUIDELINES FOR REHABILITATION OF COLORECTAL CANCERS. KRYSTAL SONG

9H00

INTEGRATION OF CANCER REHABILITATION AND PALLIATIVE CARE. ANDREA CHEVILLE

9H15

RADIATION FIBROSIS. FRANCESCA KONIG

9H30

BREAST CANCER: PARTICIPATION BETWEEN STIGMA AND FATIGUE. BIRGIT LEIBBRAND

- 9H45
PELVIC CANCERS AND MUSCULOSKELETAL COMPLICATIONS. PINAR BORMAN
- 10H00
CANCER-RELATED FATIGUE. FAROOQ RATHORE
- 10H15
AROMATASE INHIBITORS MUSCULOSKELETAL SYNDROME. ADY CORREA
- 10H30
PERIPHERAL NEUROPATHY AND MYOPATHY IN CANCER. MONICA PINTO
- 10H45
PRE-HABILITATION. NANDITA KEOLE, ALYSSA MIXON, SWATEE JENA
- 11H30
OPIOID USE IN CANCER REHABILITATION. STEVEN FAUX
- 11H45
HEAD AND NECK TRISMUS. DIANA MOLINARES
- 12H00
CARF. TERRY CAROLAN
- 12H15
Q&A, WRAP-UP, AND NETWORKING.

08:30 - 12:30

ARGANIER

LONG WORKSHOP



AI-POWERED PMR: ENHANCE YOUR PRACTICE WITH GEMINI

ID 88

TOPIC TECHNOLOGY & ROBOTICS

SPEAKERS ADAM ZALEWSKI (POLAND)
TIJANA SPASOJEVIC (SERBIA)

CHAIR ADAM ZALEWSKI, TIJANA SPASOJEVI

ATTENDEES 30

EXTRA FEES 50 €

THIS WORKSHOP WILL INTRODUCE PARTICIPANTS TO THE TRANSFORMATIVE POTENTIAL OF LARGE LANGUAGE MODELS (LLMS) IN THE FIELD OF PHYSICAL MEDICINE AND REHABILITATION (PMR). PARTICIPANTS WILL LEARN HOW TO LEVERAGE GOOGLE WORKSPACE AND GEMINI, AN ADVANCED AI ASSISTANT, TO ENHANCE THEIR CLINICAL PRACTICE THROUGH EFFECTIVE PROMPT ENGINEERING, GEM BUILDING, AND RESEARCH SUMMARIZATION.

THIS WORKSHOP ALIGNS WITH THE CONGRESS'S THEMES OF "INNOVATIVE TECHNOLOGIES FOR ACCESSIBLE CARE" AND "INTEGRATED REHABILITATION SYSTEMS AND POLICIES" BY SHOWCASING HOW AI CAN EMPOWER PMR PROFESSIONALS TO PROVIDE MORE EFFICIENT, PERSONALIZED, AND DATA-DRIVEN CARE.

- 8H30
OVERVIEW OF LLMS, GEMINI, AND THEIR POTENTIAL IN PMR.
- 8H45
SESSION 1: PROMPT ENGINEERING
 - PRINCIPLES OF EFFECTIVE PROMPT WRITING.
 - HANDS-ON EXERCISES: GENERATING PATIENT EDUCATION MATERIALS, SUMMARIZING RESEARCH,DRAFTING CLINICAL NOTES.
- 9H30
SESSION 2: GEM BUILDING
 - INTRODUCTION TO GEMS AND THEIR APPLICATIONS IN PMR.
 - BUILDING GEMS FOR PATIENT INTAKE, PROGRESS TRACKING, AND PERSONALIZED EXERCISE PLANS.
- 10H15
BREAK : NETWORKING AND DISCUSSION.
- 10H30
SESSION 3: NOTEBOOK LM
 - INTRODUCTION TO NOTEBOOK LM FOR RESEARCH SUMMARIZATION AND DATA ANALYSIS.
 - GUIDED RESEARCH TASK: ANALYZING PMR PATIENT OUTCOMES AND GENERATING A SUMMARY PAPER.
- 11H15
SESSION 4: ADVANCED PROMPTING AND INTEGRATION
 - ITERATIVE PROMPTING, LANGUAGE STYLE, AND CREATIVE APPLICATIONS.
 - INTEGRATING GEMINI WITH EXISTING CLINICAL WORKFLOWS.
- 11H45
Q&A AND WRAP-UP: OPEN DISCUSSION AND KEY TAKEAWAYS.

At Ipsen, we're focused on redefining what's possible with neurotoxins

With over 30 years of neuroscience expertise, we're committed to shaping the future through strategic partnerships, advocacy and a relentless focus on improving the quality of care.



We invest in research that makes a real-world impact for patients, caregivers, and healthcare professionals alike. We keep pushing the boundaries of science to deliver neurotoxin innovation **because we believe everyone deserves a life fully lived.**

Visit Ipsen at stand C2

Focus. Together. For patients & society

Job code: NONSC-ALL-000356 Date of preparation: August 2025



12:30 - 14:00

BREAK

14:00 - 17:00

OLIVERAIE

COURSE

USPRM COURSE BASIC



INSTRUCTORS (ALPHABETICAL ORDER)

AHMED EL-OUIMRI, AMIT BHARGAVA, BERKAN ABACIOĞLU, BERKAYALÇINKAYA, CARMELO PIRRI, CHRIS VISCO, FATİH TOK, FAZİL AKSAKAL, FURKAN ÇOLAK, HASANOCAK, JAKUB JACISKO, JORGE BARBOSA, KAMAL MEZIAN, LEVENT ÖZÇAKAR, NAVITA NYVAS, NIMISH MITTAL, PELIN ANALAY

ONLINE LECTURERS (ALPHABETICAL ORDER)

KE-VIN CHANG, MURAT KARA, BAYRAM KAYMAK, BUĞRA İNCE, VINCENZO RICCI, CHUEH-HUNG WU

14.00

EVALUATION OF THE ANKLE/FOOT

14.15

PRACTICE

15.30

COFFEE BREAK

16.00

EXAMINATION

17.30

CLOSING

14:00 - 17:00

ORANGERAIE

COURSE

USPRM COURSE ADVANCED



INSTRUCTORS (ALPHABETICAL ORDER)

AHMED EL-OUIMRI, AMIT BHARGAVA, BERKAN ABACIOĞLU, BERKAYALÇINKAYA, CARMELO PIRRI, CHRIS VISCO, FATİH TOK, FAZİL AKSAKAL, FURKAN ÇOLAK, HASANOCAK, JAKUB JACISKO, JORGE BARBOSA, KAMAL MEZIAN, LEVENT ÖZÇAKAR, NAVITA NYVAS, NIMISH MITTAL, PELIN ANALAY

ONLINE LECTURERS (ALPHABETICAL ORDER)

KE-VIN CHANG, MURAT KARA, BAYRAM KAYMAK, BUĞRA İNCE, VINCENZO RICCI, CHUEH-HUNG WU

14.00

SPINAL IMAGING/INTERVENTIONS

14.30

PRACTICE

15.30

COFFEE BREAK

16.00

EXAMINATION

17.30

CLOSING

14:00 - 16:00

ROSERAIIE

SHORT WORKSHOP



AMPUTATIONS AND PROSTHETICS OF THE LOWER EXTREMITY; A VIEW FROM 3 DIFFERENT AREAS OF THE WORLD

ID 91

TOPIC MUSCULOSKELETAL

SPEAKERS JAN GEERTZEN (NETHERLANDS)
JUAN MARTINA (NETHERLANDS)
CAROLINA SCHIAPPACASSE (ARGENTINA)

CHAIR CAROLINA SCHIAPPACASSE

ATTENDEES 60

EXTRA FEES 50 €

IN THIS WORKSHOP SOME VIEWS FROM DIFFERENT AREAS OF THE WORLD WILL BE PRESENTED. WE WILL DISCUSS HOW PEOPLE WITH AN AMPUTATION OF THE LOWER EXTREMITY ARE TREATED BY REHABILITATION TEAMS IN ACCORDANCE TO LOCAL POSSIBILITIES AND RESTRICTIONS. WHAT IS THE EVIDENCE AVAILABLE FOR OUR TREATMENTS AND WHAT ARE THE RESULTS.

14H00

INTRODUCTION : OVERVIEW OF WORKSHOP OBJECTIVES AND TOPICS.

14H05

SESSION 1 : PRESENTATION OF KEY CONCEPTS AND RECENT ADVANCEMENTS.

14H35

SESSION 2 : CASE STUDIES OR PRACTICAL APPLICATIONS; DISCUSSION CONTINUOUSLY.

15H05

INTERACTIVE SESSION: MENTIMETER DISCUSSION.

15H50

Q&A AND WRAP-UP (15 MINUTES): OPEN DISCUSSION AND SUMMARY.

14:00 - 16:00

PALMERAIE

SHORT WORKSHOP



EVALUATION AND MANAGEMENT OF BLADDER, BOWEL, AND SEXUAL DYSFUNCTION IN CENTRAL NERVOUS SYSTEM DISORDERS

ID 21

TOPIC PELVIC FLOOR & BLADDER

SPEAKERS CLAIRE HENTZEN (FRANCE)
NICOLAS TURMEL (FRANCE)
CHARLES JOUSSAIN (FRANCE)
JALESH PANICKER (UK)
STEFANIA MUSCO (ITALY)
KLAUS KROGH (DENMARK)

CHAIR CLAIRE HENTZEN

ATTENDEES 60

EXTRA FEES 50 €

THIS WORKSHOP WILL GIVE AN OVERVIEW OF THE DIFFERENT PELVIC DYSFUNCTIONS EXPERIENCED BY PEOPLE WITH CENTRAL NERVOUS DISEASES, WITH A SPECIAL ATTENTION PAID ON THEIR ASSESSMENT. IT WILL DELIVER A VERY PRACTICAL MANAGEMENT APPROACH AND UNDERLINE THE KEY ROLE OF PHYSIATRIST ALONG THE COURSE OF THE DISEASE. PELVIC DYSFUNCTIONS REMAIN THE MOST BOTHERING DISABILITIES SIGNIFICANTLY IMPACTING PATIENTS QUALITY OF LIFE. PRM SPECIALISTS SHOULD PLAY A KEY ROLE IN THEIR GLOBAL EVALUATION FROM INITIAL ASSESSMENT TO LONG TERM FOLLOW UP, AIMING TO DELIVER A PERSONALIZED MANAGEMENT TO EACH PATIENT.

14H00

OVERVIEW OF WORKSHOP OBJECTIVES AND TOPICS. CLAIRE HENTZEN

14H05

NEUROPHYSIOLOGY OF LOWER URINARY TRACT DYSFUNCTION IN PEOPLE WITH NEUROLOGICAL DISORDERS. JALESH PANICKER

14H20

ASSESSMENT OF LOWER URINARY TRACT DYSFUNCTION: HISTORY TAKING, QUES ONNAIRES, INVESTIGATIONS REQUIRED. NICOLAS TURMEL

14H35

MANAGEMENT OF NEUROGENIC DETRUSOR OVERACTIVITY. CHARLES JOUSSAIN

14H50

SHORT INTERMISSION FOR NETWORKING AND DISCUSSION.

15H00

THE IMPORTANCE OF PRM IN MANAGING BLADDER DISORDERS – SPECIAL FOCUS ON INTERMITTENT CATHETERIZATION. CLAIRE HENTZEN

15H15

HOW TO MANAGE NEUROGENIC BOWEL DISORDERS? KLAUS KROGH

15H30

LET'S TALK ABOUT SEX – MANAGEMENT OF SEXUAL DYSFUNCTION. STEFANIA MUSCO

15H45

OPEN DISCUSSION AND SUMMARY.

14:00 - 16:00

ARGANIER

SHORT WORKSHOP



EVALUATION AND MANAGEMENT OF FOOT AND ANKLE PAIN

ID 86

TOPIC PAIN

SPEAKERS AMIT BHARGAVA (USA)
MOOYEON OH-PARK (USA)
STEVEN FAUX (AUSTRALIA)

CHAIR AMIT BHARGAVA

ATTENDEES 30

EXTRA FEES 50 €

FOOT AND ANKLE PAIN IS A COMMON PROBLEM IN ADULTS DUE TO MULTIPLE FACTORS. IT IS RESPONSIBLE FOR DEBILITATING PAIN AND AFFECTS THE QUALITY OF LIFE. FOOT AND ANKLE PAIN IS MULTIFACTORIAL IN ORIGIN. VARIOUS TREATMENTS HAVE BEEN DOCUMENTED INCLUDING MEDICATION, MODIFICATION OF LIFESTYLE, INJECTIONS AND SURGERY. FOOT AND ANKLE PAIN IS A COMMON PROBLEM IN ALL AGES OBSERVED IN THE CLINICAL SETTING. THE COURSE WILL COVER ANATOMY, BIOMECHANICS AND RADIATION TREATMENT OPTIONS OF FOOT AND ANKLE PAIN. LECTURES WILL BE FOLLOWED BY ROTATIONS AT DIFFERENT STATIONS. THE PRESENTATIONS WILL BE ON ANATOMY, BIOMECHANICS, CLINICAL FEATURES AND MINIMALLY INVASIVE PROCEDURES FOR FOOT AND ANKLE PAIN. EACH SPEAKER WILL FOCUS ON PARTICULAR SECTION. IT'LL CONCLUDE WITH QUESTIONS, ANSWERS IN DISCUSSION.

14H00

INTRODUCTION. AMIT BHARGAVA

14H05

CLINICAL EXAMINATION AND ORTHOSES. MOOYEON OH-PARK

14H17

ANKLE-ULTRASOUND GUIDED INJECTIONS AND PROCEDURE. STEVEN FAUX

14H30

FOOT-ULTRASOUND GUIDED INJECTIONS AND PROCEDURES. AMIT BHARGAVA

14H42

WORKSHOP- CLINICAL EXAM. MOOYEON OH-PARK

15H00

WORKSHOP- ANKLE-ULTRASOUND INJECTION. STEVEN FAUX

15H23

WORKSHOP- FOOT-ULTRASOUND INJECTIONS. AMIT BHARGAVA

15H50

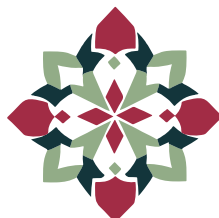
QUESTIONS, DISCUSSION, CONCLUSION.

16:00 - 16:30

BREAK



UNDER THE HIGH PATRONAGE
OF HIS MAJESTY KING MOHAMMED VI



ISPRM 19TH WORLD CONGRESS
MARRAKESH
3-7 NOVEMBER 2025

18:00 - 20:00

OPENING CEREMONY



PROGRAM DAY 3

TUESDAY 4/11/2025



NEW FRONTIERS FOR RESEARCH IN REHABILITATION: HOW TO COLLECT AND DISSEMINATE EVIDENCE AND THE CONTRIBUTION FROM THE COCHRANE REHABILITATION FUNCTIONING AND DISABILITY THEMATIC GROUP

ID 51

TOPIC EDUCATION & TRAINING

SPEAKERS CARLOTTE KIEKENS (ITALY)
STEFANO NEGRINI (ITALY)
FRANCESCA GIMIGLIANO (ITALY)
MARIA GABRIELLA CERAVOLO (ITALY)

CHAIR CARLOTTE KIEKENS, STEFANO NEGRINI

8H30
INTRODUCTION

8H35
COCHRANE REHABILITATION, FUNCTIONING, AND DISABILITY FOR ADVANCING EVIDENCE-BASED PRACTICE AS REQUESTED BY THE WHA RESOLUTION ON STRENGTHENING REHABILITATION IN HEALTH SYSTEMS. CARLOTTE KIEKENS

8H55
ADVANCING REPORTING IN REHABILITATION RESEARCH THROUGH THE GUIDE-REHAB FRAMEWORK. MARIA GABRIELLA CERAVOLO

9H15
PRIORITISATION OF EVIDENCE SYNTHESIS IN REHABILITATION: THE EBOOK STRATEGY. FRANCESCA GIMIGLIANO

9H35
METHODOLOGICAL ADVANCEMENTS FOR IMPROVING PRIMARY RESEARCH IN REHABILITATION. STEFANO NEGRINI

10H05
OC ID 34 THE LEARNER'S PERSPECTIVES OF FREE, ONLINE, INTERNATIONAL CME IN REHABILITATION: A MIXED METHODS ANALYSIS. BRITNEY SOLL

10H10
DISCUSSION

FASCIA, MUSCLE AND GAIT: FRONTIERS IN REHABILITATION

TOPIC MUSCULOSKELETAL

SPEAKERS PIRRI CARMELO (ITALY)
ANTONIO STECCO (USA)
CARLA STECCO (ITALY)
LEVENT ÖZÇAKAR (TÜRKIYE)
TAWAB KHALIL (PAKISTAN)

CHAIR PIRRI CARMELO, LEVENT ÖZÇAKAR, TAWAB KHALIL

THIS SESSION EXPLORES CUTTING-EDGE PERSPECTIVES IN REHABILITATION BY LINKING FASCIA, MUSCLE, AND GAIT AS CENTRAL PILLARS OF FUNCTIONAL RECOVERY. FASCIA, ONCE UNDERESTIMATED, IS NOW RECOGNIZED AS A DYNAMIC CONNECTIVE TISSUE NETWORK ESSENTIAL FOR FORCE TRANSMISSION, PROPRIOCEPTION, AND PAIN MODULATION, WITH IMPLICATIONS RANGING FROM ANATOMICAL INSIGHTS TO ADVANCED IMAGING AND CLINICAL APPLICATIONS.

SPASTICITY, A FREQUENT CONSEQUENCE OF BRAIN AND SPINAL CORD INJURIES, HIGHLIGHTS THE COMPLEXITY OF MOTOR CONTROL DISORDERS AND THE NEED FOR TAILORED INTERVENTIONS SUCH AS BOTULINUM TOXIN TREATMENT, PHYSICAL THERAPY, AND GOAL-ORIENTED REHABILITATION STRATEGIES. INSTRUMENTAL GAIT ANALYSIS PROVIDES AN OBJECTIVE FRAMEWORK TO ASSESS MOVEMENT, DETECT ABNORMALITIES, AND GUIDE TREATMENT PLANNING WITH PRECISION.

IN PARALLEL, SARCOPENIA REPRESENTS A GROWING CHALLENGE, REINFORCING THE IMPORTANCE OF EARLY DETECTION AND INNOVATIVE DIAGNOSTIC TOOLS, INCLUDING MACHINE LEARNING ALGORITHMS, TO BETTER STRATIFY RISK AND OPTIMIZE CARE.

TOGETHER, THESE APPROACHES ILLUSTRATE HOW INTEGRATED KNOWLEDGE—FROM FASCIA TO GAIT AND MUSCLE HEALTH—CAN SHAPE THE FUTURE OF PERSONALIZED REHABILITATION.

8H30
ANATOMY OF FASCIA AND ITS ROLE IN PAIN. CARLA STECCO

8H50
ULTRASOUND AND FASCIA: ADVANCING DIAGNOSIS AND THERAPEUTIC INSIGHTS. PIRRI CARMELO

9H10
FASCIA: CURRENT TREATMENTS AND FUTURE DEVELOPMENTS. ANTONIO STECCO

9H30
SCREENING/DIAGNOSING SARCOPENIA WITH MACHINE LEARNING EPOWERED RISK ASSESSMENT: THE SARCO X STUDY. LEVENT ÖZÇAKAR

- 9H50
LECTURE ID 59 NAVIGATING MOTOR RECOVERY IN PATIENTS WITH STROKE: EVIDENCE AND LATEST ADVANCES. TAWAB KHALIL
- 10H10
FREE OC ID 199 KINEMATIC AND NEUROMUSCULAR DEFICIENCIES PHENOTYPES ASSOCIATED WITH PATELLOFEMORAL PAIN SYNDROME : A CROSS-SECTIONAL INTERVENTIONAL STUDY. MARVIN COLEMAN
- 10H15
FREE OC ID 360 DOES LEUCINE SUPPLEMENTATION IMPACT POST-STROKE SARCOPENIA?: A CRITICAL REVIEW OF THE LITERATURE. MARA S. MARTINEZ SANTORI
- 10H20
FREE OC ID 425 EFFICACY OF SPECIFIC SKILLED MOTOR VERSUS GENERAL EXERCISE TRAINING ON MUSCLE AND NEURAL ALTERATIONS IN RECURRENT LOW BACK PAIN: PROTOCOL OF A RANDOMIZED CLINICAL TRIAL. LIEVEN DANNEELS
- 10H25
FREE OC ID 864 USE OF INERTIAL SENSORS FOR QUANTITATIVE GAIT ASSESSMENT: A STATE-OF-THE-ART REVIEW. MARCO ANTONIO LIRA ZAMACONA

08:30 - 10:30

ORANGERAIE

SESSION

REHABILITATION APPROACH TO MULTIPLE SCLEROSIS

ID 97

TOPIC ONCOLOGY SESSION

SPEAKERS ABHISHEK SRIVASTAVA (INDIA)
ANUPAM GUPTA (INDIA)
NAVITA PUROHIT (INDIA)
MARTA IMAMURA (BRAZIL)

CHAIR ABHISHEK SRIVASTAVA, NAVITA PUROHIT

MULTIPLE SCLEROSIS (MS) IS THE ONE OF THE LEADING CAUSES OF NEUROLOGICAL DISABILITY AFFECTING PEOPLE IN THEIR PRODUCTIVE YEARS, BETWEEN 15 AND 55 YEARS OF AGE. MEDIAN SURVIVAL IS ABOUT 40 YEARS FROM DIAGNOSIS. COURSE OF MS MAY BE DIVIDED INTO FOUR STAGES: INITIAL STAGE AT THE MOMENT OF DIAGNOSIS, EARLY STAGE WITH A MILD DISABILITY, LATER STAGE WITH A MODERATE DISABILITY AND ADVANCED STAGE WITH SEVERE DISABILITY.

THE AMOUNT AND CHARACTERISTICS OF NEEDS OF REHAB WILL DEPEND ON THE CLINICAL STAGE OF THE DISEASE AND THE DEGREE OF DISABILITY.

EACH STAGE POSES ITS OWN DIFFICULTIES RELATED TO SPECIFIC LIFE SITUATIONS AND EXPRESSED NEEDS. THE WORKSHOP WILL FOCUS ON NOVEL RÉHABILITATION INTERVENTIONS FROM THE TIME OF DIAGNOSIS, TO MANAGEMENT OF SECONDARY COMPLICATIONS AND COMORBIDITIES, MULTIDISCIPLINARY CARE, PALLIATIVE CARE AND END OF LIFE CARE IN PERSONS WITH MS

8H30
CHANGING REHAB NEEDS FOR PERSONS WITH MS. ABHISHEK SRIVASTAVA

8H50
MANAGEMENT OF SECONDARY CO-MORBIDITIES. ANUPAM GUPTA

9H10
PAIN MANAGEMENT. MARTA IMAMURA

9H30
PALLIATIVE CARE. NAVITA PUROHIT

9H50
DISCUSSION.

10H00
FREE OC ID 808 POPULARITY AND BENEFITS FROM USING WHOLE BODY CRYOTHERAPY (WBC) AS ADDITIONAL THERAPY OF MULTIPLE SCLEROSIS IN POLAND. ELZBIETA MILLER

10H05
FREE OC ID 616 SERVICE EVALUATION OF SPINAL INJURY PATIENTS MANAGED IN A LEVEL 2 NEUROREHAB SETTING. ATIF RANA

10H10
FREE OC ID 480 DISTINCT AND ADDITIVE EFFECTS OF VISUAL AND VIBRATORY FEEDBACK FOR MOTOR REHABILITATION: AN EEG STUDY IN HEALTHY SUBJECTS. AHMAD ADHAM

10H15
FREE OC ID 678 DEVELOPMENT AND EVALUATION OF A LOW-COST INDIVIDUAL RHYTHMIC AUDITORY CUEING DEVICE FOR MANAGING GAIT AND FREEZING IN PARKINSON'S DISEASE: A TRIAL PROTOCOL. SANA SALAH

10H20
FREE OC ID 957 ROLE OF VIRTUAL REALITY IN BALANCE TRAINING IN PATIENTS WITH SPINAL CORD INJURY: A PROSPECTIVE COMPARATIVE PRE-POST STUDY. MADHUSREE SENGUPTA

10H25
FREE OC ID 989 SAFETY, FEASIBILITY, AND EFFECTIVENESS OF AT-HOME EXOSKELETAL DEVICE FOR STROKE REHABILITATION: A TELE-HEALTH APPROACH. GERARD FRANCISCO

08:30 - 10:30

ROSERAIE

SHORT WORKSHOP



LOW BACK PAIN: A GLOBAL PERSPECTIVE ON SENSORIMOTOR CONTROL

ID 104

TOPIC PAIN

SPEAKERS LIEVEN DANNEELS (BELGIUM)
LOTTE JANSSENS (BELGIUM)

CHAIR LIEVEN DANNEELS, LOTTE JANSSENS

ATTENDEES 60

IN RECENT YEARS, EXTENSIVE SCIENTIFIC RESEARCH HAS BEEN CONDUCTED ON THE DIAGNOSIS AND TREATMENT OF LOW BACK PAIN. EXERCISE THERAPY HAS BEEN ADVOCATED AS A PRIMARY TREATMENT APPROACH IN THE MANAGEMENT OF LOW BACK PAIN. ONE DOMAIN WHERE THE STEADY INCREASE IN HIGH-QUALITY RESEARCH HAS YIELDED SIGNIFICANT INSIGHTS IS THAT OF SENSORIMOTOR CONTROL. ADVANCEMENTS IN THE UNDERSTANDING OF PROPRIOCEPTIVE AND NEUROMOTOR PROCESSES HAVE ENHANCED OUR COMPREHENSION OF HOW THE FUNCTION OF THE LOWER BACK IS REGULATED AND CONTROLLED.

THIS KNOWLEDGE ENABLES CLINICIANS TO TAILOR THERAPEUTIC INTERVENTIONS SPECIFICALLY TO THESE MECHANISMS WHEN NECESSARY OR DESIRABLE. THIS WORKSHOP INTEGRATES THESE INNOVATIVE INSIGHTS INTO CLINICAL REASONING AND THERAPEUTIC PRACTICE.

IT ADOPTS A COMPREHENSIVE APPROACH WITH A SPECIFIC FOCUS ON MOTOR CONTROL OF THE LUMBOPELVIC REGION.

8H30

INTRODUCTION : OVERVIEW OF WORKSHOP OBJECTIVES AND TOPICS.

8H40

SESSION 1 : STATE-OF-THE-ART INSIGHTS INTO SENSORIMOTOR CONTROL AND POTENTIAL DYSFUNCTIONS IN LOW BACK PAIN.

9H10

SESSION 2 : EVALUATION OF THE CHANGES IN THE SENSORIMOTOR CONTROL SYSTEM IN ACUTE, SUBACUTE, RECURRENT, AND CHRONIC PATIENTS.

9H40

BREAK : SHORT INTERMISSION FOR NETWORKING AND DISCUSSION.

9H50

SESSION : EVIDENCE-BASED PHYSIOTHERAPEUTIC APPROACHES FOR SENSORIMOTOR CONTROL DYSFUNCTION.

10H20

Q&A AND WRAP-UP: OPEN DISCUSSION AND SUMMARY.

08:30 - 10:30

PALMERAIE

SHORT WORKSHOP



ULTRASOUND-GUIDED COMMON AND UNCOMMON NERVE BLOCKS WITH ALCOHOL FOR SPASTICITY MANAGEMENT

ID 64

TOPIC SPASTICITY

SPEAKERS YUXI CHEN (USA)
HEAKYUNG KIM (USA)
ROCHELLE DY (USA)
JINPU LI (USA)

CHAIR YUXI CHEN

ATTENDEES 30

THIS WORKSHOP WILL PROVIDE EDUCATION ON THE UTILITY, AND PRACTICE OF ULTRASOUND-GUIDED NERVE BLOCKS FOR SPASTICITY MANAGEMENT. NEUROLYSIS OF PERIPHERAL NERVES CAN BE PERFORMED TO TREAT REGIONAL SPASTICITY.

A NEUROLYTIC AGENT SUCH AS ALCOHOL (60-65% ETHYL ALCOHOL OR 6-10% PHENOL) CAN BE USED TO MOBILIZE JOINTS NEGATIVELY AFFECTED BY SPASTICITY. ALCOHOL NEUROLYSIS OFFERS SEVERAL ADVANTAGES WHEN IT IS COMPARED TO BOTULINUM TOXIN (BTX) INJECTIONS WHICH HAS BEEN WIDELY ACCEPTED FOR SPASTICITY MANAGEMENT: IT PROVIDES

- I) A LONGER LASTING EFFECT;
- II) ENABLE TO COVER DIFFUSE SPASTIC MUSCLES WHEN IT COMBINED WITH BTX THAT HAS LIMITATION BY THE GUIDELINE OF SAFE DOSAGE;
- III) IS LESS COSTLY THAN BTX.

BY USING THE SAME TECHNIQUES, NERVE CAN ALSO BE BLOCKED WITH LOCAL ANESTHETIC INJECTION TO DIFFERENTIATE BETWEEN SPASTICITY AND CONTRACTURE OF INJECTED MUSCLES. ULTRASOUND HAS ADVANTAGE TO FACILITATE THE IDENTIFICATION OF NERVES UNDER DIRECT ELECTRIC STIMULATION, ALLOW REAL-TIME MONITORING NEEDLE PATH AND INJECTION SOLUTION SPREAD, AND REDUCE PROCEDURE COMPLICATIONS. IT IS IMPORTANT FOR PHYSIATRY TO UNDERSTAND AND USE ULTRASOUND AS A CLINICAL TOOL, AND LEARN NERVE BLOCK TECHNIQUE AS SPASTICITY TREATMENT OPTION.

- 8H30
INTRODUCTION. YUXI CHEN
- 8H35
MUSCULOCUTANEOUS NERVE AND MEDIAN NERVE BLOCK. HEAKYUNG KIM
- 8H55
OBTURATOR NERVE AND FEMORAL NERVE BLOCK. ROCHELLE DY
- 9H20
SCIATIC MOTOR TO HAMSTRINGS AND TIBIAL MOTOR TO GASTROCS NERVE BLOCK. YUXI CHEN
- 9H45
MEDIAL AND LATERAL PECTORAL NERVES BLOCK. JINPU LI
- 10H15
DISCUSSION Q&A

08:30 - 12:00

ARGANIER

LONG WORKSHOP



DOSAGE FOR PRM TREATMENTS AND INTERVENTIONS: ROLE OF NEW TECHNOLOGIES

ID 5

TOPIC ROBOTICS AND TECHNOLOGY

SPEAKERS ALESSANDRO GIUSTINI (ITALY)
SANAZ POURNAJAF (ITALY)
REYNALDO REY MATHIAS (PHILIPPINES)

CHAIR ALESSANDRO GIUSTINI, FRANCESCO INFARINATO

ATTENDEES 30

RECENT DEVELOPMENTS IN INNOVATIVE TECHNOLOGIES, PARTICULARLY ROBOTICS, HAVE BEGUN TO TRANSFORM THE FIELD OF REHABILITATION. ROBOTIC DEVICES AND OTHER CUTTING-EDGE TECHNOLOGIES HAVE BEEN INTEGRATED INTO REHABILITATION PROTOCOLS TO ENHANCE THE INTENSITY, PRECISION, AND REPETITION OF THERAPEUTIC INTERVENTIONS—KEY FACTORS IN PROMOTING BRAIN PLASTICITY AND IMPROVING FUNCTIONAL OUTCOMES. BY DELIVERING HIGH INTENSITY AND HIGH-QUALITY TREATMENT, THESE TECHNOLOGIES HAVE THE POTENTIAL TO OPTIMIZE TREATMENTS IN ACUTE, SUB-ACUTE AND CHRONIC PHASES.

A CRUCIAL ASPECT OF THIS SCIENTIFIC WORKSHOP WILL BE THE EXPLORATION OF HOW ROBOTICS CAN BE USED TO OPTIMIZE TREATMENT DOSAGE FOR EACH INTERVENTIONS INCLUDED IN INDIVIDUAL RECOVERY PLANS. THE EFFECTIVENESS OF REHABILITATION DEPENDS NOT ONLY ON THE TYPE OF INTERVENTION BUT ALSO ON ITS INTENSITY, TIMING, AND FREQUENCY (POSOLGY) .

BY HARNESSING THE PRECISION AND ADAPTABILITY OF ROBOTICS, CLINICIANS CAN OBTAIN INFORMATIONS ABOUT THE SPECIFIC INTERVENTION EFFECT AND SYNERGISTIC OUTCOMES IN THE INDIVIDUALIZED REHABILITATION PLAN TO MAXIMIZES THERAPEUTIC GAINS.

IN ADDITION TO IMPROVING TREATMENT DELIVERY, ROBOTICS AND OTHER INNOVATIVE TECHNOLOGIES ARE OPENING NEW AVENUES FOR OUTCOME MEASUREMENT IN REHABILITATION. THESE TECHNOLOGIES CAN PROVIDE OBJECTIVE AND QUANTIFIABLE DATA ON PATIENT PROGRESS, COLLECTED DURING ACTIVE TRAINING , IN THE FUTURE POTENTIALLY SERVING AS A SURROGATE FOR TRADITIONAL OUTCOME MEASURES AND ADDING MORE GRANULAR AND CONTINUOUS INSIGHTS INTO THE FUNCTION RECOVERY PATTERN OF EACH PATIENT AS THE FIELD MOVES TOWARDS MORE DATA-DRIVEN APPROACHES, TRANSLATIONAL MODELS ARE ESSENTIAL FOR BRIDGING THE GAP BETWEEN RESEARCH AND CLINICAL PRACTICE.

HOWEVER, THE INTEGRATION OF THESE ADVANCED TECHNOLOGIES INTO CLINICAL REHABILITATION ALSO RAISES IMPORTANT POTENTIAL ETHICAL AND METHODOLOGICAL QUESTIONS. . THIS SESSION WILL DELVE INTO THE ETHICAL CHALLENGES POSED BY THE USE OF ROBOTICS AND TECHNOLOGIES IN REHABILITATION, WITH A FOCUS ON REAL-WORLD SCENARIOS AND PATIENT-CENTERED CARE UP TO FUNCTIONING AND HABILITATION IN THIS WORKSHOP, EXPERTS AND RESEARCHERS FROM CLINICAL FIELD AND MANUFACTURING COMPANIES WILL MEET TO JOINTLY REVIEW PROCEDURES AND PROTOCOLS THAT MAY RESULT IN THESE MEASUREMENTS THAT CAN BE USEFUL TO THE EVALUATE, AS WELL AS THE THERAPEUTIC, USE OF THE VARIOUS EQUIPMENTS.

- 8H30
INTRODUCTION & PRÉSENTATION. CHAIRS
- 8H50
EFFECTIVENESS AND MEASUREMENT NEEDS. SAUFIA STRAUDI
- 9H15
FROM THE CLINICAL SIDE : EXPERIENCES AND RESEARCH PERSPECTIVES. REYNALDO REY MATIAS
- 9H40
MEASURING EFFECTIVENESS IN REHABILITATION ROBOTICS: MULTIMODAL DIGITAL TWINS FOR GESTURE ASSESSMENT. FRANCESCO INFARINATO
- 10H05
FROM THE CLINICAL SIDE : EXPERIENCES AND RESEARCH PERSPECTIVES. MARCO FRANCESCHINI, SANAZ POURNAJAF
- 10H30
FROM THE PRODUCERS SIDE : EXPERIENCES AND PERSPECTIVES - BTL ROBOTICS. UMBERTO COFFA
- 10H45
FROM THE PRODUCERS SIDE : EXPERIENCES AND PERSPECTIVES - DIH. GONZALO PUJELO
- 11H00
FROM THE PRODUCERS SIDE : EXPERIENCES AND PERSPECTIVES - TECNOBODY. VALERIO CISOTTO
- 11H15
FROM THE PRODUCERS SIDE : EXPERIENCES AND PERSPECTIVES - BTSBIOENGINEERING. MARTA FRANCISCA CORRÀ
- 11H30
QUESTIONS & DISCUSSION

11:00 - 12:00

PLENARY

LECTURE

ADVANCING REHABILITATION IN AFRICA: ACCESS, INNOVATION AND PATIENT-CENTERED SOLUTIONS

TOPIC COMMUNITY

SPEAKERS SARA SKALLI (MOROCCO)
 RIHAB MONCER (TUNISIA)
 SANA SALAH (TUNISIA)
 ZOHRA BEN SALAH FRIH (TUNISIA)
 GÜL METE CIVELEK (TÜRKIYE)

CHAIR SARA SKALLI, SANA SALAH, GÜL METE CIVELEK

REHABILITATION IN AFRICA FACES UNIQUE CHALLENGES THAT REQUIRE INNOVATIVE, INCLUSIVE, AND CONTEXT-SPECIFIC SOLUTIONS. ACCESS TO INPATIENT REHABILITATION REMAINS LIMITED IN NORTH AFRICA DUE TO BED SHORTAGES, REFERRAL INEFFICIENCIES, AND ECONOMIC CONSTRAINTS, WITH MOROCCO AND TUNISIA ILLUSTRATING BOTH SHARED OBSTACLES AND DIFFERING ORGANIZATIONAL PATHWAYS.

AT THE SAME TIME, PEER SUPPORT AND PATIENT PARTNERSHIPS EMERGE AS POWERFUL, COST-EFFECTIVE STRATEGIES TO COMPLEMENT PROFESSIONAL CARE, ENHANCE PATIENT ENGAGEMENT, AND FOSTER COMMUNITY PARTICIPATION, WITH SUCCESSFUL INITIATIVES ALREADY DEMONSTRATING THEIR IMPACT IN VARIOUS AFRICAN CONTEXTS. IN PARALLEL, PAIN MANAGEMENT AFTER SPINAL CORD INJURY HIGHLIGHTS THE URGENT NEED FOR ADAPTED REHABILITATION STRATEGIES IN LOW- AND MIDDLE-INCOME SETTINGS, WHERE BOTH NEUROPATHIC AND NOCICEPTIVE PAIN SIGNIFICANTLY IMPAIR QUALITY OF LIFE.

ADDRESSING THESE INTERCONNECTED ISSUES—FROM STRUCTURAL ACCESS TO PATIENT-CENTERED PARTNERSHIPS AND INNOVATIVE PAIN MANAGEMENT—PROVIDES A COMPREHENSIVE FRAMEWORK TO ADVANCE REHABILITATION ACROSS THE CONTINENT. THIS SESSION BRINGS TOGETHER DIVERSE PERSPECTIVES AND PRACTICAL APPROACHES, AIMING TO IDENTIFY ACTIONABLE STRATEGIES THAT STRENGTHEN REHABILITATION SYSTEMS, IMPROVE EQUITY, AND ENHANCE PATIENT OUTCOMES IN AFRICA AND BEYOND.

11H00

LECTURE ID 36 OPTIMIZING ACCESS TO INPATIENT REHABILITATION FACILITIES IN NORTH AFRICA. SARA SKALLI, RIHAB MONCER

11H20

LECTURE ID 92 REVOLUTIONIZING CARE IN AFRICA: HARNESSING PEER SUPPORT AND PATIENT PARTNERSHIPS. SANA SALAH, ZOHRA BEN SALAH FRIH

11H40

LECTURE ID 124 PAIN AFTER SPINAL CORD INJURY: GLOBAL PERSPECTIVES AND SOLUTIONS FOR AFRICA. GÜL METE CIVELEK

11:00 - 12:00

OLIVERAIE

SESSION

BEYOND EXERCISE: THE NEXT GENERATION OF SARCOPENIA MANAGEMENT

ID 39

TOPIC MUSCULOSKELETAL

SPEAKERS GIOVANNI IOLASCON (ITALY)
 FRANCESCA GIMIGLIANO (ITALY)
 ANTIMO MORETTI (ITALY)
 JORGE LAINS (PORTUGAL)

CHAIR GIOVANNI IOLASCON, JORGE LAINS

THIS WORKSHOP AIMS TO ADDRESS THE GROWING CHALLENGE OF SARCOPENIA, A CONDITION THAT SIGNIFICANTLY IMPACTS PHYSICAL FUNCTION, QUALITY OF LIFE, AND INDEPENDENCE, PARTICULARLY IN OLDER ADULTS. THE SESSION WILL PROVIDE A PATIENT-CENTRED PERSPECTIVE, INTEGRATING CONVENTIONAL THERAPEUTIC STRATEGIES WITH CUTTING-EDGE DIGITAL HEALTH TECHNOLOGIES. THE WORKSHOP ALIGNS WITH THE CONGRESS'S FOCUS ON GLOBAL SOLUTIONS IN REHABILITATION BY EXPLORING MULTIMODAL INTERVENTIONS—SUCH AS EXERCISE, NUTRITION, AND DIGITAL TOOLS—TO OPTIMIZE SARCOPENIA MANAGEMENT.

IT HIGHLIGHTS HOW COMBINING TRADITIONAL AND INNOVATIVE THERAPIES CAN IMPROVE PATIENT OUTCOMES, SUPPORTING THE BROADER GOAL OF ADVANCING REHABILITATION SCIENCE.

11H00

INTRODUCTION. GIOVANNI IOLASCON, JORGE LAINS

11H05

THE OVERLOOKED EPIDEMIC: UNDERSTANDING THE GLOBAL BURDEN OF SARCOPENIA. FRANCESCA GIMIGLIANO

11H15

MUSCLE IN MOTION: THE POWER OF EXERCISE AND NUTRI ON IN SARCOPENIA CARE. GIOVANNI IOLASCON

11H30

DIGITAL INNOVATIONS FOR PERSONALIZED SARCOPENIA TREATMENT. ANTIMO MORETTI

11H45

FREE OC ID 906 EFFECTS OF HIGH-INTENSITY ECCENTRIC CYCLING ON AEROBIC AND FUNCTIONAL CAPACITIES AND HEALTH IN SEDENTARY PEOPLE. BENOÎT VANDENBROECK

11H50

OPEN DISCUSSION AND SUMMARY.

11:00 - 12:00

ORANGERAIE

SESSION

RETHINKING REHABILITATION: FROM PRECISION MEDICINE TO INNOVATIVE INTERVENTIONS

TOPIC INNOVATION

SPEAKERS SIHAM CHAFAI ELALAOU (MOROCCO)
NATHAN ROSENBERG (INDIA)

CHAIR NATHAN ROSENBERG, MASSIMO THOMAS LOY

REHABILITATION IS ENTERING A NEW ERA SHAPED BY SCIENTIFIC ADVANCES AND INNOVATIVE CONCEPTS THAT CHALLENGE TRADITIONAL PARADIGMS. THE GROWING UNDERSTANDING OF GENETICS HAS OPENED THE DOOR TO PERSONALIZED CARE, REPLACING THE "ONE SIZE FITS ALL" APPROACH WITH INTERVENTIONS TAILORED TO INDIVIDUAL GENETIC PROFILES. INSIGHTS FROM GENOMICS REVEAL HOW GENETIC VARIATIONS INFLUENCE HEALING, RESPONSIVENESS TO EXERCISE, AND REHABILITATION OUTCOMES, PAVING THE WAY FOR PRECISION REHABILITATION PLANS THAT OPTIMIZE RECOVERY AND REDUCE COMPLICATIONS. IN PARALLEL, THE CONCEPT OF "TIME TOXICITY" IS EMERGING AS A CRITICAL BUT OFTEN OVERLOOKED DIMENSION OF HEALTHCARE DECISION-MAKING.

BEYOND PHYSICAL SIDE EFFECTS AND FINANCIAL COSTS, REHABILITATION ALSO IMPOSES TIME BURDENS—including treatment sessions, travel, and care coordination—that can significantly affect quality of life. WHILE WIDELY DISCUSSED IN ONCOLOGY, THIS CONCEPT HAS ONLY RECENTLY BEGUN TO BE APPLIED TO REHABILITATION, WITH POTENTIAL IMPLICATIONS ACROSS STROKE, CANCER, PEDIATRIC, AND PAIN REHABILITATION. TAKEN TOGETHER, THESE PERSPECTIVES HIGHLIGHT HOW INTEGRATING GENETIC KNOWLEDGE AND AWARENESS OF TIME COSTS CAN LEAD TO MORE PERSONALIZED, EQUITABLE, AND PATIENT-CENTERED REHABILITATION STRATEGIES.

11H00

LECTURE ID 82 PERSONALIZED APPROACH TO REHABILITATION: WHEN GENETICS GUIDES REHABILITATION. SIHAM CHAFAI ELALAOU

11H20

LECTURE ID 22 TIME TOXICITY: THE SIDE EFFECT OF REHABILITATION INTERVENTIONS THAT YOU'RE NOT TALKING ABOUT. NATHAN ROSENBERG

11H40

OC ID 377 BEYOND CURE: THE TRANSFORMATIVE ROLE OF PHYSICAL MEDICINE AND REHABILITATION IN PALLIATIVE CARE FOR AGGRESSIVE CENTRAL NERVOUS SYSTEM TUMORS. DIANNA SERRA

11H45

OC ID 280 PREDICTING THE RISK OF PRESSURE INJURIES IN CRITICALLY ILL PATIENTS WITH COMMUNITY-ACQUIRED PNEUMONIA – EXTERNAL VALIDATION OF THE PRINCOVID SCORE. CARDOSO FERREIRA

11H50

OC ID 79 EFFECTS OF HOME-BASED VIRTUAL REALITY UPPER EXTREMITY REHABILITATION IN PATIENTS WITH CHRONIC STROKE: A RANDOMIZED CONTROLLED TRIAL. HIROYUKI ASE

11H55

OC ID 437 THE BENEFITS OF SCUBA DIVING FOR DISABLED PATIENTS. MASSIMO THOMAS LOY

11:00 - 12:00

ROSEIRAIE

SESSION

HYPERBARIC OXYGEN THERAPY: A NEW DOMAIN IN REHABILITATION MEDICINE

ID 95

TOPIC RESEARCH

SPEAKERS ABHISHEK SRIVASTAVA (INDIA)
NAVITA PUROHIT (INDIA)

CHAIR ABHISHEK SRIVASTAVA

HYPERBARIC OXYGEN THERAPY (HBOT) IS DEFINED AS THE INHALATION OF 100% OXYGEN UNDER THE PRESSURE GREATER THAN 1 ATMOSPHERE ABSOLUTE (ATA). HBOT HAS BEEN SHOWN TO INHIBIT APOPTOSIS, SUPPRESS INFLAMMATION, AND PROMOTE ANGIOGENESIS AND NEUROGENESIS. IT'S CONSIDERED AS AN ALLOPATHIC DRUG.

- THE DOSE RANGES FROM 2-3 ATA FOR 60-90 MINUTES FOR 10-40 SESSIONS.
- THE SERVICE IS RUN BY HYPERBARIC PHYSICIAN WITH ASSISTANCE OF HYPERBARIC NURSE: TO RULE PAST HISTORY TO EXCLUDE CONTRAINDICATIONS, DO DETAILED MEDICAL EXAMINATION TO ENSURE HBOT IS SAFE AND PROVIDE PHYSIOLOGICAL MONITORING AS NEEDED.
- REHABILITATION MEDICINE AS A THE SPECIALTY HAS REGULAR INTERFACE WITH GENERAL SURGERY, PLASTIC SURGERY, ORTHOPEDIC, NEUROLOGY AND ONCOLOGY AND IS THE MOST SUITABLE PLACE FOR RUNNING THE HBOT SERVICES IN AN HOSPITAL.
- WE ARE SUCCESSFULLY RUNNING IT FOR LAST 12 YEARS TREATING MORE THAN 200 HBOT SESSIONS PER MONTH.
- THE WORKSHOP WILL DISCUSS THE DEFINITIONS, TYPES, MECHANISM OF ACTION, INDICATIONS, DOSES, CURRENT GUIDELINES FOR USAGE AND CONTRAINDICATIONS AND SUCCESS STORIES WITH HBOT.

11H00

OVERVIEW OF WORKSHOP OBJECTIVES AND TOPICS. ABHISHEK SRIVASTAVA

11H05

HBOT: PRINCIPLES AND PRACTICE. NAVITA PUROHIT

11H25

HBOT: CHANGING LIVES OF PERSONS WITH DISABILITY. ABHISHEK SRIVASTAVA

11H45

OC ID 585 HYPERBARIC OXYGEN THERAPY IN IMPROVING NEUROLOGICAL AND FUNCTIONAL OUTCOME OF PERSONS WITH SEVERE HYPOXIC ISCHEMIC ENCEPHALOPATHY. NAVITA PUROHIT

11H50

OPEN DISCUSSION AND SUMMARY.

11:00 - 12:00

PALMERAIE

SHORT WORKSHOP



INTRODUCTION TO 3D SLICER SOFTWARE FOR REHABILITATION RESEARCH

ID 79

TOPIC RESEARCH

SPEAKERS PAPE MADY THIAO (SENEGAL)

CHAIR PAPE MADY THIAO

ATTENDEES 30

THIS WORKSHOP AIMS TO INTRODUCE PARTICIPANTS TO THE 3D SLICER SOFTWARE. THE GOAL IS TO SHARE PRACTICAL APPLICATIONS OF THE SOFTWARE IN REHABILITATION, RESEARCH AND TEACHING, AND DEMONSTRATE ITS UTILITY IN PATIENT MONITORING DURING REHABILITATION. OVERVIEW OF 3D SLICER IN THIS PART WE WILL TAKE ABOUT THE HISTORY OF 3D SLICER, HOW TO INSTALL AND PRESENT THE INTERFACE.

HOW TO PERFORM SEGMENTATION WITH 3D SLICER: WE WILL TALK ABOUT HOW TO DO A SEGMENTATION, TO ANALYSE DATA AND TO VISUALISE SEGMENTED DATA. 3D SLICER AND PMR WE WILL SHARE SOME APPLICATIONS OF 3D SLICER IN REHABILITATION.

11H00

OVERVIEW OF WORKSHOP OBJECTIVES AND THE RELEVANCE OF 3D SLICER IN REHABILITATION.

11H05

PRESENTATION ON THE HISTORY, INSTALLATION, AND CORE FUNCTIONS OF 3D SLICER SOFTWARE.

11H20

DEMONSTRATION OF SEGMENTATION TECHNIQUES.

11H35

HANDS-ON EXERCISES WHERE PARTICIPANTS WILL SEGMENT MEDICAL IMAGES AND VISUALIZE SEGMENTED DATA USING 3D SLICER TOOLS.

11H50

OPEN DISCUSSION TO ADDRESS PARTICIPANT QUERIES AND SUMMARIZE KEY TAKEAWAYS.

12:00 - 12:30

PLENARY

KEYNOTE

STATE OF PRM AND RELATED PERSPECTIVES IN AFRICA

TOPIC COMMUNITY

SPEAKERS ABDELLATIF EL FATIMI (MOROCCO)

CHAIR SAMIA KARKOURI, GERARD FRANCISCO

THROUGH THE MOROCCAN EXPERIENCE, WE WILL INSIST IN THIS PRESENTATION OF THE INTEREST OF THE DEVELOPMENT OF PHYSICAL MEDICINE AND REHABILITATION (PMR) IN AFRICA, BY TRAINING MORE PMR DOCTORS AND THE CREATION OF REHABILITATION CENTERS.

THIS HEALTH POLICY WILL IMPROVE THE FUNCTIONAL PROGNOSIS OF OUR PATIENTS WITH REDUCTION OF DISABILITY, BETTER SOCIAL REINTEGRATION AND A POSITIVE ECONOMIC IMPACT.

12:30 - 13:00

PLENARY

KEYNOTE

AGING, FUNCTION, AND REHABILITATION

SPEAKERS WALTER FRONTERA (USA)

CHAIR SAMIA KARKOURI, GERARD FRANCISCO

THE AGING OF THE WORLD'S POPULATION IS ONE OF THE MOST IMPACTFUL CHANGES OF THE 21ST CENTURY. HEALTH SYSTEMS AND SOCIETIES MUST ADAPT TO THIS IMPORTANT DEMOGRAPHIC TREND.

ONE OF THE CHARACTERISTICS OF THE AGING PROCESS IS THE LOSS OF FUNCTIONAL CAPACITY, INCLUDING BUT NOT LIMITED TO MOBILITY.

HOW TO UNDERSTAND, MEASURE, AND REPORT IT IS AN IMPORTANT CHALLENGE. REHABILITATION IS THE BEST STRATEGY TO UNDERSTAND THIS CHALLENGE AND ADDRESS IT.

INSTITUTIONAL PLENARY : REHABILITATION PATHWAYS IN MOROCCO: CHALLENGES, PERSPECTIVES AND POLICY DIRECTIONS

LANGUAGE: FRENCH
SUPPORTED BY MEDATHLEX

THIS PANEL WILL BRING TOGETHER REPRESENTATIVES FROM THE MOROCCAN MINISTRY OF HEALTH, MINISTRY OF SOCIAL INCLUSION, CNSS, CHU RABAT, UM6SS, AND THE FACULTY OF MEDICINE OF RABAT, ALONG WITH AN INTERNATIONAL PERSPECTIVE BY DR. ANDRÉ THÉVENON (FONDATION HOPALE, FRANCE). DISCUSSIONS WILL ADDRESS THE CURRENT CHALLENGES AND OPPORTUNITIES FOR PHYSICAL AND REHABILITATION MEDICINE IN MOROCCO, AND CONCLUDE WITH PRACTICAL RECOMMENDATIONS TO SHAPE FUTURE STRATEGIES.

BACKGROUND

THIS SESSION AIMS TO HIGHLIGHT THE CURRENT CHALLENGES OF PHYSICAL AND REHABILITATION MEDICINE (PRM) IN MOROCCO AND OPEN A DEBATE BETWEEN INSTITUTIONAL, HOSPITAL, SOCIAL, AND FINANCIAL STAKEHOLDERS TO ESTABLISH A SHARED ROADMAP FOR THE FUTURE.

DESCRIPTION

MEDICAL INTRODUCTION AND FRAMEWORK : SAMIA KARKOURI

- OVERVIEW OF PRM IN MOROCCO: ACCESS, TARIFFS, NOMENCLATURE, INVESTMENT BARRIERS.
- EXPERIENCE OF PROFESSIONALS AND INSIGHTS FROM SCIENTIFIC SOCIETIES.

INSTITUTIONAL AND HOSPITAL PERSPECTIVES:

- REPRESENTATIVE, MINISTRY OF HEALTH: NATIONAL VISION FOR REHABILITATION PATHWAYS, ONGOING AND UPCOMING PROJECTS, AND THE ROLE OF PRACTITIONERS IN CO-CONSTRUCTING THESE CARE MODELS.
- PROF. RAOUF MOHCINE, DIRECTOR OF CHU RABAT: ROLE OF THE UNIVERSITY HOSPITAL AS A CENTER OF EXCELLENCE IN PRM, WITH FOCUS ON RESEARCH, INNOVATION, AND HOSPITAL REFORM.
- REPRESENTATIVE, UM6SS FOUNDATION: PERSPECTIVE OF A PRIVATE ACADEMIC MODEL IN PRM, HIGHLIGHTING INNOVATIONS AND PILOT EXPERIENCES.
- PROF. BRAHIM LAKHAL, DEAN OF THE FACULTY OF MEDICINE AND PHARMACY OF RABAT: IMPORTANCE OF INITIAL AND CONTINUING EDUCATION IN PRM, STRENGTHENING COMPETENCIES, IMPROVING CARE QUALITY, AND ADDRESSING POPULATION NEEDS.

SOCIAL INCLUSION AND SOCIAL PROTECTION

- REPRESENTATIVE, MINISTRY OF INCLUSION AND SOCIAL SOLIDARITY: VISION OF A CLOSED HEALTH-SOCIAL LOOP, WITH PROJECTS FOR COMPREHENSIVE SUPPORT, ACCURATE DISABILITY ASSESSMENT, AND SUSTAINABLE SOCIAL INCLUSION.

CNSS (NATIONAL SOCIAL SECURITY FUND)

- REPRESENTATIVE, CNSS: DIGITALIZATION OF MEDICAL FILES AND ITS IMPACT. PLANNED REFORMS ON TARIFFS, NOMENCLATURES, AND OUT-OF-NOMENCLATURE ACTS. VISION OF A FUNCTIONAL SPECIALTY BASED ON MEASURABLE INDIVIDUAL INDICATORS.

INTERNATIONAL EXPERIENCE

- DR. ANDRÉ THÉVENON, FONDATION HOPALE (FRANCE): PRESENTATION OF INTERNATIONAL MODELS AND BEST PRACTICES IN REHABILITATION, DRAWING LESSONS TO STRENGTHEN THE MOROCCAN MODEL.

SYNTHESIS AND RECOMMENDATIONS



REHAB ROBOTICS: THE WAY FORWARD FOR FUNCTIONAL RECOVERY IN NEUROLOGICAL DISORDERS

TOPIC TECHNOLOGY & ROBOTICS

SPEAKERS ABHISHEK SRIVASTAVA (INDIA)

NAVITA PUROHIT (INDIA)

ANUPAM GUPTA (INDIA)

SOFIA STRAUDI (ITALY)

VIBEKE WAGNER (DANEMARK)

MERİÇ SELİM ŞİPAL (TÜRKİYE)

CHAIR ABHISHEK SRIVASTAVA, SOFIA STRAUDI

NEUROLOGICAL DISORDERS ARE A LEADING CAUSE OF ACQUIRED DISABILITY WORLDWIDE, RESULTING IN MAJOR MOTOR, SENSORY, COGNITIVE, AND PSYCHOLOGICAL DEFICITS THAT PROFOUNDLY REDUCE QUALITY OF LIFE AND CREATE A SUBSTANTIAL SOCIOECONOMIC BURDEN. TRADITIONAL REHABILITATION METHODS, WHILE ESSENTIAL, OFTEN PLACE HEAVY PHYSICAL DEMANDS ON THERAPISTS AND MAY HAVE LIMITED EFFECTIVENESS IN PATIENTS WITH SEVERE IMPAIRMENTS.

THE INTEGRATION OF ROBOTICS AND TECHNOLOGY-ASSISTED THERAPY HAS EMERGED AS A TRANSFORMATIVE SOLUTION, ENABLING INTENSIVE, REPETITIVE, AND FEEDBACK-BASED TRAINING THAT ENHANCES NEUROPLASTICITY AND ACCELERATES FUNCTIONAL RECOVERY. MODERN ROBOTIC SYSTEMS, INCLUDING EXOSKELETONS, END-EFFECTOR DEVICES, AND WEARABLE ROBOTICS, ARE INCREASINGLY COMBINED WITH COMPLEMENTARY TECHNOLOGIES SUCH AS VIRTUAL REALITY, BRAIN-COMPUTER INTERFACES, AND ARTIFICIAL INTELLIGENCE TO DELIVER MORE PERSONALIZED, ADAPTABLE REHABILITATION. THIS SESSION WILL PROVIDE A COMPREHENSIVE OVERVIEW OF RECENT CLINICAL EVIDENCE ON ROBOTIC AND DIGITAL REHABILITATION, HIGHLIGHTING FEASIBILITY, OPTIMAL DOSING AND INTENSITY, AND THE ROLE OF TECHNOLOGY IN MAXIMIZING REHABILITATION RESOURCES ACROSS A WIDE RANGE OF NEUROLOGICAL CONDITIONS. THROUGH EXPERT PRESENTATIONS AND INTERACTIVE DISCUSSION, PARTICIPANTS WILL GAIN ACTIONABLE INSIGHTS INTO THE CLINICAL APPLICABILITY, FUTURE DIRECTIONS, AND TRANSFORMATIVE POTENTIAL OF ROBOTICS AND DIGITAL HEALTH IN NEUROREHABILITATION.

14H30

OVERVIEW OF THE SESSION. CHAIRS

14H35

PART 1 - SESSION ID 96 UPPER LIMB ROBOTIC SYSTEMS. ABHISHEK SRIVASTAVA
LOWER LIMB ROBOTIC SYSTEMS. NAVITA PUROHIT
LOW COST ROBOTIC SYSTEMS. ANUPAM GUPTA

15H20

PART 2 -SESSION ID 58 THE ROLE OF ROBOTIC TECHNOLOGIES IN INTENSIVE THERAPY PROTOCOLS AND THE IMPORTANCE OF THERAPY DOSE AND INTENSITY IN REHABILITATION PROGRAMS
FEASIBILITY OF EARLY RAGT/STEP IN PATIENTS WITH SEVERE ACQUIRED BRAIN INJURY AND IMPAIRED CONSCIOUSNESS AND RAGT
CLINICAL TRIALS IN SEVERE ACQUIRED BRAIN INJURY
USING VERSATILE WALKING DEVICES: A NEW METHOD FOR ANDAGO® WITH A CLINICAL EXAMPLE – “ENHANCING BALANCE AND MOBILITY IN INCOMPLETE SPINAL CORD INJURY WITH AN OVERGROUND GAIT TRAINER”

16H05

OC ID 816 DEVICE-ASSISTED REHABILITATION IN ADHESIVE CAPSULITIS: A NEW ERA OF TREATMENT. SARA SKALLI

16H10

OC ID 530 TELEREHABILITATION WITH NON-IMMERSIVE VIRTUAL REALITY SERIOUS GAMES FOR CONTINUITY OF CARE IN PEOPLE WITH PARKINSON'S DISEASE: PRELIMINARY RCT RESULTS. SANAZ POURNAJAF

16H15

OPEN DISCUSSION AND SUMMARY.

INNOVATIONS AND UNMET NEEDS IN NEUROREHABILITATION

TOPIC NEUROREHABILITATION

SPEAKERS RAQUEL NEVES (SAUDI ARABIA)

ISMAEL CARNEIRO (PORTUGAL)

MARWA GHANMI (TUNISIA)

NEDRA ELFENI (TUNISIA)

SAHBI MTAWAA (TUNISIA)

CHAIR RAQUEL NEVES, ISMAEL CARNEIRO, MARWA GHANMI

STROKE AND CEREBRAL PALSY REPRESENT MAJOR CAUSES OF LONG-TERM DISABILITY WORLDWIDE, REQUIRING SUSTAINED REHABILITATION EFFORTS TO IMPROVE OUTCOMES AND QUALITY OF LIFE. STROKE REMAINS A LEADING CAUSE OF ADULT DISABILITY, WITH INCREASING NUMBERS OF SURVIVORS DUE TO ADVANCES IN ACUTE CARE. OPTIMIZING THE TRANSITION FROM STROKE UNITS TO REHABILITATION IS CRITICAL TO REDUCE DELAYS, IMPROVE FUNCTIONAL RECOVERY, AND ENHANCE PATIENT SATISFACTION. BEYOND MOBILITY IMPAIRMENTS, STROKE SURVIVORS FACE COGNITIVE, BEHAVIORAL, AND EMOTIONAL CHALLENGES, INCLUDING DEPRESSION, WHICH DEMAND INTEGRATED MULTIDISCIPLINARY APPROACHES. RECENT INNOVATIONS SUCH AS EXOSKELETAL DEVICES, NON-INVASIVE BRAIN STIMULATION, AND VIRTUAL REALITY SERIOUS GAMES ARE OPENING NEW PERSPECTIVES IN MOTOR AND COGNITIVE RECOVERY.

CEREBRAL PALSY, IN CONTRAST, REPRESENTS A LIFELONG CONDITION IN CHILDREN AND YOUNG ADULTS, OFTEN ASSOCIATED WITH UNMET HEALTHCARE NEEDS. DESPITE BEING FREQUENT USERS OF MEDICAL AND REHABILITATION SERVICES, MANY CHILDREN WITH CP FACE PERSISTENT BARRIERS IN ACCESSING QUALITY CARE, PARTICULARLY IN LOW- AND MIDDLE-INCOME COUNTRIES. ADDRESSING SPASTICITY, FUNCTIONAL CAPACITY, AND LONG-TERM FOLLOW-UP REMAINS ESSENTIAL TO IMPROVING THEIR PARTICIPATION AND HEALTH OUTCOMES.

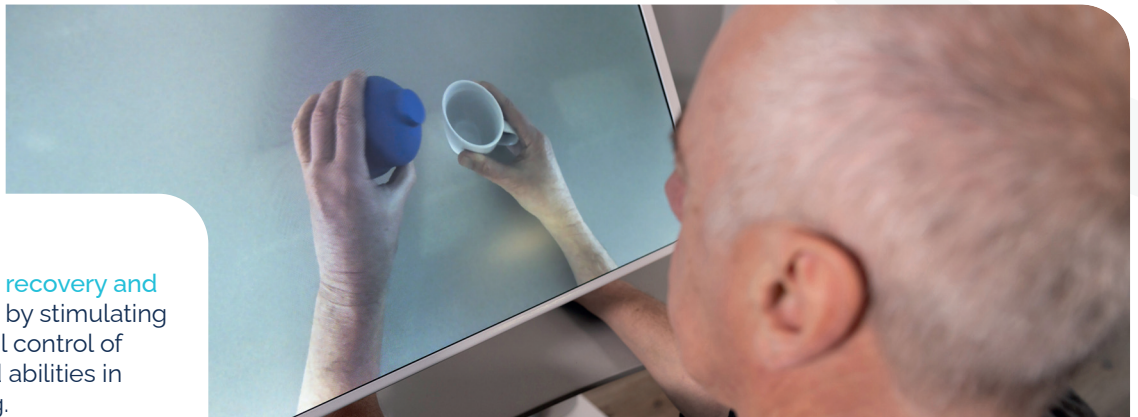
THIS SESSION WILL BRING TOGETHER LEADING EXPERTS TO PRESENT EVIDENCE-BASED STRATEGIES, TECHNOLOGICAL INNOVATIONS, AND INTERNATIONAL EXPERIENCES THAT CAN INFORM AND TRANSFORM NEUROREHABILITATION PATHWAYS, FROM ACUTE STROKE RECOVERY TO THE LIFELONG NEEDS OF CHILDREN WITH CEREBRAL PALSY.

Intensive Rehabilitation Technologies to accelerate patients' recovery and ensure greater quality of life

Dessintey develops unique solutions integrating motor control principles and cognitive processes to shape adaptive, patient-centered rehabilitation programs.

IVS3

Improve motor recovery and pain treatment by stimulating patient's central control of movement and abilities in action planning.



STIIMP

Reinforce and reward the use of the pathological limb with an enriched environment based on implicit learning & principles of CIMT.



SRT Lab

Break the cycle of inactivity and engage patients in their rehabilitation through group therapy and self-rehabilitation.



14H30
INTRODUCTION

14H35
SESSION ID 117 THE CHALLENGE: BARRIERS TO EFFECTIVE STROKE REHABILITATION TRANSITIONS.
EVIDENCE-BASED STRATEGIES FOR OPTIMIZING STROKE TRANSITIONS.
CASE STUDY & REAL-WORLD IMPLEMENTATION.

15H20
LECTURE ID 33 INSTRUMENTAL GAIT ANALYSIS GUIDING BOTULIN TOXIN TREATMENT: GOALS FOR LOWER LIMB SPASTICITY. ISMAEL CARNEIRO

15H40
LECTURE ID 70 EXPLORING UNMET HEALTHCARE NEEDS IN CHILDREN WITH CEREBRAL PALSY . MARWA GHANMI, NEDRA ELFENI, SAHBI MTAWAA

16H00
OC ID 741 COGNITIVE BEHAVIOR DISORDER IN INTENSIVE NEUROREHABILITATION UNIT: LITERATURE REVIEW AND MULTICENTER SURVE. CAMILLA GRIFONI

16H05
OC ID 512 IS THERE ANY NEURAL SUBSTRATES OF POST-STROKE DEPRESSION ? A CROSS-SECTIONAL STUDY. TAHA ZINEDDINE

16H10
OC ID 87 COMPARATIVE EFFECTIVENESS OF HIGH-FREQUENCY REPETITIVE TRANSCRANIAL MAGNETIC STIMULATION AT IPSILATERAL SITE VS LOW-FREQUENCY REPETITIVE TRANSCRANIAL MAGNETIC STIMULATION AT CONTRALATERAL SITE AT CEREBRAL CORTEX ON MOTOR FUNCTION IMPROVEMENT IN STROKE PATIENTS – AN OBSERVATIONAL STUDY. MOHIT KATARUKA

16H15
OC ID 685 CHANGES IN FUNCTIONAL CAPACITY BY MOTOR FUNCTION IN CHILDREN AND ADOLESCENTS WITH CEREBRAL PALSY: 12-MONTH REHABILITATION FOLLOW-UP IN THE TELETON CHILE NETWORK- A RETROSPECTIVE COHORT STUDY. KABIR P. SADARANGANI

16H20
OC ID 605 THE IMPACT OF RADIAL SHOCK WAVE THERAPY ON LOWER LIMB SPASTICITY IN CEREBRAL PALSY: RESULTS FROM A RANDOMIZED CONTROLLED CLINICAL TRIAL. MARIEM GADDOUR

16H25
SUMMARY

14:30 - 16:30

ORANGERAIE

SESSION

CUTTING EDGE PROGRESS AND IMPLEMENTATION OF GERIATRIC REHABILITATION

TOPIC ELDERLY

SPEAKERS ELEFThERIA ANTONIADOU (LUXEMBOURG)
CARMEN TERZIC (USA)
ANNE-FELICIA AMBROSE (USA)
PAOLO CAPODAGLIO (ITALY)
WALTER FRONTERA (PUERTO RICO)
MARTA SUERVIA (SPAIN)
DER-SHENG HAN (TAIWAN)
FRANCESCA GIMIGLIANO (ITALY)
MOOYEON OH-PARK (USA)
YEŞİM GÖKÇE KUTSAL (TÜRKİYE)

CHAIR ELEFThERIA ANTONIADOU, CARMEN TERZIC

THE SESSION AIMS TO HIGHLIGHT THE CHALLENGES FACED IN TREATING OLDER PATIENTS AND TO PRESENT EXISTING SOLUTIONS. ATTENDEES WILL RECEIVE EVIDENCE-BASED TOOLS AND PROVEN STRATEGIES FOR ADDRESSING KEY GERIATRIC SYNDROMES. THE DISCUSSION WILL ALSO OUTLINE A PATH FORWARD IN MANAGING THESE ISSUES.

14H30
INTRODUCTION

14H35
NEW RESEARCH FINDINGS IN DETECTING EARLY COGNITIVE AND MOTORIC DECLINE AND INTERVENTIONS IN THE OUTPATIENT AND COMMUNITY SETTINGS. ANNE-FELICIA AMBROSE

14H45
SYSTEMATIC IMPLEMENTATION OF SCREENING, ASSESSING, AND INTERVENING MALNUTRITION AND METABOLIC DISORDERS. PAOLO CAPODAGLIO

14H55
GERIATRIC SYNDROMES FRAILTY- SARCOPENIA AND THEIR IMPACT ON THE EXERCISE PRESCRIPTION AND THE OVERALL MANAGEMENT. WALTER FRONTERA

15H05
CARDIOVASCULAR IMPAIRMENTS: IMPACT ON DAILY ACTIVITIES, EXERCISE TOLERANCE, AND SOLUTIONS. MARTA SUERVIA

15H15
SYSTEMATIC IMPLEMENTATION OF SCREENING, ASSESSING, AND INTERVENING SARCOPENIA, FRAILTY, OSTEOPOROSIS, AND FRACTURE IN OUTPATIENT SERVICES. DER-SHENG HAN

15H25
OSTEOPOROSIS MANAGEMENT IN OLDER PEOPLE: GUIDELINES CONTROVERSIES AND FUTURE CHALLENGES. FRANCESCA GIMIGLIANO

15H35
THE AGE FRIENDLY CARE AND THE EFFECTIVE APPROACH OF OLDER PEOPLE. MOOYEON OH-PARK

- 15H45**
LECTURE ID 10 CHALLENGES AND OPPORTUNITIES OF GERIATRIC REHABILITATION IN TODAY'S WORLD MAIN SPEAKER. YEŞİM GÖKÇE KUTSAL
- 16H05**
OC ID 369 AQUATIC TRAINING IN PEOPLE WITH DM1: EFFECT ON MUSCLE STRENGTH, FUNCTIONAL CAPACITY, AND QUALITY OF LIFE. LAURENT BALLAZ
- 16H10**
OC ID 535 HOW URINARY INCONTINENCE AFFECTS THE QUALITY OF LIFE FOR MOROCCAN WOMEN. BOULENOUAR OUMAIMA
- 16H15**
OC ID 43 SOCIODEMOGRAPHIC DISPARITIES AND SEDENTARY BEHAVIOR AMONG OLDER ADULTS RESIDING IN SÃO PAULO, BRAZIL: RESULTS FROM A HEALTH SURVEY. BRUNO HOLANDA FERREIRA
- 16H20**
OC ID 119 A VIRTUAL REALITY AUTO ADAPTIVE SERIOUS GAME FOR POST STROKE COGNITIVE REHABILITATION. GREGORIO SORRENTINO
- 16H25**
SUMMARY

14:30 - 16:30

ROSERAIÉ

SESSION

FOOT FUNCTION AND PLANTAR PRESSURE MAPPING IN SPORTS REHABILITATION AND INJURY PREVENTION

ID 9

TOPIC SPORT

SPEAKERS ANTONIO ROBUSTELLI (ITALY)

CHAIR ANTONIO ROBUSTELLI

THE FOOT REPRESENTS THE ONLY POINT OF CONTACT WITH THE GROUND DURING ANY LOCOMOTOR ACTIVITY AND SPORT SPECIFIC SKILLS, THUS RESULTING IN IT BEING THE END-POINT FOR TRANSMISSION OF FORCES PRODUCED BY THE LOWER EXTREMITY MUSCLES AND ABSORPTION OF THE SHOCK CREATED AT FOOT IMPACT. AT THE SAME TIME THE FOOT HAS AN EXTREMELY COMPLEX STRUCTURE REQUIRING A DELICATE INTERPLAY BETWEEN TIMING AND MULTIFUNCTIONALITY OF A SERIES OF SMALL JOINTS AND MUSCLES TO PROVIDE A SMOOTH AND EFFICIENT MOTION.

ADVANCES IN TECHNOLOGY TODAY ALLOWS TO OBTAIN A PRECISE AND DETAILED INFORMATION ABOUT THE KINETICS OF FOOT STRIKE, ALLOWING TO BETTER INDIVIDUALIZE TREATMENT PLANS AND RAISE RED FLAGS FOR POTENTIAL RISK OF INJURY. THE PURPOSE OF THE SESSION IS TO REVIEW THE CURRENT LITERATURE ON FOOT FUNCTIONALITY AS IT RELATES TO SPORTS PERFORMANCE AS WELL AS THE TECHNOLOGY BEHIND PLANTAR PRESSURE MAPPING AND ITS APPLICATION IN SPORTS MEDICINE FOR REHABILITATION AND INJURY RISK ASSESSMENT.

THE LAST PART OF THE SESSION WILL FOCUS ON SELECTED CASE STUDIES FOR THE MOST COMMON LOWER LIMB INJURIES IN SPORT. BEING "GLOBAL SOLUTIONS FOR REHABILITATION" THE MAIN THEME OF THE CONGRESS, THE APPLICATION OF PLANTAR PRESSURE MAPPING TECHNOLOGY ALIGN PERFECTLY WITH THE AIM OF THE EVENT.

- 14H30**
OVERVIEW OF SESSION OBJECTIVES AND TOPIC.
- 14H35**
PRESENTATION OF KEY CONCEPTS AND LITERATURE REVIEW.
- 15H15**
OC ID 766 MATERIAL AND HUMAN RESOURCES FOR THE PRACTICE OF OUTDOOR SPORTS BY PEOPLE WITH DISABILITIES: A NATIONAL CROSS-SECTIONAL STUDY. VINCENT CARPENTIER
- 15H20**
OC ID 477 LONG-TERM OUTCOMES OF ANTERIOR CRUCIATE LIGAMENT RECONSTRUCTION BASED ON GAIT ANALYSIS. DMITRY SKVORTSOV
- 15H25**
OC ID 712 HIGH- VS. LOW-INTENSITY RESISTANCE TRAINING IN KNEE OSTEOARTHRITIS: A COMPARATIVE STUDY. KHAWLA RSAISSI
- 15H30**
PRESENTATION OF TECHNOLOGY AND CASE-STUDIES.
- 16H10**
OC ID 467 FUNCTIONAL OUTCOME OF SURGICALLY TREATED FRACTURES OF THE ACETABULUM. HICHAM EL HYAOUI
- 16H20**
OPEN DISCUSSION AND SUMMARY.

14:30 - 16:30

PALMERAIE

SESSION

TOPIC INDUSTRY SESSION

REHABILITATION AND UNIVERSAL HEALTH COVERAGE: FROM POLICY GAPS TO ACTION

TOPIC WRA SESSION

SPEAKERS WHO HEALTH FINANCING (EXPERT)
WHO REGIONAL (REPRESENTATIVE)
REHABILITATION ADVOCATE WITH LIVED (EXPERIENCE)
ABDERRAZAK HAJJIOUI (MOROCCO)
WHO/WRA (REPRESENTATIVE)

CHAIR ISPRM PRESIDENT, WHO/WRA REPRESENTATIVE, GOVERNMENTAL REPRESENTATIVE

AS THE GLOBAL COMMUNITY PUSHES TOWARD THE 2030 TARGETS FOR UNIVERSAL HEALTH COVERAGE (UHC), REHABILITATION REMAINS ONE OF THE MOST OVERLOOKED ELEMENTS IN HEALTH SYSTEMS. YET ONE IN THREE PEOPLE GLOBALLY NEED IT—AND ONLY HALF HAVE ACCESS. WITHOUT REHABILITATION, THE UHC PROMISE REMAINS INCOMPLETE.

THIS SESSION, CO-ORGANIZED BY THE WORLD REHABILITATION ALLIANCE (WRA), WHO, AND ISPRM, WILL EXPLORE CURRENT GAPS IN REHABILITATION POLICY, FINANCING, AND DELIVERY, AND PROVIDE A CLEAR CASE FOR WHY REHABILITATION MUST BE INTEGRATED INTO NATIONAL HEALTH BENEFITS PACKAGES AND UHC MONITORING FRAMEWORKS. WITH GLOBAL, REGIONAL, AND USER PERSPECTIVES, THIS SESSION WILL BRIDGE POLICY DISCOURSE WITH LIVED EXPERIENCE, AND PROVIDE ACTIONABLE RECOMMENDATIONS FOR HEALTH SYSTEM PLANNERS AND REHABILITATION PROFESSIONALS.

DRAWING ON RECENT WHO RESOLUTIONS AND UPCOMING ADVOCACY TOWARD THE 2027 UN HIGH-LEVEL MEETING ON UHC, THIS SESSION AIMS TO POSITION REHABILITATION AS A NON-NEGOTIABLE COMPONENT OF EQUITABLE, RESILIENT HEALTH SYSTEMS.

15H30

WHY REHABILITATION IS THE MISSING LINK IN UHC DELIVERY. AMY JO COLLINS

15H50

REGIONAL PERSPECTIVES: REHABILITATION GAPS AND OPPORTUNITIES IN UHC FRAMEWORKS. WHO REGIONAL REPRESENTATIVE

16H10

REHABILITATION AND FINANCIAL PROTECTION: TACKLING OUT-OF-POCKET BARRIERS. WHO HEALTH FINANCING EXPERT

16H20

THE LIVED EXPERIENCE: WHAT UHC MEANS FOR PEOPLE WHO NEED REHABILITATION. REHABILITATION ADVOCATE WITH LIVED EXPERIENCE

16H50

CHARTING THE WAY FORWARD: POLICY PRIORITIES FOR ISPRM AND WRA. ABDERRAZAK HAJJIOUI





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OFFICIAL ORGANIZING AGENCY OF ISPRM25

14:30 - 16:30

ARGANIER

SHORT WORKSHOP



ULTRASOUND GUIDED PHENOL MOTOR POINT BLOCKS OF UPPER AND LOWER LIMB MUSCLES FOR SPASTICITY MANAGEMENT

ID 99

TOPIC SPASTICITY

SPEAKERS TAWAB KHALIL (PAKISTAN)
OMAR KHAN (PAKISTAN)

CHAIR MUHAMMAD TAWAB KHALIL

ATTENDEES 20

SPASTICITY AFTER UPPER MOTOR NEURON LESIONS IS OF PARTICULAR CONCERN FOR PRM SPECIALISTS. ALTHOUGH ITS POSITIVE EFFECTS CAN BE ADVANTAGEOUS FOR THE REHABILITATION OF PATIENTS, IT DOES NEED TO BE MODULATED TO MINIMIZE ITS NEGATIVE EFFECTS AND COMPLICATIONS. BOTULINUM TOXIN IS COMMONLY UTILIZED FOR CHEMODENERVATION OF SPASTIC MUSCLES IN COUNTRIES WHERE IT IS READILY ATTAINABLE. ITS EFFECTS ARE REVERSIBLE, BUT ITS RELATIVELY HIGH COST CAN LIMIT ACCESS FOR REPEAT USE IN SOME CIRCUMSTANCES. PHENOL, AS AN ALTERNATIVE OPTION, IS CONSIDERABLY CHEAPER AND CAN ALSO BE VERY EFFECTIVE FOR MOTOR POINT BLOCKS TO PROVIDE A SIMILAR CLINIC EFFECT ON SPASTIC MUSCLE. THE USE OF ULTRASOUND AND THE MODIFIED HECKMATT SCALE CAN HELP TO GRADE SPASTIC MUSCLE FIBROSIS IN REAL TIME AND ASSIST IN CORRECTLY CHOOSING THE TARGET SPASTIC MUSCLES FOR ADMINISTRATION OF PHENOL. SUCCESS CAN BE FURTHER ENHANCED BY UTILIZING ULTRASOUND GUIDANCE FOR IDENTIFYING OPTIMAL INTRAMUSCULAR LOCATIONS FOR PHENOL MOTOR POINT BLOCKADE.

14H30

PRE – WORKSHOP ASSESSMENT. MUHAMMAD TAWAB KHALIL

14H35

INTRODUCTION TO SPASTICITY MANAGEMENT. MUHAMMAD TAWAB KHALIL

14H40

COMPARE TREATMENT OPTIONS: PHENOL AS AN AFFORDABLE ALTERNATIVE. MUHAMMAD TAWAB KHALIL

14H45

UTILIZE ULTRASOUND AS A GUIDING TOOL. MUHAMMAD TAWAB KHALIL

14H50

ULTRASOUND-GUIDED MOTOR POINT BLOCKS IN UPPER LIMBS. MUHAMMAD TAWAB KHALIL

15H00

HANDS ON SESSION ON ULTRASOUND GUIDED MOTOR POINT BLOCKS IN UPPER LIMBS. MUHAMMAD TAWAB KHALIL, OMAR KHAN

15H30

ULTRASOUND-GUIDED MOTOR POINT BLOCKS IN LOWER LIMBS. MUHAMMAD TAWAB KHALIL

15H40

HANDS ON SESSION ON ULTRASOUND GUIDED MOTOR POINT BLOCKS IN LOWER LIMBS. MUHAMMAD TAWAB KHALIL, OMAR KHAN

16H10

FEEDBACK AND CONCLUSION. MUHAMMAD TAWAB KHALIL

16:30 - 17:00

BREAK

17:00 - 19:00

PLENARY

SESSION

PEDIATRIC REHABILITATION SESSION

ID 45

TOPIC PEDIATRIC SESSION

SPEAKERS VERA TSETLINA (USA)
NATHAN ROSENBERG (USA)
RAJASHREE SRINIVASAN (USA)
JARED LEVIN (USA)

CHAIR VERA TSETLINA

THIS SESSION, ORGANIZED BY MEMBERS OF THE PEDIATRIC REHABILITATION SPECIAL INTEREST GROUP OF ISPRM, WOULD BE OUR FIRST OFFICIAL ACADEMIC GATHERING. WE PROPOSE A 2-HOUR SESSION FEATURING DISCUSSIONS ON TWO HIGH-YIELD TOPICS IN OUR SPECIALTY: EARLY CLINICAL DIAGNOSIS OF CEREBRAL PALSY AND EVIDENCE-BASED PRACTICAL EARLY INTERVENTION APPROACHES FOR ITS TREATMENT. REHABILITATION FOR PEDIATRIC PATIENTS WITH CANCERS INCLUDING THE COMPREHENSIVE REHABILITATION FOR NEURO-ONCOLOGY PATIENTS, POSTERIOR FOSSA SYNDROME, DIAGNOSIS AND TREATMENT OF MUSCLE WASTING AND STEROID MYOPATHY. THIS SESSION WILL BE OF PARTICULAR INTEREST TO PEDIATRIC REHABILITATION PHYSICIANS AND ADULT PROVIDERS WORKING IN CANCER REHABILITATION.

WE PLAN TO CONCLUDE WITH AN OPEN DISCUSSION ON THE FUTURE DIRECTION OF THE PEDIATRIC REHABILITATION SPECIAL INTEREST GROUP OF ISPRM AND SUBSEQUENT MEETING PLANNING.

- 17H00**
INTRODUCTIONS AND OVERVIEW OF SESSION OBJECTIVES AND TOPICS.
- 17H10**
PRESENTATIONS OF KEY CONCEPTS AND RECENT ADVANCEMENTS IN EARLY CEREBRAL PALSY CARE.
- 17H50**
PRESENTATIONS ON THE HIGH YIELD TOPICS OF PEDIATRIC CANCER REHABILITATION.
- 18H30**
OC ID 685 CHANGES IN FUNCTIONAL CAPACITY BY MOTOR FUNCTION IN CHILDREN AND ADOLESCENTS WITH CEREBRAL PALSY: 12-MONTH REHABILITATION FOLLOW-UP IN THE TELETÓN CHILE NETWORK- A RETROSPECTIVE COHORT STUDY. KABIR P. SADARANGANI
- 18H40**
SUMMARY AND OPEN DISCUSSION.

17:00 - 19:00

OLIVERAIE

SHORT WORKSHOP



EVALUATION AND ULTRASOUND GUIDED MANAGEMENT OF POST STROKE SHOULDER PAIN

ID 102

TOPIC DIAGNOSTIC & PRACTICE

SPEAKERS NAVITA PUROHIT VYAS (INDIA)
ABHISHEK SRIVASTAVA (INDIA)
AMIT BHARGAVA (USA)

CHAIR NAVITA PUROHIT VYAS

ATTENDEES 60

STROKE HAS A VERY HIGH INCIDENCE OF ABOUT 2.4% IN GENERAL ADULT POPULATION AND IS ONE OF THE MAIN CAUSES OF DISABILITY WORLDWIDE. APPROXIMATELY 90% OF STROKE SURVIVORS HAVE COMPROMISED FUNCTIONS INCLUDING MOTOR, SENSORY, COGNITIVE AND AUTONOMIC FUNCTIONS A COMMON SEQUEL OF STROKE IS POST STROKE SHOULDER PAIN (PSSP) WHICH IS OFTEN PRECIPITATED WITH MOVEMENTS OF THE JOINT. THIS CAN HAMPER THE EFFECTIVE UTILIZATION OF RESIDUAL FUNCTION, FURTHER TRAINING AND SUBSEQUENTLY LEAD TO DISABILITY.

IT ALSO PROLONGS REHABILITATION OF AFFECTED LIMBS AND HOSPITAL STAY THEREBY ADDING TO THE COST OF REHABILITATION. PSSP CAN BEGIN AS EARLY AS 2 WEEKS POST STROKE BUT TYPICALLY OCCURS WITHIN 2-3 MONTHS POST-STROKE. IT HAS A PREVALENCE OF AROUND 35-45% AND IS UNDERSTOOD TO BE UNDER REPORTED AND UNDERTREATED.

THE ETIOLOGY OF SHOULDER PAIN IN STROKE IS MULTIFACTORIAL AND MOST STUDIES HAVE FAILED TO ESTABLISH A CAUSE-AND-EFFECT RELATIONSHIP. THE MOST FREQUENTLY SUSPECTED FACTORS INCLUDE SHOULDER SUBLUXATION, CONTRACTURES, COMPLEX REGIONAL PAIN SYNDROME (CRPS), ROTATOR CUFF INJURY, CENTRAL PAIN AND SPASTICITY.

- 17H00**
OVERVIEW OF WORKSHOP OBJECTIVES AND TOPICS.
- 17H05**
POST STROKE SHOULDER PAIN: CAUSES AND MANAGEMENT. NAVITA PUROHIT VYAS
- 17H25**
MANAGEMENT OF SPASTICITY FOR PSSP. ABHISHEK SRIVASTAVA
- 17H40**
NORMAL SONOANATOMY OF SHOULDER WITH COMMON ULTRASOUND FINDINGS. AMIT BHARGAVA
- 17H50**
INTERVENTIONS AROUND SHOULDER FOR PSSP. NIMISH MITTAL
- 18H00**
Q&A
- 18H05**
- HANDS ON USG (ULTRASOUND GUIDANCE) DÉMONSTRATION
 - NORMAL SHOULDER ULTRASOUND. AMIT BHARGAVA
 - INTERVENTIONS SHOULDER FOR PSSP. NIMISH MITTAL
 - STELLATE GANGLION USG FOR CRPS. NAVITA PUROHIT VYAS
 - SPASTIC MUSCLE INJECTION WITH BOTULINUM TOXIN. ABHISHEK SRIVASTAVA
- 18H55**
SUMMARY

17:00 - 19:00

ORANGERAIE

SHORT WORKSHOP



TRAINING REQUIREMENTS FOR UNDERGRADUATE MEDICAL EDUCATION IN PHYSICAL AND REHABILITATION MEDICINE: CHALLENGES TO THE ACHIEVEMENT OF AN INTERNATIONAL STANDARD

ID 68

TOPIC EDUCATION & TRAINING

SPEAKERS MARIA GABRIELLA CERAVOLO (ITALY)
CAROLYN KINNEY (USA)
REYNALDO REY-MATIAS (PHILIPPINES)

CHAIR MARIA GABRIELLA CERAVOLO

ATTENDEES 60

THE ACHIEVEMENT OF A STANDARD PRM EDUCATION AND TRAINING FOR MEDICAL STUDENTS WORLDWIDE WOULD REPRESENT AN IMPORTANT ACHIEVEMENT FOR THE DISCIPLINE AND THE ACHIEVEMENT OF REHABILITATION 2030 GOALS. IT WOULD ALLOW US TO FOSTER A DEEPER UNDERSTANDING OF THE NEEDS OF PEOPLE LIVING WITH OR EXPERIENCING DISABILITY, THE GOALS OF REHABILITATION, THE ROLE OF PRM PHYSICIANS WITHIN THE CARE PATHWAYS, AND THEIR COMMITMENTS TOWARDS PATIENTS, CARERS, REHABILITATION HEALTH PROFESSIONALS, AND OTHER MEDICAL SPECIALISTS, THE POLICYMAKERS, AND THE SOCIETY. CURRENTLY, IN MOST LMIC COUNTRIES, REHABILITATION EDUCATION AND TRAINING INFRASTRUCTURES ARE INSUFFICIENT. THE POTENTIAL WORKFORCE MIGHT LACK AWARENESS OF AVAILABLE CAREER PATHWAYS IN REHABILITATION, AND EXISTING PRACTITIONERS MAY FACE CHALLENGES IN ACCESSING OPPORTUNITIES FOR ONGOING EDUCATION, HINDERING THEIR ABILITY TO ENHANCE CLINICAL COMPETENCE AND FOSTER PROFESSIONAL GROWTH. EVEN IN DEVELOPED COUNTRIES, PEOPLE WHO COULD BENEFIT FROM REHABILITATION ARE INADEQUATELY REFERRED FOR SUCH HEALTH SERVICES. STUDIES DEMONSTRATE THAT ACCESS TO EXISTING REHABILITATION SERVICES IS HAMPERED BY 'GENERAL PRACTITIONERS' POOR EDUCATION ABOUT THE SCOPE AND EFFECTIVENESS OF REHABILITATION. CONVERSELY, THE SUCCESSFUL IMPLEMENTATION OF EDUCATION PROGRAMS FOR THE REHABILITATION WORKFORCE HAS THE POTENTIAL TO BRIDGE THE REHABILITATION ACCESS GAP WITHIN THE CONTEXT OF UHC.

17H00
INTRODUCTION

17H10
STANDARD IN POSTGRADUATE PRM EDUCATION:

- THE AMERICAN PERSPECTIVE
- THE EUROPEAN PERSPECTIVE
- THE ASIAN PERSPECTIVE
- THE AFRICAN PERSPECTIVE.

CAROLYN KINNEY, REYNALDO REY-MATIAS, ABDERRAZAK HAJJIOUI

18H30
DISCUSSION

17:00 - 19:00

ROSERAIE

SHORT WORKSHOP



HOW TO EFFECTIVELY INTEGRATE RESEARCH METHODS AND CONCEPTS INTO DAILY PRACTICE OR CLINICAL SETTINGS

ID 8

TOPIC RESEARCH

SPEAKERS SLAVKO ROGAN (SWITZERLAND)
RON CLIJSEN (SWITZERLAND)
ERICH HOHENAUER (SWITZERLAND)

CHAIR SLAVKO ROGAN

ATTENDEES 60

PROFESSIONALS IN MEDICINE AND HEALTHCARE CAN SEAMLESSLY INCORPORATE EVIDENCE-BASED PRACTICES INTO THEIR DAILY ROUTINES WITHOUT SIGNIFICANT DISRUPTIONS. THIS INTEGRATION BEGINS WITH FORMULATING A RESEARCH QUESTION AND SELECTING A STUDY DESIGN TAILORED TO THEIR SPECIFIC WORKPLACE. BY EMPLOYING RESEARCH STUDY DESIGNS, PROFESSIONALS CAN COLLECT EMPIRICAL DATA THAT NOT ONLY ENSURES RELIABILITY BUT ALSO ENHANCES WORKPLACE QUALITY AND EFFICIENCY.

17H00
INTRODUCTION

17H05
HOW TO IMPLEMENT SINGLE-CASE STUDY DESIGN INTO EVERYDAY WORK? RON CLIJSE

17H20
WAYS IN WHICH A CASE STUDY CAN BE INTEGRATED INTO CLINICAL PRACTICE. ERICH HOHENAUER

17H35
WHAT IS IMPORTANT FOR SURVEYS ON WORKPLACE? SLAVKO ROGAN

17H50
GROUP WORK.

18H20
PRESENTATION OF THE FINDINGS.

18H50
SUMMARY AND OUTLOOK.



OPTIMIZING THE UTILITY OF ULTRASOUND FOR ASSESSMENT AND TREATMENT OF THE SPASTIC MUSCLE: PRACTICAL CLINICAL PEARLS

ID

TOPIC SPASTICITY

SPEAKERS RAJIV REEBYE (CANADA)
ÈVE BOISSONNAULT (CANADA)
ANTON PICK (UK)
STEFANO CARDA (SWITZERLAND)
OMAR KHAN (CANADA)

CHAIR RAJIV REEBYE, STEFANO CARDA

ATTENDEES 50

ULTRASOUND (US) IS AN IMPORTANT TOOL FOR PERFORMING CHEMODENERVATION AND DIAGNOSTIC NERVE BLOCKS IN THE TREATMENT OF SPASTICITY. THE ROLE OF ULTRASOUND IN SPASTICITY MANAGEMENT HAS BEEN WELL DISCUSSED LITERATURE. (ALTER & KARP, 2017; WINSTON ET AL., 2023) IN ADDITION, US GUIDANCE MAY HELP CLINICIANS IN THE LONG-TERM ASSESSMENT AND FOLLOW-UP OF MUSCLE QUALITY. (MORETA ET AL., 2020) THERE IS GREAT INTEREST AMONGST PHYSICIANS SPECIALIZED IN SPASTIC MOTOR DISORDERS REGARDING THE ABILITY TO DIFFERENTIATE THE DEGREE OF ECHO INTENSITY IN PATIENTS WITH AN UPPER MOTONEURON PATHOLOGY DUE TO RECENT LITERATURE SUGGESTING THAT ECHOGENICITY HAS THE POTENTIAL TO INFLUENCE RESPONSE TO SPASTICITY TREATMENT, INCLUDING RESPONSE TO BOTULINUM TOXIN INJECTIONS.

(PICELLI ET AL., 2012; HARA ET AL., 2018) OUR GROUP OF PHYSIATRISTS WITH EXPERTISE IN SPASTICITY MANAGEMENT HAS BEEN COLLABORATING AND CONTRIBUTING TO THE LITERATURE ON THE USE OF US FOR SPASTICITY ASSESSMENT AND MANAGEMENT OVER THE LAST FEW YEARS. (FRANCISCO ET AL., 2021; LAGNAU ET AL., 2021; WINSTON ET AL., 2023; KASSAM ET AL., 2023; BOISSONNAULT ET AL., 2024; HESLOT ET AL., 2024; MCRAE ET AL. 2024) THE FOCUS OF THIS WORKSHOP IS TO PROVIDE CLINICAL PEARLS TO ENHANCE THE USE OF ULTRASOUND IN THE RESEARCH AND CLINICAL SETTINGS.

17H00

PANELISTS' INTRODUCTION.

17H05

BACKGROUND AND REVIEW OF THE LITERATURE ON MUSCLE ARCHITECTURAL CHANGES IN SPASTIC DISORDERS AND PRESENTATION OF THE MODIFIED HECKMATT SCALE.

17H25

LIVE DEMONSTRATION IN 4 SMALL GROUPS:

- • SHARING OF CLINICAL PEARLS ON PROPER US SCANNING AND INJECTION TECHNIQUES.
- • IDENTIFICATION OF NERVES.
- • IDENTIFICATION OF MUSCLES.
- • EXPLAINING HOW TO INCORPORATE THE MODIFIED HECKMA SCALE IN A CLINICAL SETTING.

18H00

POTENTIAL APPLICATION OF THE MODIFIED HECKMA SCALE IN A CLINICAL SETTING AND FUTURE DIRECTIONS.

18H15

HANDS-ON PRACTICE OF LEARNED PRACTICAL CLINICAL PEARLS ON PROPER US SCANNING AND INJECTION TECHNIQUES, INCLUDING MUSCLE ASSESSMENT WITH THE MODIFIED HECKMA SCALE

FOUR STATIONS :

1. ERGONOMICS/KNOBOLOGY AND ENHANCING INJECTION TECHNIQUE
2. ULTRASOUND IDENTIFICATION OF MUSCLES
3. ULTRASOUND IDENTIFICATION OF KEY NERVES
4. ELEVATOR TECHNIQUE FOR IDENTIFICATION OF KEY MUSCLES TO BE INJECTED UPPER AND LOWER LIMB SPASTICITY



THERAPEUTICS



PULMONARY REHABILITATION IN SPINAL CORD INJURY

ID 31

TOPIC CARDIOPULMONARY

SPEAKERS SEONG-WOONG KANG (SOUTH KOREA)
YU HUI WON (SOUTH KOREA)

CHAIR SEONG-WOONG KANG

ATTENDEES 30

THIS WORKSHOP AIMS TO PROVIDE AN IN-DEPTH UNDERSTANDING OF PULMONARY REHABILITATION FOR PATIENTS WITH SPINAL CORD INJURY (SCI). THE SESSION WILL FOCUS ON THE PATHOPHYSIOLOGY OF RESPIRATORY DYSFUNCTION IN SCI, SECRETION MANAGEMENT TECHNIQUES, AND NON-INVASIVE RESPIRATORY SUPPORT STRATEGIES.

A VIDEO DEMONSTRATION WILL ALSO BE INCLUDED TO ILLUSTRATE KEY PROCEDURES, ENSURING PARTICIPANTS GAIN PRACTICAL KNOWLEDGE APPLICABLE TO THEIR CLINICAL PRACTICE.

17H00
OVERVIEW OF WORKSHOP OBJECTIVES AND KEY TOPICS.

17H10
PATHOPHYSIOLOGY AND PULMONARY FUNCTION EVALUATION. SEONG-WOONG KANG

17H35
SECRETION MANAGEMENT. YU HUI WON

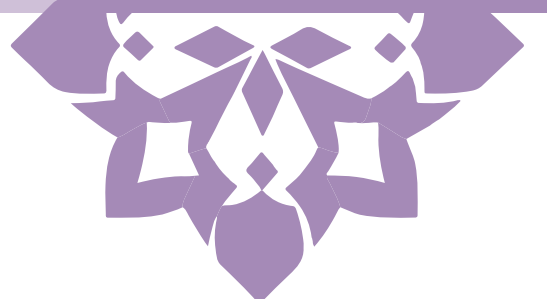
18H00
NON-INVASIVE RESPIRATORY CARE. SEONG-WOONG KANG

18H30
VIDEO DEMONSTRATION. YU HUI WON

18H50
OPEN DISCUSSION AND CONCLUSION.



PROGRAM DAY 4
WEDNESDAY 5/11/2025



08:30 - 10:30

PLENARY

SESSION

FALL PREVENTION IN REHABILITATION HOSPITALS

ID 15

TOPIC ELDERLY

SPEAKERS PEII CHEN (USA)

MOOYEON OH-PARK (USA)

CHAIR PEII CHEN, MOOYEON OH-PARK

IN-HOSPITAL FALLS RESULT IN SIGNIFICANT PHYSICAL AND ECONOMIC BURDENS TO PATIENTS (INCREASED INJURY AND MORTALITY RATES, AND DECREASED QUALITY OF LIFE) AS WELL AS TO HEALTHCARE ORGANIZATIONS (INCREASED LENGTHS OF STAY, CARE COSTS, AND LITIGATION). OLDER ADULTS AND STROKE SURVIVORS ARE AT A HIGH RISK OF IN-HOSPITAL FALLS DUE TO DECREASED COGNITIVE AND MOTOR ABILITIES, SUCH AS INSUFFICIENT ALLOCATION OF SPATIAL ATTENTION, REDUCED PROCESSING SPEED IN STIMULUS DETECTION AND RESPONSE EXECUTION, INEFFICIENT GAIT PATTERNS, AND IMPAIRED BALANCE MECHANISMS DURING STANDING, WALKING, OR SURFACE TRANSFERS. CURRENT IN-HOSPITAL FALL PREVENTION IS FOCUSED ON MONITORING AND SUPERVISION.

FALL ALARMS CAN ALERT OTHERS THAT A PERSON HAS FALLEN AND NEEDS HELP, OR A PERSON MAY FALL AND NEEDS TO BE MONITORED (E.G., A PERSON TRYING TO GET OUT OF BED OR ROOM). SOME ALARM SENSORS ARE ATTACHED TO FURNITURE, AND OTHERS ARE WEARABLES THAT SENSE CHANGES IN THE PERSON'S POSITION.

IN HOSPITAL SETTINGS, MUCH HAS BEEN INVESTED IN TECHNIQUES (E.G., COLORED WRIST BAND TO NOTIFY HOSPITAL STATE OF PATIENTS WITH HIGH FALL RISKS) AND TECHNOLOGIES (E.G., NEAR FALL DETECTORS, 24/7 SURVEILLANCE CAMERAS INSTALLED IN PATIENTS' ROOMS). HOWEVER, BASED ON THE LATEST COCHRANE REVIEW AND SCOPING REVIEW, THERE IS NO METHOD THAT EFFECTIVELY PREVENT FALLS IN HEALTHCARE FACILITIES OR HOSPITAL SETTINGS.

8H30

INTRODUCTION

8H35

IN-HOSPITAL FALL PREVENTION IN REHABILITATION: CURRENT PRACTICES, LESSONS FROM NEW YORK, AND FUTURE DIRECTIONS. MOOYEON OH-PARK

9H15

DISCUSSION

9H25

SPATIAL NEGLECT AND FALL RISK IN STROKE PATIENTS: EVIDENCE, TREATMENT WITH PRISM ADAPTATION, AND CLINICAL IMPLICATIONS. PEII CHEN

10H10

DISCUSSION

10H20

OC ID 466 A MULTIDOMAIN APPROACH TO FALL PREVENTION IN ELDERLY INDIVIDUALS: RISK ASSESSMENT, REHABILITATION, AND PHYSICAL ACTIVITY. ANGELA PALOMBA

10H25

SUMMARY

08:30 - 10:30

OLIVERAIE

SESSION

BUILDING AN AFRICAN REHABILITATION ALLIANCE: AMPLIFYING VOICES FOR CHANGE

ID 63

TOPIC COMMUNITY

SPEAKERS ABENA TANNOR (GHANA)

FRANCESCA GIMIGLIANO (ITALY)

SINFORIAN KAMBOU (CAMEROUN)

ABDERRAZAK HAJJIOUI (MOROCCO)

CHAIR ABENA TANNOR, SINFORIAN KAMBOU

THIS SESSION TACKLES THE CRITICAL NEED FOR A COHESIVE AND INFLUENTIAL VOICE ADVOCATING FOR IMPROVED REHABILITATION SERVICES, TRAINING, AND WORKFORCE DEVELOPMENT THROUGHOUT AFRICA. IN LINE WITH THE ISPRM CONGRESS THEME, "GLOBAL SOLUTIONS IN REHABILITATION: (RE)VISITING AFRICA BEFORE 2030," THE SESSION ACKNOWLEDGES THAT LASTING PROGRESS HINGES ON ROBUST REGIONAL LEADERSHIP AND COLLABORATIVE EFFORTS.

PARTICIPANTS WILL EXPLORE THE FEASIBILITY OF ESTABLISHING AN AFRICAN REHABILITATION ALLIANCE, DRAWING INSPIRATION FROM THE WORLD REHABILITATION ALLIANCE. THIS POTENTIAL ALLIANCE WOULD SERVE AS A POWERFUL ADVOCATE FOR THE RIGHTS AND NEEDS OF INDIVIDUALS WITH DISABILITIES ACROSS THE CONTINENT.

THE SESSION WILL FACILITATE DISCUSSIONS AMONG KEY AFRICAN REHABILITATION STAKEHOLDERS, INCLUDING PROFESSIONALS, POLICYMAKERS, AND REPRESENTATIVES OF DISABILITY ORGANIZATIONS.

8H30

INTRODUCTION

- 8H45
THE REHABILITATION LANDSCAPE IN AFRICA: CHALLENGES AND OPPORTUNITIES.
- 9H05
THE POWER OF ADVOCACY: THE ROLE AND IMPACT OF ALLIANCES
- 9H35
BUILDING AN AFRICAN REHABILITATION ALLIANCE: A COLLABORATIVE ACTION PLANNING SESSION.
- 10H10
OC ID 138 ADVANCING REHABILITATION MEDICINE IN AFRICA: INSIGHTS FROM A MULTINATIONAL FELLOWSHIP PROGRAM. MARY ELIZABETH NELSON
- 10H15
OPEN DISCUSSION, SUMMARY OF KEY FINDINGS, AND NEXT STEPS.

08:30 - 12:00

ORANGERAIE
LONG WORKSHOP



AGEING WITH NEUROLOGICAL DISABILITY WITH SPECIAL REFERENCE TO SPINAL CORD INJURY

ID 94

TOPIC NEUROREHABILITATION

SPEAKERS PRADEEP THUMBIKAT (UK)
LISA GRANDIDGE (UK)
SIVARAMAN NAIR (UK)
SACHIN WATVE (UK)

CHAIR PRADEEP THUMBIKAT

ATTENDEES 60

GIVEN THE INCREASE IN PEOPLE WITH SCI AND OTHER NEUROLOGICAL DISABILITIES LIVING INTO THEIR OLD AGE, ADJUSTMENTS TO ACCOMMODATE AGEING IS ESSENTIAL TO MAINTAIN QOL AND TO REDUCE HEALTHCARE COSTS.

THE WORKSHOP ON AGEING WITH A NEURODISABILITY, PARTICULARLY SPINAL CORD INJURY (SCI), WILL ADDRESS THE UNIQUE CHALLENGES AND STRATEGIES REQUIRED FOR MAINTAINING HEALTH, INDEPENDENCE, AND QUALITY OF LIFE.

- 8H30
EXPERT-LED PRESENTATIONS ON KEY AGEING-RELATED SCI CHALLENGES AND SOLUTIONS.
- 8H40
CASE-BASED DISCUSSIONS FOCUSING ON REAL-WORLD PATIENT SCENARIOS.
- 9H30
HANDS-ON TRAINING IN ADVANCED WOUND CARE, PAIN MANAGEMENT, AND ASSISTIVE TECHNOLOGY APPLICATIONS.
- 11H30
PANEL DISCUSSIONS TO EXPLORE COLLABORATIVE CARE APPROACHES.

08:30 - 12:00

ROSERAIIE
LONG WORKSHOP



ULTRASOUND EVALUATION OF UPPER LIMB PERIPHERAL NERVES-HANDS ON WORKSHOP MAIN

ID 105

TOPIC MUSCULOSKELETAL

SPEAKERS AMIT BHARGAVA (USA)
HANA AZIZI (USA)
NAVITA PUROHIT (INDIA)
LEVENT ÖZÇAKAR (TÜRKIYE)
MARK HURDLE (USA)
MOOYOEN OH-PARK (USA)
HEAKYUNG KIM (USA)
KAMAL MEZIAN (CZECH)

CHAIR AMIT BHARGAVA

ATTENDEES 40

MUSCULOSKELETAL SONOGRAPHY IS BECOMING AN IMPORTANT PART FOR EVALUATING AND MANAGING JOINT, NERVE AND SOFT TISSUE DISORDERS. THIS COURSE IS DESIGNED TO SHORTEN THE LEARNING CURVE FOR HEALTH PROFESSIONALS INTERESTED IN DEVELOPING EXPERTISE IN MSK ULTRASOUND OF PERIPHERAL NERVES. THE COURSE WILL FAMILIARIZE CLINICIANS WITH KEY TECHNIQUES USED TO PERFORM MSK EXAMINATIONS. CLINICIANS WILL LEARN TO RECOGNIZE NORMAL ANATOMY, COMMON PATHOLOGIES, AND CRITICALLY EVALUATE THE IMAGES.

- 8H30
INTRODUCTION. AMIT BHARGAVA

- 8H35
PRESENTATION OF KEY CONCEPTS AND RECENT ADVANCEMENTS.
- 9H00
CASE STUDIES OR PRACTICAL APPLICATIONS.
- 9H30
NETWORKING AND DISCUSSION.
- 9H45
ULTRASOUND OF PERIPHERAL NERVE - HANDS ON ROTATION. AMIT BHARGAVA, HANA AZIZI, NAVITA PUROHIT, LEVENT ÖZÇAKAR, MARK HURDLE, MOOYOUNG OH-PARK, HEAKYUNG KIM, KAMAL MEZIAN
- 11H45
QUESTIONS, DISCUSSION, CONCLUSION

08:30 - 12:00

PALMERAIE
LONG WORKSHOP



OPTIMIZING NEUROGENIC BLADDER AND BOWEL MANAGEMENT IN REHABILITATION

ID 119

TOPIC PELVIC FLOOR BLADDER & BOWEL

SPEAKERS RAQUEL NEVES (SAUDIA ARABIA)
RAMI AL AHMAR (JORDAN)
IMEN MIRI (TUNISIA)

CHAIR RAQUEL NEVES, RAMI AL AHMAR

ATTENDEES 50

NEUROGENIC BLADDER AND BOWEL DYSFUNCTION ARE COMMON IN PATIENTS WITH SPINAL CORD INJURY, STROKE, MULTIPLE SCLEROSIS, AND OTHER NEUROLOGICAL CONDITIONS. INEFFECTIVE MANAGEMENT CAN LEAD TO COMPLICATIONS SUCH AS URINARY TRACT INFECTIONS (UTIS), CONSTIPATION, PRESSURE INJURIES, AND PROLONGED HOSPITAL STAYS. MANY REHABILITATION TEAMS STRUGGLE WITH DEVELOPING STANDARDIZED, EVIDENCE-BASED BLADDER AND BOWEL PROGRAMS, LEADING TO INCONSISTENT CARE AND POOR PATIENT OUTCOMES. THIS WORKSHOP ADDRESSES THESE CHALLENGES BY PROVIDING PRACTICAL, MULTIDISCIPLINARY STRATEGIES TO OPTIMIZE NEUROGENIC BLADDER AND BOWEL MANAGEMENT, IMPROVE PATIENT QUALITY OF LIFE, AND REDUCE HOSPITAL LENGTH OF STAY (LOS).

8H30
OVERVIEW OF WORKSHOP OBJECTIVES AND TOPICS.

8H35
UNDERSTANDING NEUROGENIC BLADDER AND BOWEL DYSFUNCTION PATHOPHYSIOLOGY AND CAUSES:

- HOW NEUROLOGICAL CONDITIONS (SCI, STROKE, MS, PARKINSON'S) IMPACT BLADDER AND BOWEL FUNCTION.
- DIFFERENCES BETWEEN UPPER MOTOR NEURON (UMN) AND LOWER MOTOR NEURON (LMN) DYSFUNCTIONS.
- ASSESSMENT TOOLS & DIAGNOSTIC CRITERIA:
- STANDARDIZED ASSESSMENTS FOR BLADDER AND BOWEL DYSFUNCTION.
- URODYNAMIC TESTING, STOOL CONSISTENCY SCALES, AND CONTINENCE EVALUATION.
- INTERACTIVE DISCUSSION: CHALLENGES IN ASSESSMENT AND MANAGEMENT IN DIFFERENT HEALTHCARE SETTINGS.

9H05
BEST PRACTICES IN BLADDER MANAGEMENT

- EVIDENCE-BASED STRATEGIES:
- CATHETERIZATION OPTIONS: INTERMITTENT CATHETERIZATION, INDWELLING CATHETERS, EXTERNAL DEVICES.
- TIMED VOIDING AND BLADDER RETRAINING PROGRAMS.
- MEDICATION MANAGEMENT FOR DETRUSOR OVERACTIVITY AND SPHINCTER DYSFUNCTION.
- COMPLICATION PREVENTION & MANAGEMENT:
- STRATEGIES TO REDUCE URINARY TRACT INFECTIONS (UTIS) AND ANTIBIOTIC RESISTANCE.
- MANAGING HYDRATION, FLUID BALANCE, AND AUTONOMIC DYSREFLEXIA RISKS.
- CASE STUDY DISCUSSION: PARTICIPANTS ANALYZE REAL-WORLD BLADDER MANAGEMENT SCENARIOS

9H35
NETWORKING & DISCUSSION

9H45
BEST PRACTICES IN BOWEL MANAGEMENT

- ESTABLISHING EFFECTIVE BOWEL PROGRAMS:
- DIGITAL STIMULATION, MANUAL EVACUATION, AND DIETARY MODIFICATIONS.
- MEDICATION USE: LAXATIVES, STOOL SOFTENERS, SUPPOSITORIES, ENEMAS.
- PREVENTING AND MANAGING COMMON COMPLICATIONS:
- IDENTIFYING AND TREATING CHRONIC CONSTIPATION, FECAL INCONTINENCE, AND IMPACTION.
- THE IMPACT OF BOWEL DYSFUNCTION ON SKIN INTEGRITY AND PRESSURE INJURY PREVENTION.
- HANDS-ON ACTIVITY: DEVELOPING A BOWEL PROGRAM FOR A CASE SCENARIO.

10H30
INTEGRATING MULTIDISCIPLINARY TEAM APPROACHES

COLLABORATION BETWEEN PHYSICIANS, NURSES, AND THERAPISTS:

- THE ROLE OF REHABILITATION NURSES, PHYSIATRISTS, PTS, OTS, AND CASE MANAGERS IN BOWEL AND BLADDER CARE.
- HOW SPEECH THERAPISTS AND DIETITIANS CONTRIBUTE TO PATIENT SUCCESS.
- FAMILY AND PATIENT EDUCATION:
- TEACHING SELF-MANAGEMENT STRATEGIES FOR LONG-TERM INDEPENDENCE.
- CULTURAL CONSIDERATIONS AND BARRIERS IN PATIENT ADHERENCE.
- DISCUSSION: IDENTIFYING GAPS IN MULTIDISCIPLINARY TEAM COLLABORATION.

11H00
PROTOCOL DEVELOPMENT & REAL-WORLD APPLICATION.

11H45
OPEN DISCUSSION AND SUMMARY.



MUSCLE MATTERS: THE ROLE OF PRM IN SARCOPENIA

ID 42

TOPIC MUSCULOSKELETAL

SPEAKERS AYŞE A. KÜÇÜKDEVECİ (TÜRKİYE)
YEŞİM KURTAŞ AYTÜR (TÜRKİYE)
AYSUN GENÇ (TÜRKİYE)

CHAIR AYŞE A. KÜÇÜKDEVECİ**ATTENDEES** 30

SARCOPENIA IS A GENERALIZED DISEASE OF THE SKELETAL MUSCLE DEFINED AS REDUCED MUSCLE MASS AND MUSCLE STRENGTH. ALTHOUGH IT HAS FORMERLY BEEN REGARDED AS AN AGE-RELATED CONDITION OF OLDER ADULTS (PRIMARY SARCOPENIA), IT MAY ALSO BE SEEN IN MANY OTHER DISORDERS SUCH AS NEUROLOGICAL, INFECTIOUS, RHEUMATOLOGICAL, IMMOBILITY- OR CANCER-RELATED CONDITIONS (SECONDARY SARCOPENIA). THE AGED, SEDENTARY, AND THOSE WITH ACUTE AND CHRONIC CONCOMITANT CONDITIONS THAT IMPACT THE MUSCULOSKELETAL SYSTEM OR LIMIT PHYSICAL ACTIVITY ARE THE INDIVIDUALS MOST FREQUENTLY AFFECTED BY SARCOPENIA. IT HAS IMPORTANT HEALTH CONSEQUENCES, INCLUDING IMPAIRED PHYSICAL PERFORMANCE, INCREASED RISK OF FALLS AND FRACTURES, LIMITATIONS OF MOBILITY AND DAILY ACTIVITIES, AND POOR QUALITY OF LIFE; THUS RESULTING IN HIGH MORTALITY AND SIGNIFICANT HEALTHCARE COSTS. SARCOPENIA IS AN INCREASINGLY SERIOUS PUBLIC HEALTH ISSUE WORLDWIDE, WITH A PREVALENCE OF 5-13% AMONG THOSE AGED 60-70 YEARS AND 11-50% AMONG THOSE >80 YEARS OLD.

THE NUMBER OF PEOPLE AFFECTED BY SARCOPENIA ARE PREDICTED TO RISE FROM 50 TO 200 MILLION IN THE NEXT 40 YEARS. DESPITE ITS CLINICAL AND SOCIO-ECONOMICAL IMPORTANCE, SARCOPENIA REMAINS UNDER-RECOGNIZED AND POORLY MANAGED IN ROUTINE CLINICAL PRACTICE. IT IS A POTENTIALLY REVERSIBLE CONDITION, THEREFORE EARLY DETECTION AND TIMELY INTERVENTION ARE OF GREAT IMPORTANCE FOR IMPROVING OUTCOMES. PHYSICIANS AND OTHER HEALTH PROFESSIONALS WORKING IN THE FIELD OF PHYSICAL AND REHABILITATION MEDICINE (PRM) OFTEN ENCOUNTER INDIVIDUALS AT RISK OF SARCOPENIA DUE TO THEIR CLINICAL PRACTICE IN ACUTE, POST-ACUTE AND LONG-TERM CONDITIONS. THE AIM OF THIS WORKSHOP IS TO INFORM REHABILITATION PROFESSIONALS ABOUT SARCOPENIA, TO INCREASE THEIR AWARENESS ABOUT THIS HEALTH CONDITION AND TO DISCUSS MANAGEMENT STRATEGIES FOR THEIR CLINICAL PRACTICE IN THE REHABILITATION SETTING.

FIRSTLY, DEFINITION AND EPIDEMIOLOGY OF SARCOPENIA WILL BE INTRODUCED, FOLLOWED BY THE EXPLANATION OF RISK FACTORS, CLINICAL CATEGORIES, AND BRIEF PATHOPHYSIOLOGY. SECOND PART OF THE PROGRAM WILL INCLUDE SCREENING, DIAGNOSIS AND ASSESSMENT OF SARCOPENIA. THEN MANAGEMENT STRATEGIES, MAINLY EXERCISE AND NUTRITIONAL THERAPY, WITH ADJUNCTIVE PHYSICAL MODALITIES WILL BE PRESENTED IN THE LIGHT OF EVIDENCE-BASED DATA. FINAL PART WILL BE AN INTERACTIVE SESSION AS GROUP DISCUSSIONS AND INCLUDE CASE STUDIES OF DIFFERENT PATIENTS WHERE PARTICIPANTS WILL DISCUSS THE ASSESSMENT, DIAGNOSIS AND INDIVIDUALISED MANAGEMENT STRATEGIES FOR EACH PRESENTED CASE.

8H30

WELCOME AND OVERVIEW OF WORKSHOP OBJECTIVES AND TOPICS.

8H40

DEFINITION AND EPIDEMIOLOGY OF SARCOPENIA

- ETIOLOGICAL RISK FACTORS AND CLINICAL CATEGORIES
- PATHOPHYSIOLOGY OF SARCOPENIA

9H30

DISCUSSION

9H45

INTERACTIVE SESSION: CASE STUDIES AS GROUP DISCUSSIONS/ACTIVITIES.

11H45

OPEN DISCUSSION AND SUMMARY.

10:30 - 11:00

BREAK

11:00 - 12:00

PLENARY
SESSION

THE FUTURE OF REHABILITATION MEDICINE – PRECISION MEDICINE

ID 131

TOPIC RESEARCH

SPEAKERS JOÃO PINHEIRO (PORTUGAL)
JORGE LAÍNS (PORTUGAL)
JOÃO BRANCO (PORTUGAL)
RENATO NUNES (PORTUGAL)
ANA ZÃO (PORTUGAL)
CATARINA BRANCO (PORTUGAL)

CHAIR JOÃO PINHEIRO, JORGE LAÍNS

THE PROVISION OF HEALTHCARE AND RESEARCH IN REHABILITATION MEDICINE HAS ITS OWN CLINICAL ASSUMPTIONS AND IDENTITY. PRECISION REHABILITATION COMBINES THE NEED TO IMPLEMENT THE BEST EVIDENCE WITH THE PERSONALIZATION OF CARE, PROMOTING FUNCTIONALITY AND QUALITY OF LIFE.

11H00

BIG DATA AND ARTIFICIAL INTELLIGENCE IN REHABILITATION MEDICINE. JOÃO PINHEIRO

11H10

THE INFLUENCE OF PSYCHOSOCIAL AND ENVIRONMENTAL FACTORS ON THE REHABILITATION PROGRAM. JORGE LAÍNS

11H20

BIOMARKERS IN THE PERSONALIZATION OF REHABILITATION. JOÃO BRANCO

11H30

INTEGRATING GENETICS IN THE INNOVATION OF REHABILITATION PROGRAMS. RENATO NUNES

11H40

PREDICTING FUNCTIONAL OUTCOMES WITH NEUROIMAGING. ANA ZÃO

11H50

PERSONALIZING CARE WITH MOBILE APPLICATIONS/APPs. CATARINA BRANCO

11:00 - 12:00

OLIVERAIE

SESSION

BRIDGING THE GAP: A COLLABORATIVE REHABILITATION PATHWAY FOR ABI PATIENTS AND THEIR FAMILIES

ID 93

TOPIC COMMUNITY

SPEAKERS ALEXANDRA WRAY (UK)

ABAYOMI SALAWU (UK)

NATHALIE MARTIN (UK)

CHAIR ALEXANDRA WRAY

INDIVIDUALS LIVING WITH ACQUIRED BRAIN INJURY (ABI) AND THEIR FAMILIES OFTEN FACE SIGNIFICANT CHALLENGES DURING REHABILITATION AND BEYOND, WITH MANY EXPERIENCING FRAGMENTED CARE AND A LACK OF COORDINATED SUPPORT. CRITICAL ISSUES AND OPPORTUNITIES IN REHABILITATION HAVE BEEN IDENTIFIED IN AFRICAN COUNTRIES. SIGNIFICANT GAPS EXIST IN REHABILITATION SERVICES, WITH AT LEAST 63% OF PEOPLE IN NEED NOT RECEIVING THE REQUIRED CARE.

THIS WORKSHOP EXPLORES AN INNOVATIVE PARTNERSHIP BETWEEN A NEUROREHABILITATION WARD IN SECONDARY CARE AND A BRAIN INJURY CHARITY, WHICH HAS LED TO THE CO-DEVELOPMENT OF A REHABILITATION PATHWAY DESIGNED TO IMPROVE PATIENT OUTCOMES AND PROVIDE HOLISTIC SUPPORT FOR FAMILIES. CASE STUDY DISCUSSIONS SHOWCASING REAL-WORLD IMPACTS ON PATIENTS AND FAMILIES WILL BE SHARED. FINDINGS FROM A PARTICIPATORY RESEARCH PROJECT CONDUCTED WITH FAMILIES AFFECTED BY ABI WILL BE SHARED.

THIS RESEARCH ENGAGED FAMILY CARERS AS CO-RESEARCHERS TO EXPLORE THEIR NEEDS, SUPPORT EXPERIENCES, AND BARRIERS TO ACCESSING SERVICES. THE INSIGHTS GAINED DIRECTLY INFORMED THE DEVELOPMENT OF A SUPPORT PROGRAMME FOR FAMILIES, ENSURING THAT SERVICES ALIGN WITH THE LIVED EXPERIENCES OF THOSE MOST AFFECTED. THE PARTICIPATORY RESEARCH PROJECT USED CREATIVE RESEARCH METHODS INCLUDING PHOTOVOICE METHODOLOGY. PHOTOVOICE EMPOWERS INDIVIDUALS TO DOCUMENT AND SHARE THEIR LIVED EXPERIENCES THROUGH PHOTOGRAPHY. THIS APPROACH IS PARTICULARLY VALUABLE FOR RESEARCH WITH FAMILIES AFFECTED BY ACQUIRED BRAIN INJURY (ABI), AS IT PROVIDES A VISUAL AND NARRATIVE PLATFORM TO EXPRESS CHALLENGES, NEEDS, AND COPING STRATEGIES IN WAYS THAT TRADITIONAL INTERVIEWS OR SURVEYS MAY NOT CAPTURE.

11H00

INTRODUCTION: OVERVIEW OF OBJECTIVES AND TOPICS.

11H05

OVERVIEW OF THE CHARITY SERVICES.

11H15

OVERVIEW OF THE PARTNERSHIP BETWEEN CHARITY AND ACUTE SERVICES.

11H25

KEY FINDINGS FROM A PARTICIPATORY RESEARCH PROJECT.

11H35

SCREENING OF AN ANIMATION CREATED BY FAMILIES TO INSTIL HOPE TO OTHERS LIVING WITH ABI.

11H40

OC ID 348 DEVELOPMENT OF THE CLINFIT COMMUNITY QUESTIONNAIRE FOR ASSESSING FUNCTIONING LEVELS IN PRIMARY CARE SETTINGS. FATIMAH AHMEDY

11H45 OC ID 546 THE INTERNATIONAL SPINAL CORD INJURY COMMUNITY SURVEY: PRELIMINARY RESULTS FROM DATA COLLECTION IN CAMEROON. SIMFORIAN KAMBOU

11H50

OC ID 133 RESTING-EEG THETA POWER INCREASE FOLLOWING REHABILITATION IN CHRONIC MCA STROKE PATIENTS WITH UPPER-LIMB IMPAIRMENT. REBECA PARDO-GARCIA

11H55

SUMMARY

12:00 - 12:30

PLENARY

KEYNOTE

INTERVENTIONAL PAIN MANAGEMENT: A GAME-CHANGER FOR PRM IN DEVELOPING COUNTRIES

TOPIC PAIN

SPEAKERS AHMED AMINE EL OUMRI (MOROCCO)

CHAIR ABDELLATIF EL FATIMI, TEVEN FAUX

12:30 - 13:00

PLENARY

KEYNOTE

REHABILITATION AND WOMEN'S HEALTH: GLOBAL CHALLENGES AND OPPORTUNITIES

TOPIC SPECIFIC CONDITION & DISABILITIES

SPEAKERS FARY KHAN (AUSTRALIA)

CHAIR ABDELLATIF EL FATIMI, STEVEN FAUX

THIS LECTURE WILL HIGHLIGHT GLOBAL CHALLENGES FOR WOMEN'S HEALTH AND REHABILITATION. AN UPDATED HEALTH POLICY STRATEGY FOR WOMEN WILL BE PRESENTED ACROSS A RANGE OF FACTORS SUCH AS BIOMEDICAL, BEHAVIOURAL, SOCIAL, ECONOMIC AND ENVIRONMENTAL INFLUENCES, THAT CONTRIBUTE TO HEALTH OUTCOMES; AND KEY HEALTH INEQUITIES SUCH AS ACCESS TO SERVICES, HEALTH LITERACY, STIGMA AND GENDER INEQUALITY, THAT ARE EXPERIENCED BY MANY WOMEN. ACKNOWLEDGING THE UNIQUE NEEDS OF DIFFERENT POPULATION GROUPS IS A KEY ELEMENT, WITH PRIORITY POPULATIONS RECOGNISED AND TARGETED INTERVENTIONS IDENTIFIED TO IMPROVE HEALTH OUTCOMES FROM THE REHABILITATION PERSPECTIVE.

THROUGH A LIFE COURSE APPROACH, THERE IS RECOGNITION OF A RANGE OF HEALTH NEEDS, RISKS AND INFLUENCES EXPERIENCED BY WOMEN AT DIFFERENT STAGES OF LIFE, AND FOCUSES ON THE IMPORTANCE OF INVESTING IN AWARENESS AND EDUCATION, HEALTH INTERVENTIONS, SERVICE DELIVERY AND RESEARCH AT THESE KEY STAGES TO MAXIMISE PHYSICAL, MENTAL AND SOCIAL HEALTH AT EVERY AGE. THE PRINCIPLES AND OBJECTIVES PROVIDE A FRAME FOR BOTH THE DEVELOPMENT AND IMPLEMENTATION OF PRIORITIES AND ACTIONS OUTLINED TO DRIVE CHANGE AND IMPROVE HEALTH OUTCOMES.

13:00 - 14:30

PLENARY

LUNCH BREAK SYMPOSIUM BTL

ROBOTIC REHABILITATION FOR UPPER AND LOWER EXTREMITIES: CURRENT EVIDENCE AND CLINICAL PATHWAYS





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BTL Symposium

Robotic Rehabilitation for Upper and Lower Extremities:
Current Evidence and Clinical Pathways



November 5th
1:00 PM



**Palmeraie
Convention Center**
Marrakesh, Morocco



**Anamarija
Soldo Koruga**

Specialist in Neurology,
MD, PhD, Department
of Neurology, Croatia



**Sanaz
Pournajaf**

Senior Clinical
Researcher, IRCCS
San Raffaele, Italy



14:30 - 15:00

PLENARY

KEYNOTE

NEW CHALLENGES FOR PRM IN DIABETES MELLITUS

TOPIC GLOBAL REHABILITATION APPROACHES

SPEAKERS CATHERINE DZIRI (TUNISIA)

CHAIR YOUNESS ABDELFTTAH, FRANCESCA GIMIGLIANO

DIABETES MELLITUS IS A MAJOR PUBLIC HEALTH CONCERN, AFFECTING MILLIONS OF PEOPLE WORLDWIDE AND HAS BEEN RISING MORE RAPIDLY IN LOW- AND MIDDLE-INCOME COUNTRIES. ITS COMPLICATIONS EXTEND BEYOND METABOLIC DISTURBANCES, IMPACTING MULTIPLE ORGAN SYSTEMS AND SIGNIFICANTLY INFLUENCING REHABILITATION OUTCOMES.

MANAGEMENT OF DIABETES REQUIRES LIFELONG MULTIDISCIPLINARY TREATMENT, BUT ALSO NON THERAPEUTIC ISSUES. PHYSICAL AND REHABILITATION MEDICINE HAS A REAL ROLE IN THE ASSESSMENT, BUT ALSO IN THE PRIMARY, SECONDARY AND TERTIARY PREVENTION OF DIABETES MELLITUS.

THIS PRESENTATION EXPLORES THE IMPLICATIONS OF DIABETES IN REHABILITATION MEDICINE, WITH A FOCUS ON CARDIOVASCULAR – NEUROLOGICAL – MUSCULOSKELETAL COMPLICATIONS, URINARY AND SEXUAL DYSFUNCTIONS.

15:00 - 15:30

PLENARY

KEYNOTE

TECHNOLOGY-AIDED REHABILITATION: LESSONS LEARNED AND FUTURE DIRECTIONS

SPEAKERS MARIA GABRIELLA CERAVOLO (ITALY)

CHAIR YOUNESS ABDELFTTAH, HAJER RAHALI

ADVANCEMENTS IN TECHNOLOGY HAVE TRANSFORMED REHABILITATION, OFFERING INNOVATIVE SOLUTIONS TO ENHANCE PATIENT RECOVERY, IMPROVE ACCESSIBILITY, AND OPTIMISE THERAPEUTIC OUTCOMES. FROM WEARABLE SENSORS AND ROBOTICS TO VIRTUAL REALITY AND AI-DRIVEN INTERVENTIONS, TECHNOLOGY-AIDED REHABILITATION HAS EVOLVED SIGNIFICANTLY, PROVIDING PERSONALISED AND DATA-DRIVEN APPROACHES TO TREATMENT.

HOWEVER, CHALLENGES SUCH AS ACCESSIBILITY, USER ADAPTABILITY, AND ETHICAL CONSIDERATIONS REMAIN.

THIS LECTURE WILL EXPLORE KEY LESSONS FROM PAST IMPLEMENTATIONS, EXAMINE FUTURE DIRECTIONS FOR INTEGRATING CUTTING-EDGE TECHNOLOGIES INTO REHABILITATION, REFLECT ON THE RATIONALE FOR THEIR EFFECTIVENESS, AND PRESENT THE PROMISES OF USING ARTIFICIAL INTELLIGENCE TO ENSURE MORE EFFECTIVE, INCLUSIVE, AND PATIENT-CENTRED CARE.

15:30 - 16:30

PLENARY

SESSION

NAVIGATING THE NEW GLOBAL HEALTH CRISIS AND WHY PM&R IS AT THE VANGUARD

ID 50

TOPIC SPECIFIC CONDITIONS AND DISABILITIES

SPEAKERS VANGUARD DAVID BURKE (USA)

CHAIR VANGUARD DAVID BURKE

INTRODUCTION: DURING THE LAST GLOBAL CRISIS, COVID, THE MEDICAL SPECIALTY THAT WAS AT THE VANGUARD OF PROVIDING ADVICE AND SOLUTIONS TO THE GLOBAL POPULATION WAS INFECTIOUS DISEASE. SINCE THAT TIME, POST COVID SYNDROME, AND CONDITIONS RELATED TO UNATTENDED MEDICAL CARE DURING THAT TIME HAVE BECOME PART OF THE NEW GLOBAL CRISIS, 2030.

-THE CRISIS OF 2030, SPELLED OUT IN THE GLOBAL BURDEN OF DISEASE REPORT WHICH DEMONSTRATES THE IMPACT ON THE GLOBAL POPULATION OF NON-COMMUNICABLE DISEASES SUCH AS HEART DISEASE, DIABETES AND DEMENTIA NOW THE LEADING CAUSE OF DISABILITY WORLDWIDE -WE WILL REVIEW THE CAUSES OF MORTALITY AND MORBIDITY NOTING THE SHIFTING IMPACT OF THE NON-COMMUNICABLE DISEASES AND NOTING THE SHIFT IN EMPHASIS FROM LIFE EXPECTANCY TO HEALTHY LIFE EXPECTANCY.

THE WHO NOW PREDICTS THAT THE AVERAGE PERSON WILL HAVE 9 PLUS YEARS WITH A DISABILITY. -THIS TALK WILL FOCUS ON THE UNIQUE CAPACITY OF THE SPECIALTY OF PHYSICAL MEDICINE AND REHABILITATION THROUGH ANTICIPATION. PREVENTION, MITIGATION, MINIMIZE AND ADAPT TO THOSE FACTORS WHICH WILL RESULT IN DISABILITY; INCLUDING PHYSICAL, COGNITIVE AND EMOTIONAL. -THE SPEAKERS WILL EMPHASIZE THE NEED FOR OUR EDUCATIONAL INSTITUTIONS COME IN ARE PRACTICING PHYSICIANS TO FOCUS ON THOSE CORE ISSUES THAT PAUSE DISABILITY, AND TO COMBINE WHAT WOULD HAVE BEEN THE RESPONSIBILITIES OF SEVERAL SPECIALTIES IN MEDICINE INTO ONE COHESIVE PRACTICE AIMED AT REDUCING THE IMPACT OF THIS NEW GLOBAL HEALTH CRISIS. WE ARE A SPECIALTY WITH UNIQUE BREADTH IDEALLY POSITIONED TO ADDRESS THE TSUNAMI THAT IS UPON US.

WE MUST RESPOND- SEVERAL CLEAR CONCISE RESPONSES WILL BE OUTLINED.

15H30

OVERVIEW OF THE WORKSHOP'S OBJECTIVES AND RELEVANCE TO THE CURRENT HEALTH LANDSCAPE.

15H40

PRESENTATION ON THE SHIFT FROM INFECTIOUS TO NON-COMMUNICABLE DISEASES, EMPHASIZING WHO'S PREDICTIONS.

- 15H50
DETAILED DISCUSSION ON REHABILITATION STRATEGIES FOR DISABILITY PREVENTION AND MANAGEMENT.
- 16H05
OC ID 35 REHABILITATION AS A PUBLIC HEALTH CRISIS AND PUBLIC HEALTH OPPORTUNITY FOR THE 21ST CENTURY. GEORGE SMOLINSKI
- 16H10
OC ID 990 THE STATE OF REHABILITATION MEDICINE IN TAIWAN. NINA TAMAYO
- 16H15
OPEN DISCUSSION, SUMMARIZING KEY POINTS AND ACTIONABLE STRATEGIES.

15:30 - 16:30

OLIVERAIE

SESSION

JOINT SESSION OF THE AIM OF THE ISPRM AND THE ESPRM

ID 134

SPEAKERS DR ELEFThERIA ANTONIADOU (LUXEMBOURG)
ROBERTO CASALE (ITALY)
GERARD FRANCISCO (USA)

CHAIR ELEFThERIA ANTONIADOU

THE ROLE OF PRM PHYSICIANS OUTSIDE HOSPITAL SETTINGS IS EXPANDING, YET PRACTICES VARY WIDELY ACROSS REGIONS. OUTPATIENT AND COMMUNITY-BASED REHABILITATION OFFER OPPORTUNITIES FOR CONTINUITY OF CARE, HOLISTIC PATIENT MANAGEMENT, AND INNOVATION.

STILL, THEY FACE MAJOR CHALLENGES, INCLUDING LIMITED RESOURCES, PROFESSIONAL ISOLATION, FINANCIAL SUSTAINABILITY, AND LACK OF AWARENESS OF PRM'S VALUE. THIS JOINT AIM-ISPRM AND ESPRM SESSION WILL MAP CURRENT PRACTICES, SHARE INTERNATIONAL EXPERIENCES, AND DISCUSS HOW SOCIETIES CAN SUPPORT PRM PHYSICIANS THROUGH NETWORKING, TECHNOLOGY, AND STRATEGIC COLLABORATION.

15H30
PHYSICAL AND REHABILITATION MEDICINE (PRM) PHYSICIAN OUTSIDE THE HOSPITAL SETTING . DIFFICULTIES, OPPORTUNITIES, AND CHALLENGES WHEN YOU WORK ON YOUR OWN. ELEFThERIA ANTONIADOU

15H50
THINKING DIFFERENTLY: A BOTTOM-UP APPROACH TO RESEARCH IN PRM. THE ROLE OF IMS WITHIN ESPRM. ROBERTO CASALE

16H10
HOW INTERNATIONAL SOCIETIES AND BODIES COULD HELP IMPLEMENT STRATEGIES FOR SUCCESS. GERARD FRANCISCO

15:30 - 16:30

ORANGERAIE

SESSION

PHENOTYPING SPINE DISORDERS: FROM ANATOMOCLINICAL PERSPECTIVES TO RADIOLOGICAL INSIGHTS

ID 25

TOPIC DIAGNOSTIC & PRACTICE

SPEAKERS JULIA FACIONE-ROGER (FRANCE)
CHRISTELLE NGUYEN (FRANCE)
FRANÇOIS RANNOU (FRANCE)

CHAIR FRANÇOIS RANNOU, CHRISTELLE NGUYEN

THIS SESSION PROVIDES AN OPPORTUNITY TO EXPLORE INNOVATIVE DIAGNOSTIC PARADIGMS FOR SPINE DISORDERS, BRIDGING CLINICAL, RADIOLOGICAL, AND BIOMECHANICAL PERSPECTIVES. ATTENDEES WILL GAIN ACTIONABLE INSIGHTS INTO THE PHENOTYPING PROCESS, FOSTERING IMPROVED DIAGNOSTIC ACCURACY AND OPTIMIZED THERAPEUTIC STRATEGIES IN PHYSICAL MEDICINE AND REHABILITATION.

15H30
TIME TO REFINE WHAT IS NON-SPECIFIC LOW BACK PAIN? FRANÇOIS RANNOU

15H45
SPECIFIC BACK PAIN: DIAGNOSIS AND THERAPEUTIC APPROACHES. CHRISTELLE NGUYEN

16H00
RADIOLOGICAL APPROACHES TO SPINE PHENOTYPING: FULL-SPINE X-RAY AS AN IMAGING BIOMARKER. JULIA FACIONE-ROGER

16H15
OC ID 93 ADHERENCE TO EXERCISE THERAPY AND PHYSICAL ACTIVITY AMONG INDIVIDUALS WITH CHRONIC LOW BACK PAIN AND ITS CONTRIBUTORS. CHRISTELLE NGUYEN

16H20
OC ID 550 FOCUSED SPINE: COMPARATIVE ANALYSIS OF RADIOGRAPHY AND SPINAL MOUSE BASED ON A STUDY OF 20 CASES. RANYA ELALAOU MDAGHRI

16H25
OC ID 960 ORTHOPTIC ASSESSMENT IN IDIOPATHIC SCOLIOSIS : A STUDY OF 15 CASES. KASSIMI EL HASSAN

15:30 - 16:30

ROSEIRAIE

SESSION

THE SEMIOLOGY OF DISABILITIES IN REHABILITATION

ID 30

TOPIC SPECIFIC CONDITION & DISABILITIES

SPEAKERS JEAN MICHEL WIROTIUS (FRANCE)

CHAIR JEAN MICHEL WIROTIUS

MEDICINE DEDICATED TO DISABILITY HAS KNOWN TWO PERIODS, THAT OF BEFORE 1980 (FIRST CLASSIFICATION OF DISABILITIES) AND THAT OF AFTER 1980 WITH THE CONSTANT DEVELOPMENT OF ITS ACADEMIC DEVELOPMENT IN THE WORLD AND BY THE EVER-INCREASING NUMBER OF SCIENTIFIC PUBLICATIONS. THIS JOURNEY IS BOTH SPECTACULAR BY ITS GUSHING AND MILITANT ASPECT IN ALL THE COUNTRIES OF THE WORLD AND STRIKING, BY OFFERING A MAJOR TURNING POINT IN THE REPRESENTATIONS, IN ANOTHER READING THAT HAS BECOME ESSENTIAL, OF THE SICK MAN.

TO UNDERSTAND THIS NEW READING OF CLINICAL SITUATIONS, IT WAS NECESSARY TO TAKE A LONG CULTURAL JOURNEY, BECAUSE REHABILITATION IS NOT ONLY ONE MORE FIELD FOR HEALTH, A SORT OF ZOOM OF CULTURAL ZONES ALREADY KNOWN TO DOCTORS, IT ACTUALLY OPENS UP ANOTHER WAY OF ANALYZING PATHOLOGICAL SITUATIONS. IT IS NOT A FOCUS ON A LANGUAGE ALREADY KNOWN, IT IS ANOTHER LANGUAGE. BUT HOW TO DEFINE THIS OTHER LANGUAGE, WHICH IS NOT SOLUBLE IN COMMON MEDICAL SEMIOLOGY.

IF WE ARE SURROUNDED BY BOOKS AND TEACHINGS THAT DETAIL COMMON MEDICAL SEMIOLOGY, IT IS NOT THE SAME FOR REHABILITATION, WHICH WHILE BEING AWARE THAT ITS CLINICAL READING IS DIFFERENT STRUGGLED TO UNDERSTAND ITS MECHANISMS AND SPRINGS AND TO OFFER AN EXPLICIT DESCRIPTION, TO ENSURE ITS DISSEMINATION, ITS UNDERSTANDING, ITS IMPROVEMENT. THIS SEARCH FOR A FORMALIZED DESCRIPTION OF SEMIOLOGY IN REHABILITATION WAS THE SUBJECT OF A LONG JOURNEY SUPPORTED BY TWO UNIVERSITY PERIODS, FIRST IN THE LINGUISTICS DEPARTMENT OF THE UNIVERSITY PARS V, THEN WITHIN THE LINGUISTICS DEPARTMENT OF THE UNIVERSITY OF LIMOGES AND THE CENTER FOR SEMIOTIC RESEARCH (CERES).

THE CONSEQUENCES OF THIS COMPLEX WORK WILL MAINLY AIM TO SIMPLIFY, TO SCHEMATIZE THIS RESEARCH TO MAKE IT ACCESSIBLE TO ALL, TRANSMISSIBLE AND TEACHABLE TO STUDENTS, WITHOUT NEEDING THEORETICAL KNOWLEDGE OF LINGUISTICS AND SEMIOTICS.

15H30

OPENING REMARKS.

15H35

WHY COMMON MEDICAL SEMIOLOGY IS INEFFECTIVE IN REHABILITATION.

15H55

THE SEMIOLOGY OF DISABILITIES IN PMR: FROM BODY SHAPES TO FUNCTIONS.

16H15

OC ID 821 FEASIBILITY AND RELIABILITY OF THE INTERNATIONAL CLASSIFICATION OF FUNCTIONING, DISABILITY, AND HEALTH (ICF) REHABILITATION SET FOR INPATIENT SETTINGS. JULIA PATRICK ENGKASAN

16H20

OC ID 851 KERALA BRAIN INJURY QUESTIONNAIRE: DEVELOPING A CULTURE SENSITIVE TBI PREVALENCE TOOL FOR DEVELOPING NATIONS. ANNE FELICIA AMBROSE

16H25

OC ID 313 ENHANCING TRAUMATIC BRAIN INJURY PATIENT PATHWAY ANALYSIS WITH AI: AN EVALUATION OF LLM-BASED DATA EXTRACTION. EMMELINE MONTANÉ

15:30 - 16:30

PALMERAIE

SESSION

ROLE OF REGENERATIVE MEDICINE (PLATELET RICH PLASMA) IN PERSONS UNDERGOING NEUROLOGICAL REHABILITATION

ID 81

TOPIC INNOVATION

SPEAKERS NAVITA PUROHIT (INDIA)

ABHISHEK SRIVASTAVA (INDIA)

CHAIR NAVITA PUROHIT

THE PROMISING FIELD OF REGENERATIVE MEDICINE IS WORKING TO RESTORE STRUCTURE AND FUNCTION OF DAMAGED TISSUES AND ORGANS. CELLULAR THERAPIES ARE ONE COMPONENT OF REGENERATIVE MEDICINE. ADULT STEM CELLS ARE HARVESTED AND THEN INJECTED AT THE SITE OF DISEASED OR DAMAGED TISSUE, RECONSTRUCTION OF THE TISSUE IS FEASIBLE.

PLATELET RICH PLASMA (PRP) IS ONE OF THE CELLULAR THERAPIES USED IN CLINICAL PRACTICE. PLATELET-RICH PLASMA THERAPY WORKS BY ISOLATING AND CONCENTRATING THE PLATELETS WITHIN OUR OWN BLOOD AND SELECTIVELY INJECTING THEM INTO INJURED AREAS, TRIGGERING YOUR BODY'S NATURAL HEALING PROCESS AND THEREBY REDUCING INFLAMMATION AND PAIN.

SECONDARY MUSCULOSKELETAL PROBLEMS LIKE POST STROKE SHOULDER PAIN, DEGENERATIVE HIP AND KNEE OSTEOARTHRITIS AND NERVE ENTRAPMENTS ARE VERY COMMON IN PERSONS WITH NEUROLOGICAL DISORDERS AND CAUSE SIGNIFICANT PAIN AND DISABILITY AND AFFECT THEIR PARTICIPATION IN THE REHAB PROGRAM.

PRP THERAPY HAS BEEN APPLIED TO AN ARRAY OF MUSCULOSKELETAL INJURIES AND DEGENERATIVE JOINT CONDITIONS, AND HAS EXHIBITED POSITIVE RESULTS. SAME PRINCIPLES HAVE BEEN APPLIED TO TREAT PAIN USING PRP IN PERSONS UNDERGOING NEUROREHABILITATION. THIS HAS SIGNIFICANT POTENTIAL IN THE FIELD OF REHABILITATION MEDICINE.

- 15H30
BASICS OF REGENERATIVE MEDICINE AND PLATELET RICH PLASMA. NAVITA PUROHIT VYAS
- 15H45
ULTRASOUND GUIDED PRP INJECTIONS FOR POST STROKE SHOULDER PAIN AND NERVE ENTRAPMENTS IN UPPER LIMBS. ABHISHEK SRIVASTAVA
- 16H00
ULTRASOUND GUIDED PRP INJECTIONS FOR DEGENERATIVE HIP / KNEE JOINTS AND NERVE ENTRAPMENTS IN LOWER LIMBS. NAVITA PUROHIT VYAS
- 16H15
OC ID 260 APPLICATION MECHANISM AND WOUND REHABILITATION EFFECT OF PLATELET RICH PLASMA FOR PRESSURE INJURY AFTER SPINAL CORD INJURY. XI YU
- 16H20
SUMMARY

15:30 - 19:00

ARGANIER
LONG WORKSHOP



BUILDING SUSTAINABLE PHYSICAL REHABILITATION MEDICINE EDUCATION IN SUB-SAHARAN AFRICA: INNOVATIVE TRAINING MODELS AND STRATEGIC COLLABORATIONS

ID 133

TOPIC COMMUNITY

SPEAKERS ANDREW HAIG (USA)
FRANCESCA GIMIGLIANO (ITALY)
RAJIV REEBYE (CANADA)
MARIE ELISABETH NELSON (USA)
VIRGINIAL WILSON (SOUTH AFRICA)
ABAYOMI SALAWU (UK)
MARIA GABRIELLA CERAVOLO (ITALY)
CYNTHIA UDENSI (UK)
AISHA ANIMASHAWUN (UK)
IHUOMA OKEREKE (UK)
SINFORIAN KAMBOU (CAMEROUN)
AMY CHAMBLISS (USA)

CHAIR ANDREW HAIG, FRANCESCA GIMIGLIANO

ATTENDEES 30

THE NEED FOR REHABILITATION SERVICES IS GROWING WORLDWIDE. A KEY PRIORITY OF THE WORLD HEALTH ASSEMBLY'S RESOLUTION ON STRENGTHENING REHABILITATION IN HEALTH SYSTEMS IS THE DEVELOPMENT OF A STRONG, MULTIDISCIPLINARY REHABILITATION WORKFORCE. MANY LOW- AND MIDDLE- INCOME COUNTRIES (LMICS), ESPECIALLY IN SUB-SAHARAN AFRICA, FACE A CRITICAL SHORTAGE OF TRAINED PHYSICAL REHABILITATION MEDICINE (PRM) PHYSICIANS, LIMITING THEIR CAPACITY TO DEVELOP A MULTIDISCIPLINARY REHABILITATION WORKFORCE AND DELIVER EFFECTIVE REHABILITATION CARE.

THIS INTERACTIVE WORKSHOP BRINGS TOGETHER PHYSICIANS FROM AFRICA AND INTERNATIONAL STAKEHOLDERS TO ADDRESS THE URGENT NEED FOR STRUCTURED PRM TRAINING PATHWAYS. IT WILL SHOWCASE THE REAL-WORLD MODELS AND CHALLENGES OF PRM EDUCATION IN AFRICA AND OTHER LMIC.

PARTICIPANTS WILL EXPLORE INNOVATIVE SOLUTIONS, TOOLS, AND BEST PRACTICES TO CREATE SUSTAINABLE TRAINING INITIATIVES, FOSTER COLLABORATIVE PARTNERSHIPS, AND JOIN COLLECTIVE ADVOCACY EFFORTS TO STRENGTHEN PRM CAPACITY IN SUB-SAHARAN AFRICA AND OTHER LMICS.

15H30
INTRODUCTION: ORIENTATION TO THE CURRENT LANDSCAPE AND CALL TO ACTION FOR PRM TRAINING IN LMICS.

15H40
CURRENT LANDSCAPE OF PRM TRAINING IN SUB-SAHARAN AFRICA. RAJIV REEBYE, VIRGINIAL WILSON, ABAYOMI SALAWU, AISHA ANIMASHAWUN, IHUOMA OKEREKE, SINFORIAN KAMBOU, AMY CHAMBLISS, ABDERRAZAK HAJJIOUI

16H30
DISCUSSION & INTERACTIVE ACTIVITY

16H40
IRF AFRICA FELLOWSHIP. YUNNA SINSKEY, MARIE ELISABETH NELSON, VIRGINIAL WILSON

17H30
THE GLOBAL PARTNERSHIP FOR PRM EDUCATION IN SUB-SAHARAN AFRICA INITIATIVE. SINFORIAN KAMBOU

18H00
BUILDING CAPACITY FOR REHABILITATION SERVICES IN NIGERIA. PAUL BOLAJI, AISHA ANIMASHAWUN

18H15
LEVERAGING PARTNERSHIPS FOR STRENGTHENING PRM EDUCATION IN SUB-SAHARAN AFRICA AND LMICS. ANDREW HAIG, FRANCESCA GIMIGLIANO, ISABELLE LAFFONT, MARIA GABRIELLA CERAVOLO, OKEREKE/DR. OJO/DR. SALAWU (ONE REPRESENTATIVE FROM NIGERIA), SINFORIAN KAMBOU

18H55
SUMMARY, SHARE CONTACTS, PLANS FOR NEXT STEPS.

17:00 - 19:00

PALMERAIE

SESSION

THE IMPORTANCE OF EXERCISE TRAINING IN CARDIAC REHABILITATION OF SPECIAL GROUPS OF PATIENTS

ID 112

TOPIC SPECIFIC CONDITION & DISABILITIES

SPEAKERS MILICA LAZOVIC (SERBIA)
CATARINA AGUIAR BRANCO (PORTUGAL)
MARTA SUPERVIA (SPAIN)

CHAIR MILICA LAZOVIC, CATARINA AGUIAR BRANCO

CARDIAC REHABILITATION (CR) IS AN IMPORTANT COMPONENT IN THE CONTINUUM OF CARE FOR PATIENTS WITH CARDIOVASCULAR DISEASES (CVD), PROVIDING A MULTIDISCIPLINARY EDUCATION AND EXERCISE TRAINING (ET) TO IMPROVE FUNCTIONAL CAPACITY (FC), RECOVERY AND PSYCHOLOGICAL WELL-BEING AND REDUCE MORBIDITY AND MORTALITY.

TODAY, THE BENEFICIAL EFFECTS OF ET AND EXERCISE-BASED CR ARE WELL RECOGNIZED, BUT IT REMAINS LARGELY UNCLEAR WHICH CHARACTERISTICS OF ET (FREQUENCY, INTENSITY, DURATION, MODE, AND VOLUME (DOSE: INTENSITY X DURATION) ARE MOST EFFECTIVE. THE SESSION DEALS WITH THE CHARACTERISTICS OF ET IN CR OF SPECIAL GROUPS OF PATIENTS (PATIENTS WITH CVD AND FRAILTY, TYPE 2 DIABETES MELLITUS (T2DM) AND SPINAL CORD INJURY (SCI). WE NEED TO BETTER UNDERSTAND WHETHER EXERCISE- BASED CR MAY CHANGE THE COURSE AND THE PROGNOSIS OF SPECIAL GROUPS PATIENTS WITH CVD. THE ROLE OF EXERCISE TRAINING IN THE PREVENTION AND CONTROL OF FRAILTY WILL BE DISCUSSED, FOCUSING ALSO ON THE LIMITING FACTORS THAT MUST BE TAKEN INTO ACCOUNT WHEN PRESCRIBING PHYSICAL ACTIVITY. WE NEED TO BETTER UNDERSTAND WHETHER ET CAN CHANGE THE COURSE AND PROGNOSIS OF FRAILTY IN CARDIOVASCULAR PATIENTS. THIS SESSION ALSO AIMS TO PROVIDE RECOMMENDATIONS FOR PRESCRIBING ET IN PATIENTS WITH T2DM AND CVD.

EXERCISE TRAINING HAS THE POTENTIAL TO IMPROVE INSULIN SENSITIVITY, LIPID PROFILE, VASCULAR REACTIVITY AND FC. EXERCISE TRAINING PROGRAMS SHOULD BE ADJUSTED TO INDIVIDUAL EXERCISE TRAINING TARGETS AND POTENTIAL TRAINING BARRIERS, ESTABLISHED AFTER A CAREFUL INITIAL EVALUATION. SPINAL CORD INJURY LEADS TO CONSEQUENCES THAT DISABLE MOVEMENT, REDUCE PHYSICAL ACTIVITY AND INCREASE MORTALITY FROM CVD. SCI IS A DEBILITATING CONDITION WHICH, IN ADDITION TO INDUCING SENSORIMOTOR DYSFUNCTION, IMPAIRS AND AUTONOMIC FUNCTION. CVD EMERGED AS THE PRIMARY CAUSE OF MORBIDITY AND MORTALITY IN SCI PATIENTS INDUCING DYSREGULATION OF THE CARDIOVASCULAR SYSTEM THAT ACCELERATES THE EARLY DEVELOPMENT OF CVD.

OUR LECTURERS ARE EXPERTS FROM EUROPE, ESPECIALLY THE EURO-MEDITERRANEAN REGION, WHO WERE EDUCATED IN THE US AND COOPERATE WITH INSTITUTIONS FROM THE US, CANADA AND THE WHOLE WORLD FOR CARDIOVASCULAR REHABILITATION AND ARE FAMILIAR WITH THE APPLICATION OF THESE PRINCIPLES OF REHABILITATION IN SPECIAL GROUPS OF PATIENTS.

17H00
INTRODUCTION

17H05
CHARACTERISTICS OF STRUCTURED EXERCISE TRAINING FOR PATIENTS WITH TYPE 2 DIABETES AND CARDIOVASCULAR DISEASE. MILICA LAZOVIC

17H20
THE BIDIRECTIONAL RELATIONSHIP OF FRAILTY AND CARDIOVASCULAR DISEASE. MARTA SUPERVIA

17H20
THE MULTIMODAL APPROACH OF CARDIAC REHABILITATION IN SPINAL CORD INJURY PATIENTS. CATARINA AGUIAR BRANCO

17H55
OC ID 883 SUSTAINING PHYSICAL ACTIVITY BEYOND CARDIAC REHABILITATION: A CHALLENGE FOR GLOBAL REHABILITATION. JONATHAN WHITESON

18H00
BEST PAPERS PRESENTATION

18H40
OPEN DISCUSSION

17:00 - 19:00

OLIVERAIE

SHORT WORKSHOP

JOINT WORKSHOP OF THE AMERICAN BOARD OF PHYSICAL MEDICINE AND REHABILITATION (ABPM&R) AND THE EUROPEAN BOARD OF PHYSICAL AND REHABILITATION MEDICINE (EBPRM): COMPETENCY-BASED TRAINING AND ASSESSMENT IN PHYSICAL AND REHABILITATION MEDICINE-OPPORTUNITIES

ID 76

TOPIC EDUCATION & PRACTICE

SPEAKERS CAROLYN KINNEY (USA)
MARIA GABRIELLA CERAVOLO (ITALY)
NIKOLAOS BAROTIS (GREECE)
AYDAN ORAL (TÜRKIYE)

CHAIR CAROLYN KINNEY, MARIA GABRIELLA CERAVOLO

ATTENDEES 60

COMPETENCY-BASED TRAINING EMERGES AS A PREFERRED MODEL DUE TO ITS POTENTIAL EFFICIENCY IN MEDICAL EDUCATION. DOCUMENTS SUCH AS THE CANMEDS FRAMEWORK AND THE WORLD HEALTH ORGANIZATION REHABILITATION COMPETENCY FRAMEWORK PROVIDE EXCELLENT GUIDANCE ON THE PREPARATIONS OF CURRICULA IN UNDERGRADUATE AND POSTGRADUATE TRAINING PRIORITIZING NOT ONLY KNOWLEDGE, BUT ALSO SKILLS AND ATTITUDES PHYSICIANS NEED TO HAVE TO MEET THE HEALTH CARE NEEDS OF THE INDIVIDUALS IN THE BEST POSSIBLE WAY. COMPETENCY-BASED TRAINING IN REHABILITATION GAINS MORE IMPORTANCE DAY BY DAY GIVEN THE DATA THAT ONE IN EVERY THREE INDIVIDUALS NEED REHABILITATION THROUGHOUT THE WORLD. THE RECENT "REHABILITATION 2030" INITIATIVE OF 2017 AND THE WHA RESOLUTION ON "STRENGTHENING REHABILITATION IN HEALTH SYSTEMS" ENDORSED IN MAY, 2023 WHICH IS SUPPORTED BY THE WORLD REHABILITATION ALLIANCE WITH ITS WORKSTREAMS, ARE DEVELOPMENTS THAT INCREASE THE IMPORTANCE OF EDUCATION IN REHABILITATION WHICH IS THE FIRST STEP FOR SUCCESSFUL OUTCOMES. THIS WORKSHOP, JOINING THE SCIENTIFIC FORCES OF THE TWO PROMINENT ORGANIZATIONS IN TRAINING, THE AMERICAN BOARD OF PHYSICAL MEDICINE AND REHABILITATION (ABPM&R) AND THE EUROPEAN BOARD OF PHYSICAL AND REHABILITATION MEDICINE (EBPRM), WILL DISCUSS THE VALUE OF COMPETENCY-BASED TRAINING AND ASSESSMENT IN PRM/PM&R TRAINING ALONG WITH THE CURRENT BEST EXAMPLES.

17H00

INTRODUCTION. CAROLYN KINNEY, AYDAN ORAL

17H05

HOW DO THE EUROPEAN TRAINING REQUIREMENTS (ETRS) FOR THE MEDICAL SPECIALTY OF PRM APPROACH TO COMPETENCY-BASED ?

- OUTLINE OF ETRS FOR PRM
- REFLECTIONS IN THE ETRS FROM THE WHO REHABILITATION COMPETENCY FRAMEWORK
- THE APPROACH IN THE USA.

CAROLYN KINNEY, MARIA GABRIELLA CERAVOLO, NIKOLAOS BAROTSIS

18H05

ARE BOARD EXAMINATIONS CAPABLE OF ASSESSING COMPETENCIES? SUGGESTIONS FOR COMPETENCY-BASED ASSESSMENT

- ABPM&R PERSPECTIVE
- EBPRM PERSPECTIVE.

CAROLYN KINNEY, AYDAN ORAL (RECORDED)

18H30

DISCUSSION

17:00 - 19:00

ORANGERAIE

SHORT WORKSHOP



EVALUATION AND TREATMENT OF LOW BACK PAIN AND CORRELATION WITH INJECTION PROCEDURES

ID 109

TOPIC PAIN

SPEAKERS AMIT BHARGAVA (USA)

MARK HURDLE (USA)

AHMED AMINE EL OUMRI (MOROCCO)

CHAIR AMIT BHARGAVA

ATTENDEES 60

LOW BACK PAIN IS A COMMON PROBLEM OBSERVED IN THE CLINICAL SETTING. THE COURSE WILL COVER ANATOMY, BIOMECHANICS, DIFFERENTIATION OF LOWER BACK AND HIP PAIN ; LOWER BACK PAIN AND LUMBAR RADICULOPATHY; VARIOUS INJECTIONS FOR LUMBAR SPINE PROBLEMS. THERE WILL LECTURES FOLLOWED BY DISCUSSION.

THE PRESENTATIONS WILL BE ON ANATOMY, BIOMECHANICS, CLINICAL FEATURES AND MINIMALLY INVASIVE PROCEDURES FOR LOWER BACK PAIN AND RADICULAR SYMPTOMS. DIFFERENTIATION OF LOWER BACK PAIN FROM GLUTEAL PAIN WILL BE DISCUSSED. EACH SPEAKER WILL FOCUS ON PARTICULAR SECTION OF THE TALK. IT WILL CONCLUDE WITH QUESTION, ANSWERS AND PANEL DISCUSSION.

17H00

INTRODUCTION

17H05

ANATOMY AND BIOMECHANICS OF LUMBAR SPINE AND MANAGEMENT OF GLUTEAL PAIN. AHMED AMINE EL OUMRI

17H25

EVALUATION AND TREATMENT OF AXIAL LOW BACK PAIN/LUMBAR CANAL STENOSIS. AMIT BHARGAVA

17H45

EVALUATION AND TREATMENT OF LUMBOSACRAL RADICULOPATHY. MARK HURDLE

18H00

3 ROTATIONS- NECK, SHOULDER AND RADICULOPATHY.

18H50

QUESTIONS, DISCUSSION, CONCLUSION.

17:00 - 19:00

ROSERAIE

SESSION

REGARDS FRANCOPHONES SUR LA MÉDECINE PHYSIQUE ET DE RÉADAPTATION : PERSPECTIVES ET INNOVATIONS

SPEAKERS ALAIN YELNIK (FRANCE)
JEAN PAYSANT (FRANCE)
FRANÇOIS RANNOU (FRANCE)
FRANÇOIS GENET (FRANCE)
HASSAN BENKHLAFA (MAROC)

CHAIR PHILIPPE MARQUE , DANIEL ALLOH, MOUNA ASLY

CETTE SESSION FRANCOPHONE MET EN LUMIÈRE LA DIVERSITÉ ET LA RICHESSE DE LA RECHERCHE ET DE LA PRATIQUE EN MÉDECINE PHYSIQUE ET RÉADAPTATION, À TRAVERS DES THÉMATIQUES ALLANT DE L'HISTOIRE ET L'ÉPIDÉMIOLOGIE À L'INNOVATION TECHNOLOGIQUE ET THÉRAPEUTIQUE. ELLE RÉUNIT DES EXPERTS FRANCOPHONES DE RENOMMÉE INTERNATIONALE ET OUVRE SES PORTES AUX JEUNES CHERCHEURS AFRICAINS, AFIN DE FAVORISER LA VISIBILITÉ, L'ÉCHANGE ET LE PARTAGE D'EXPÉRIENCES.

17H00

INTRODUCTION

17H05

ÉPIDÉMIOLOGIE DE LA POLIOMYÉLITE, DES NOUVELLES MYÉLITES AIGUËS FLASQUES "POLIOLIKE" ET DU SYNDROME POST-POLIO. ALAIN YELNIK

17H25

PROTHÈSES D'AMPUTÉ DE MEMBRES ET INTELLIGENCE ARTIFICIELLE ET NATURELLE : MACHINE LEARNING, DEEP LEARNING ET PATIENT LEARNING. JEAN PAYSANT

17H45

NEURO-ORTHOPÉDIE : FONDAMENTAUX ET NOUVEAUTÉS. FRANÇOIS GENET

18H05

L'ARTHROSE EN 2025 : DES RECOMMANDATIONS AUX NOUVELLES PERSPECTIVES THÉRAPEUTIQUES. FRANÇOIS RANNOU

18H25

LE CINÉMA COMME LEVIER DE SENSIBILISATION ET D'INCLUSION DES PERSONNES EN SITUATION DE HANDICAP. HASSAN BENKHLAFA

18H45

CO 1000 RÉSULTATS DE LA PRISE EN CHARGE DE LA GONARTHROSE AU EN MÉDECINE PHYSIQUE ET RÉADAPTATION À L'HÔPITAL GÉNÉRAL DE RÉFÉRENCE DE NIAMEY, NIGER. ALFARI ABDOUL AZIZ

18H50

CO 1002 INDICATIONS ET APPORT DE LA BALNEOTHÉRAPIE SUR LA FONCTION ARTICULAIRE AU COURS DE LA PRISE EN CHARGE DE L'ARTHROSE AU BURKINA FASO : UNE ÉTUDE LONGITUDINALE. YIROZOUNLOMIAN TIAHO

18H55

CO 1001 REÉDUCATION PRECOCE ET REPRISE D'ACTIVITE SPORTIVE APRES LIGAMENTOPLASTIE DU LIGAMENT CROISE ANTERIEUR CHEZ 100 PATIENTS SUIVIS A L'INJS (INSTITUT NATIONAL DE LA JEUNESSE ET DU SPORT) EN COTE D'IVOIRE. KAMISSOKO YAYA

19H00

CO 1003 LA RÉADAPTATION SOCIO-PROFESSIONNELLE D'UN AMPUTÉ DE MEMBRE INFÉRIEUR APPAREILLÉ, RÉALITÉ DE KINSHASA. FISTON MAMPUYA FILS

21:00 - 23:00

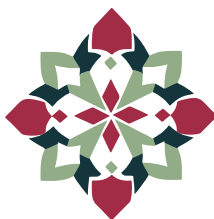
PLENARY

CEREMONY

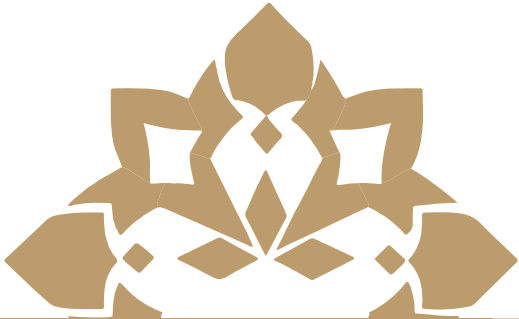
NETWORKING DINNER



UNDER THE HIGH PATRONAGE
OF HIS MAJESTY KING MOHAMMED VI



ISPRM 19TH WORLD CONGRESS
MARRAKESH
3-7 NOVEMBER 2025



PROGRAM DAY 5
THURSDAY 06/11/2025



08:30 - 10:30

PLENARY

SESSION

CEREBRAL PALSY GROWS UP: PHYSICAL ACTIVITY, SPORT PARTICIPATION AND CULTURAL LIFE FOR INDIVIDUALS ACROSS THE LIFESPAN

ID 118

TOPIC NEUROREHABILITATION

SPEAKERS MARK PETERSON (USA)
UMA PANDIYAN (QATAR)
NORA NEWCOMB (USA)
CATHERINE STRATTON (CANADA)

CHAIR MARK PETERSON, CATHERINE STRATTON

CEREBRAL PALSY (CP) AFFECTS >18 MILLION PEOPLE GLOBALLY AND IS A LIFELONG CONDITION. THERE IS INADEQUATE CLINICAL FOLLOW-UP FOR INDIVIDUALS WITH CP AFTER THEY TRANSITION FROM PEDIATRIC TO ADULT PRIMARY CARE, AND INSUFFICIENT SURVEILLANCE TO TRACK PATIENTS WITH CP LONGITUDINALLY. DESPITE THE SHORTAGE OF RESEARCH TO EXAMINE THE NATURAL HISTORY OF CP AND CHRONIC DISEASE TRAJECTORIES IN THIS POPULATION, A RANGE OF SECONDARY CONDITIONS ARISE AT AN ACCELERATED RATE AS COMPARED TO THE ADULT POPULATION WITHOUT CP, PROMPTING THE WIDESPREAD NOTION AND CLINICAL HYPOTHESIS THAT PATIENTS WITH CP ARE PRONE TO ACCELERATED AGING. THESE FACTORS FURTHER WORSEN FUNCTIONAL STATUS AND QUALITY OF LIFE, AS WELL AS LEAD TO DECREASED INDEPENDENCE.

A HANDFUL OF PROGRESSIVE CP SCIENTISTS LED BY MARK PETERSON HAVE RECENTLY ADVOCATED FOR THE ADOPTION OF A HOLISTIC, LIFE COURSE APPROACH TO CP CONCEPTUALIZATION, DETECTION AND INTERVENTION. PHYSICAL ACTIVITY, EXERCISE, AND SPORTS EACH PLAY IMPORTANT ROLES IN PRIMARY, SECONDARY AND TERTIARY PREVENTION OF VARIOUS LIFESTYLE-RELATED NON-COMMUNICABLE DISEASES THAT INDIVIDUALS WITH CP MAY ENCOUNTER AT ANY AGE. IN AUGUST 2024, SPORTS IN PARTICULAR (I.E., SYSTEMS OF ACTIVITIES BASED IN PHYSICAL AND/OR MENTAL EXERTION AND SKILL THAT ARE OFTEN COMPETITIVE) WERE DECLARED A CULTURAL RIGHT BY THE UNITED NATIONS' SPECIAL RAPPORTEUR. ADDRESSING THE RIGHT TO PARTICIPATE IN PHYSICAL ACTIVITY AND SPORTS IS ESSENTIAL TO FULL PARTICIPATION IN CULTURAL LIFE AND A CONCRETE STEP TOWARDS A MORE JUST AND INCLUSIVE SOCIETY.

AS PHYSICAL AND REHABILITATION MEDICINE SPECIALISTS AND AS A SPORTS-INTERESTED PROFESSIONAL SOCIETY, WE ALSO HAVE A RESPONSIBILITY. WE ARE RESPONSIBLE FOR MAKING PHYSICAL ACTIVITY INCLUSIVE, AND SPORTS PARTICIPATION POSSIBLE FOR ALL OF OUR PATIENTS WITH CP AND OTHER DISABLING CONDITIONS AS LONG AS THEY ARE IN OUR CARE. THE PURPOSE OF THIS SYMPOSIUM IS TO DISCUSS CROSS CUTTING RESEARCH PERTAINING TO, AND CLINICAL CARE SPECIFIC FOR THE NEEDS OF ADULTS LIVING WITH CP. WE WILL DISCUSS ONGOING TRANSLATIONAL WORK TAKING PLACE FROM POPULATION COHORTS OF ADULTS WITH CP. WE WILL ALSO DISCUSS CUTTING EDGE POPULATION SURVEY RESULTS PERTAINING TO PHYSICAL ACTIVITY AND SPORTS PARTICIPATION AMONG INDIVIDUALS WITH CP. CLINICAL CARE COORDINATION FOR COMPLEX PATIENTS WITH CP WILL BE DISCUSSED.

8H30

OVERVIEW OF OBJECTIVES AND TOPICS.

8H35

RESEARCH OVERVIEW OF THE STATE OF THE LITERATURE PERTAINING TO THE HEALTHCARE NEEDS OF AND DISPARITIES FACING ADULTS LIVING WITH CP: PERSPECTIVES FROM CLINICAL AND POPULATION COHORT STUDIES FROM THE UNITED STATES. MARK PETERSON

9H05

CLINICAL PERSPECTIVES, CASE STUDIES AND PRACTICAL APPLICATIONS PERTAINING TO THE COMPLEX CLINICAL PRESENTATION OFTEN SEEN AMONG ADULTS WITH CP IN QATAR. UMA PANDIYAN

9H35

SPRM GLOBAL SURVEY TASK FORCE ON PHYSICAL ACTIVITY FOR PERSONS WITH DISABILITIES. NORA NEWCOMB, CATHERINE STRATTON

10H05

OC ID 939 BIKE3 STUDY: EFFECTS OF ADAPTED DYNAMIC CYCLING ON CHILDREN AND ADOLESCENTS WITH CEREBRAL PALSY, DOWN SYNDROME AND PRADER-WILLI SYNDROME. GIULIA STELLA

10H10

OC ID 60 USEFULNESS OF A CUSTOM-CONTOURED CUSHION DESIGNED WITH PRESSURE MAPS TO REDUCE PRESSURE POINTS AND INCREASE CONTACT AREA IN WHEELCHAIR USERS – A PILOT STUDY. CARLOS OMAR LÓPEZ-LÓPEZ

10H10

OC ID 984 ARTIFICIAL INTELLIGENCE IN HIP SURVEILLANCE FOR CHILDREN WITH CEREBRAL PALSY: CAN CHATGPT AND GEMINI HELP GUIDING PARENTS ACCURATELY? GONÇALO MARTINS PEREIRA

10H20

OPEN DISCUSSION AND SUMMARY.

08:30 - 10:30

OLIVERAIE

SESSION

NOVEL NONINVASIVE NEUROMODULATION FOR NEUROREHABILITATION

ID 35

TOPIC NEUROREHABILITATION

SPEAKERS TOSHIYUKI FUJIWARA (JAPAN)
NAM-JONG PAIK (SOUTH KOREA)

CHAIR TOSHIYUKI FUJIWARA, NAM-JONG PAIK

NEUROMODULATION SUCH AS NONINVASIVE BRAIN STIMULATION, SPINAL STIMULATION, AND BRAIN-MACHINE INTERFACE, IS WIDELY APPLIED IN THE FIELD OF NEUROREHABILITATION. IN THIS SYMPOSIUM, WE WILL DISCUSS THE EFFECTS OF NEUROMODULATION AND THE MECHANISM OF FUNCTIONAL RECOVERY INDUCED BY NEUROMODULATION.

8H30

OVERVIEW OF WORKSHOP OBJECTIVES AND TOPICS.

8H35

PRESENTATION OF KEY CONCEPTS OF NON-INVASIVE BRAIN STIMULATION.

9H00

PRESENTATION OF KEY CONCEPTS OF BRAIN MACHINE INTERFACE.

9H25

PRESENTATION OF KEY CONCEPTS OF TRANSCUTANEOUS SPINAL CORD SIMULATION.

9H50

OC ID 929 MODULATING NEUROPLASTICITY IN SENSORIMOTOR CORTEX AND SPINAL LESION SITES VIA MULTI-TARGET MAGNETIC STIMULATION PROMOTES MOTOR FUNCTION RECOVERY IN RATS AFTER SPINAL CORD INJURY. LINGYUN CAO

9H55

OC ID 277 TRANSCUTANEOUS SPINAL STIMULATION COMBINED WITH A LONG OPPONENT-PRONATION ORTHOSIS (FAST-HAND) FOR UPPER EXTREMITY MOTOR FUNCTION IN PATIENTS WITH CHRONIC STROKE: A RANDOMIZED, CONTROLLED TRIAL. MORITOMO MAEDA

10H00

OC ID 305 UPPER LIMB MOTOR FUNCTION ASSESSMENT OF STROKE BASED ON MULTIMODAL DATA OF SIMPLIFIED FMA-UE ACTION SET. JIANQING LI

10H05

OC ID 352 TELEREHABILITATION AND TELEMONITORING: FEASIBILITY STUDY AND IMPACT ON DAILY PHYSICAL ACTIVITY OF THE RAPIDO PROJECT FOR PEOPLE WITH PARKINSON'S DISEASE AT ANY STAGE. NICOLÒ BALDINI

10H10

OC ID 974 VIRTUAL REALITY IN PARKINSON'S DISEASE GAIT REHABILITATION: A NARRATIVE REVIEW. MARIA BONITO

10H15

OC ID 299 EFFECTS OF INTERMITTENT THETA BURST STIMULATION ON MOTOR FUNCTION, GAIT, AND PAIN IN PATIENTS WITH INCOMPLETE SPINAL CORD INJURY: A SYSTEMATIC REVIEW AND META-ANALYSIS. HUI-HUI PENG

10H20

OPEN DISCUSSION AND SUMMARY.

08:30 - 10:30

ORANGERAIE

SESSION

ANNUAL SCIENTIFIC SESSION 2025 – EMERGENCY REHABILITATION COMMITTEE

ID 47

TOPIC COMMUNITY

SPEAKERS FAROOQ AZAM RATHORE (PAKISTAN)

SATOSHI HAYAMIZU (JAPAN)

UMER YOUNAS (PAKISTAN)

ANAS HASSAN (UK)

TASLIM UDDIN (BANGLADESH)

COLLEEN O'CONNELL (CANADA)

ABDERRAZAK HAJJIOUI (MOROCCO)

WEERTS ERIC (BELGIUM)

MARCALEE ALEXANDER (USA)

SUMITHA GOUNDEN (AUSTRALIA)

CHAIR FAROOQ AZAM RATHORE

NATURAL DISASTERS SUCH AS EARTHQUAKES, TSUNAMIS, LARGE FIRES, AND FLOODS OFTEN RESULT IN A SIGNIFICANT NUMBER OF INDIVIDUALS SUSTAINING TRAUMATIC INJURIES, INCLUDING SPINAL CORD INJURIES, BRAIN INJURIES, AMPUTATIONS, FRACTURES, AND PERIPHERAL NERVE INJURIES. THE IMMEDIATE AFTERMATH OF SUCH EVENTS REQUIRES A COORDINATED APPROACH TO MANAGING THESE INJURIES AND FACILITATE EFFECTIVE REHABILITATION. THIS WORKSHOP AIMS TO EXPLORE COMPREHENSIVE MANAGEMENT AND REHABILITATION STRATEGIES FOR DISASTER SURVIVORS WITH TRAUMATIC INJURIES, EMPHASIZING DATA COLLECTION, PATIENT ASSESSMENT, AND EVIDENCE-BASED INTERVENTIONS. SUBJECT MATTER EXPERTS WILL PRESENT VARIOUS ASPECTS OF EMERGENCY REHABILITATION, INCLUDING DISASTER PREPAREDNESS, IMMEDIATE RESPONSE STRATEGIES, INTEGRATION OF REHABILITATION INTO EMERGENCY MEDICAL TEAMS, AND LONG-TERM RECOVERY PLANNING.

TOPICS MAY INCLUDE THE ROLE OF REHABILITATION IN DISASTER SETTINGS, CHALLENGES IN MANAGING COMPLEX INJURIES, STRATEGIES FOR EFFECTIVE DATA COLLECTION IN CHAOTIC ENVIRONMENTS, AND THE IMPORTANCE OF EARLY REHABILITATION INTERVENTIONS TO IMPROVE FUNCTIONAL OUTCOMES. SPEAKERS WILL BE ENCOURAGED TO PRESENT IN THE FOLLOWING FORMAT: BACKGROUND, EPIDEMIOLOGY, CLINICAL PRESENTATION, ASSESSMENT, AND EVIDENCE-BASED REHABILITATION INTERVENTIONS. SPEAKERS WILL REPRESENT DIFFERENT GLOBAL REGIONS, INCLUDING ASIA, AUSTRALIA, EUROPE, AND NORTH AMERICA.

EACH SPEAKER IS INTERNATIONALLY RENOWNED IN THE FIELD OF DISASTER REHABILITATION AND WILL PROVIDE PERSPECTIVES AND CULTURAL CONTEXT RELATED TO HEALTHCARE DELIVERY IN THEIR RESPECTIVE REGIONS. AFTER COMPLETING THIS WORKSHOP, ATTENDEES WILL UNDERSTAND COMMON CHALLENGES AND EFFECTIVE STRATEGIES IN EMERGENCY REHABILITATION, WITH INSIGHTS FROM AN INTERNATIONAL VANTAGE POINT.

- 8H30
INTRODUCTION. MARIA PAUL
- 8H35
STRENGTHENING REHABILITATION IN HEALTH SYSTEMS: HOW EMERGENCIES AND DISASTERS CAN SERVE AS CATALYSTS FOR CHANGE – LESSONS FROM MOROCCO. ABDERRAZAK HAJJIOUI
- 8H45
MISSED OPPORTUNITIES – IT COULD HAVE BEEN BETTER: THE CRITICAL NEED FOR DISASTER REHABILITATION BEYOND INITIAL SURVIVAL. UMER YOUNAS
- 8H55
2015 NEPAL EARTHQUAKE: REHABILITATION EMT. TASLIM UDDIN
- 9H05
REHABILITATION CAPACITY BUILDING IN PACIFIC ISLAND NATIONS. SUMITHA GOUNDEN
- 9H15
THE WHO EMERGENCY MEDICAL TEAMS INITIATIVE – GUIDANCE FOR REHABILITATION. COLLEEN O'CONNELL
- 9H25
QUESTION AND ANSWER
- 9H35
AMPUTEE REHABILITATION IN GAZA: OVERCOMING CHALLENGES IN A CONFLICT ZONE. ANAS HASSAN
- 9H45
PHYSICAL REHABILITATION INTERVENTIONS IN EMERGENCY CONTEXTS AND THEIR DIFFERENTIAL SET UP WITHIN HUMANITY & INCLUSION. WEERTS ERIC, BA PT
- 9H55
SPACE WEATHER IN 2025 COULD AFFECT DISASTER REHABILITATION AS WELL AS HUMAN SPACEFLIGHT. SATOSHI HAYAMIZU
- 10H05
DISASTERS, REHABILITATION AND CLIMATE CHANGE: HOW CAN WE INTEGRATE OUR ACTIONS WITH THE MEDICAL TEAM? MARCALEE ALEXANDER
- 10H15
ADVANCING TECHNOLOGY IN HUMANITARIAN ASSISTANCE. A PILOT STUDY IN THE USE OF MICROSOFT HOLOLENS IN PROSTHETIC REHABILITATION IN UKRAINE. DAVID CRANDELL
- 10H25
QUESTION AND ANSWER

08:30 - 12:00

ROSERAIE

LONG WORKSHOP

INTRODUCTION TO THE ABCD ISPRM SPASTICITY CURRICULUM: A NOVEL EDUCATIONAL PROGRAM TO ENHANCE INTERNATIONAL SPASTICITY EDUCATION

ID 46

TOPIC SPASTICITY

SPEAKERS MARY ELIZABETH NELSON-BIERSACH (USA)

RAJIV REEBYE (CANADA)

STEFANO CARDA (SWITZERLAND)

RITA PANE (INDONESIA)

CHLOE HALDANE (CANADA)

KLEMEN GRABLJEVEC (SLOVENIA)

CHAIR RAJIV REEBYE

ATTENDEES 60

IN 2021, AN INTERNATIONAL NEEDS SURVEY LED BY DR'S GERARD FRANCISCO AND THIERRY DELTOMBE (55 SPASTICITY EXPERTS FROM 25 COUNTRIES) REVEALED THAT THERE IS AN IMPORTANT NEED FOR ONGOING SPASTICITY EDUCATION TO HIGHLIGHT PATHOPHYSIOLOGY, ASSESSMENT, AND OPTIMIZING TREATMENT STRATEGIES FOR SPASTICITY MANAGEMENT. [3] OVER THE PAST YEAR, MEMBERS OF THE ISPRM SPASTICITY SIG (SPECIAL INTEREST GROUP) COLLABORATED WITH LEADING PMR PHYSICIANS IN INDONESIA TO DESIGN A COMPREHENSIVE CURRICULUM ON SPASTICITY MANAGEMENT. THIS CURRICULUM WAS TAILORED TO ADDRESS THE SPECIFIC EDUCATIONAL NEEDS IDENTIFIED BY GLOBAL PARTNERS, COVERING ALL ASPECTS OF REHABILITATION AND TREATMENT FOR PATIENTS WITH SPASTICITY. KEY COMPONENTS INCLUDE THE FORMATION OF FUNCTIONAL CLINICS AND THE DEVELOPMENT OF MULTIDISCIPLINARY PRACTICES.

THIS CURRICULUM IS BASED ON THE COMPREHENSIVE SPASTICITY ASSESSMENT AND MANAGEMENT FRAMEWORK PREVIOUSLY PUBLISHED IN THE JOURNAL OF ISPRM. BY LEVERAGING BEST PRACTICES AND EXPERT SURVEYS, A STRUCTURED EDUCATIONAL PROGRAM WAS DEVELOPED THAT CAN BE ADAPTED AND APPLIED WORLDWIDE.

TO ENSURE RELEVANCE IN INDONESIA, WE WORKED CLOSELY WITH LOCAL STAKEHOLDERS TO CONTEXTUALIZE THE MATERIAL. THIS PROCESS HELPED IDENTIFY AREAS FOR FURTHER REFINEMENT, ENABLING FUTURE ADAPTATIONS IN OTHER COUNTRIES BASED ON LOCAL RESOURCES AND NEEDS.

- 8H30**
OVERVIEW OF WORKSHOP OBJECTIVES AND TOPICS. RAJIV REEBYE
- 8H45**
BACKGROUND INFORMATION ON SPASTICITY-SIG. BRIEF HISTORY, MISSION, STRUCTURE AND EVOLUTION. RAJIV REEBYE, KLEMEN GRABLJEVEC
- 9H05**
THE PROBLEM: IMPROVING SPASTICITY CARE IN INDONESIA. RITA PANE
- 9H25**
SHORT INTERMISSION FOR NETWORKING AND DISCUSSION.
- 9H40**
THE SOLUTION: DEVELOPMENT OF A SPASTICITY CURRICULUM. STEFANO CARDA
- 10H10**
MODULE A: PATHOPHYSIOLOGY AND ASSESSMENT OF SPASTICITY. GOAL SETTING. RAJIV REEBYE, CHLOE HALDANE
- 11H10**
SHORT INTERMISSION FOR NETWORKING AND DISCUSSION.
- 11H20**
RESULTS OF THE INITIATIVE. DEMOGRAPHICS, EFFICACY OF TRAINING. MARY ELIZABETH NELSON-BIERSACH
- 11H50**
OPEN DISCUSSION AND SUMMARY.

08:30 - 10:30

PALMERAIE

SESSION

UPDATES AND INNOVATIONS IN PEDIATRIC REHABILITATION

ID 83

TOPIC PEDIATRIC

SPEAKERS DAVID CANCEL (USA)
YOUNESS ABDELFTTAH (MOROCCO)
ASCELA VASQUEZ BRICEÑO (HONDURAS)
AMANDA AYALA (USA)
RUTH ALEJANDRO (USA)

CHAIR DAVID CANCEL

THIS SESSION WILL HIGHLIGHT INNOVATIONS IN THE CARE OF CHILDREN WITH DISABILITIES. WE WILL PRESENT EMERGING TREATMENTS AND ASSESSMENT TOOLS IN SPINAL MUSCULAR ATROPHY (SMA), GAIT IMPAIRMENTS, SIALORRHEA, TRAUMATIC BRAIN INJURY AND CONDITIONS WHICH MIMIC CEREBRAL PALSY.

THESE TOPICS WILL UPDATE ATTENDEES IN THE CARE OF CHILDREN WITH SPECIAL NEEDS WITH A FOCUS ON TREATMENT TOOLS AND TECHNOLOGIES THAT CAN BE APPLIED BY MULTIPLE TYPES OF PRACTITIONERS IN VARIOUS CLINICAL SETTINGS.

- 8H30**
OVERVIEW OF SESSION OBJECTIVES AND TOPICS. DAVID CANCEL
- 8H35**
RISDIPLAM IN HONDURAS FOR THE TREATMENT OF SMA. ASCELA VASQUEZ BRICEÑO
- 8H50**
GAIT ANALYSIS FOR DESIGNING REHABILITATION STRATEGIES IN MOROCCO. YOUNESS ABDELFTTAH
- 9H10**
BOTULINUM TOXIN INJECTIONS FOR SIALORRHEA. AMANDA AYALA
- 9H30**
UPDATING TREATMENTS FOR DISORDERS OF CONSCIOUSNESS. RUTH ALEJANDRO
- 9H50**
RECOGNIZING CONDITIONS THAT MIMIC CEREBRAL PALSY AND KEY FEATURES OF EACH SYNDROME THAT CAN AID IN DIAGNOSIS. DAVID CANCEL, AMANDA AYALA, RUTH ALEJANDRO
- 10H10**
OC ID 126 WHAT'S NEW IN PEDIATRIC REHABILITATION MEDICINE AND PRACTICAL APPLICATIONS FOR LMIC. REBECCA SIEGEL
- 10H15**
OPEN DISCUSSION AND SUMMARY.

08:30 - 10:30

ARGANIER
SHORT WORKSHOP



IMPLEMENTATION OF THE WHO RESOLUTION ON STRENGTHENING REHABILITATION IN HEALTH SYSTEMS

ID 23

TOPIC WHO SESSION

SPEAKERS MERCÈ AVELLANET VILADOMAT (ANDORRA)
SINFORIAN KAMBOU (CAMEROON)
ANTIMO MORETTI (ITALY)
ANTHONY DUTTINE (ITALY)
REYNALDO REY-MATIAS (PHILIPPINES)
PAOLO CAPODAGLIO (ITALY)
CARLOTTE KIEKENS (ITALY)

CHAIR MERCÈ AVELLANET VILADOMAT

ATTENDEES 30



THIS WORKSHOP AIMS TO SHARE INSIGHTS ON REHABILITATION DEVELOPMENTS ACROSS DIFFERENT WHO REGIONS, FOCUSING ON POLICY UPDATES, INFORMATION SYSTEMS, AND CLINICAL RESOURCES THAT SUPPORT THE ADVANCEMENT OF REHABILITATION SERVICES GLOBALLY. THROUGH PRESENTATIONS AND DISCUSSIONS, THE WORKSHOP WILL PROMOTE COLLABORATION AMONG STAKEHOLDERS TO STRENGTHEN REHABILITATION SYSTEMS AND POLICIES.

8H30

STATEMENTS FROM WHO AFRO REGIONAL COMMITTEE (RC74). SINFORIAN KAMBOU

8H40

INSIGHTS FROM WHO EURO REGIONAL COMMITTEE (RC74). ANTIMO MORETTI

8H50

REPORT ON WHO WESTERN PACIFIC REGIONAL COMMITTEE (RC75). REYNALDO REY-MATIAS

9H00

WHO TRAINING REHABILITATION MANAGEMENT INFORMATION SYSTEM FOR WHO AFRO. PAOLO CAPODAGLIO, SINFORIAN KAMBOU

9H15

THE WHO RESOLUTION: A CALL FOR STAKEHOLDERS TO PRIORITIZE HEALTH POLICY AND SYSTEMS RESEARCH IN REHABILITATION. CARLOTTE KIEKENS

9H25

WHAT'S THE ROLE OF WHO. ANTHONY DUTTINE

9H55

DISCUSSION

10:30 - 11:00

BREAK

11:00 - 12:00

PLENARY

SESSION

NON TRAUMATIC SPINAL CORD INJURY: AN OVERVIEW OF CAUSES, TREATMENTS AND OUTCOMES FOR ADULTS AND CHILDREN

ID 122

TOPIC NEUROREHABILITATION

SPEAKERS RONALD REEVES (USA)
CRISTINA SADOWSKY (USA)
BRITTANY SNIDER (USA)

CHAIR RONALD REEVES

NON TRAUMATIC DISEASES AND CONDITIONS AFFECTING THE SPINAL CORD ARE CAUSED BY A WIDE RANGE OF CONDITIONS: ARTHRITIS, INFLAMMATION, INFECTIONS, TUMORS, NUTRITIONAL DISORDERS, TOXINS, ISCHEMIA AND VASCULAR LESIONS. THE CONDITIONS AFFECTING CHILDREN DIFFER FROM THOSE TYPICALLY SEEN IN ADULTS, AND THE NEUROLOGIC AND SURVIVAL PROGNOSIS VARIES DRAMATICALLY. OUR 60-MINUTE COURSE WILL REVIEW THE CAUSES, KEY DIAGNOSTIC CONSIDERATIONS, PROGNOSIS AND REHABILITATION HIGHLIGHTS. TIME FOR DISCUSSION AND QUESTIONS WILL CONCLUDE THE SESSION.

11H00

INTRODUCTION TO NON-TRAUMATIC MYELOPATHY. RONALD REEVES

11H10

ACQUIRED MYELOPATHIES IN CHILDREN; IDIOPATHIC, INFECTIOUS, INFLAMMATORY, ISCHEMIC AND OTHER
SADOWSKY

CRISTINA

- 11H20**
DIAGNOSTIC CHALLENGES REGARDING UNCOMMON CAUSES OF NON TRAUMATIC MYELOPATHY IN ADULTS. RONALD REEVES
- 11H30**
IMPORTANT CONSIDERATIONS REGARDING COMMON MYELOPATHIES IN ADULTS. BRITTANY SNIDER
- 11H40**
OC ID 533 LET'S TALK ABOUT SEX... OR NOT? - EXPLORING THE (LACK OF) ENGAGEMENT IN SEXUAL HEALTH CONSULTATIONS AFTER SPINAL CORD INJURY. ANA ALMEIDA VIEIRA
- 11H45**
OC ID 358 EFFECT OF PROBIOTICS ON BOWEL FUNCTION, NUTRITIONAL STATUS AND LIPID PROFILE IN CHRONIC SPINAL CORD INJURED PATIENTS: RANDOMIZED, CONTROLLED, DOUBLE-BLIND TRIAL. BASSEM TISS
- 11H50**
OC ID 288 COHORT PROFILE OF THE SECOND INTERNATIONAL SPINAL CORD INJURY (INSCI) COMMUNITY SURVEY. DAIANA MIHAELA POPA
- 11H55**
QUESTIONS AND DISCUSSION.

11:00 - 12:00

OLIVERAIE

SESSION

ADVANCING STEM CELL THERAPY: A NEW FRONTIER IN NEUROLOGICAL DISORDER TREATMENT

ID 6

TOPIC RESEARCH

SPEAKERS XIAOFENG JIA (USA)
JOHANNES ATTA (GERMANY)
TOSHIYA OSANAI (JAPAN)
ABDULRAHMAN SHUDIFAT (JORDAN)

CHAIR XIAOFENG JIA

A REVIEW OF THE EXCITING FRONTIER OF STEM CELL THERAPY FOR ACUTE NEUROLOGICAL INJURIES INCLUDING BRAIN INJURY AFTER CARDIAC ARREST, GLOBAL ANOXIC INJURY, STROKE, SPINAL CORD INJURY, AND PERIPHERAL NERVE INJURY. ATTENDEES WILL LEARN THE BASIC SCIENCE INVOLVED IN STEM CELL PROCUREMENT, GENERATION, AND DIFFERENTIATION. ATTENDEES WILL DISCOVER THE POTENTIAL APPLICATIONS OF STEM CELLS IN VARIOUS ACUTE NEUROLOGICAL DISEASES SUCH AS STROKE, SCI, POST-CARDIAC ARREST, AND PERIPHERAL NERVE INJURY. ATTENDEES WILL INVESTIGATE THE LIMITATIONS OF TRANSLATION OF THESE STEM CELL THERAPIES TO CLINICAL PRACTICE AND WILL DISCUSS POTENTIAL SOLUTIONS TO THIS CHALLENGE.

- 11H00**
NOVEL GLYCOENGINEERED HUMAN STEM CELL THERAPY FOR BRAIN INJURY AFTER CARDIAC ARREST. XIAOFENG JIA
- 11H10**
NEW HORIZON: COMBINE ROBOTICS AND ANOVA IRM STEM CELL-BASED TREATMENTS. JOHANNES ATTA
- 11H20**
ALLOGENEIC STEM CELL THERAPY FOR ACUTE ISCHEMIC STROKE: THE PHASE 2/3 TREASURE RANDOMIZED CLINICAL TRIAL. TOSHIYA OSANAI
- 11H30**
MESENCHYMAL STROMAL CELLS OF BONE MARROW AND UMBILICAL CORD ORIGINS IN PATIENTS WITH CHRONIC SPINAL CORD INJURIES: A PHASE I/II STUDY. ABDULRAHMAN SHUDIFAT
- 11H40**
FREE OC ID 291 THE IMPORTANCE OF USING THE ACTIGRAPH DEVICES TO DETECT THE FALL RISK AMONG OLDER ADULTS WITH SLEEP DISORDERS. MOHAMMED ALSHEHRI
- 11H45**
SUMMARY

11:00 - 12:00

ORANGERAIE

SESSION

GLOBAL CERTIFICATION: A MULTIDISCIPLINARY APPROACH TO DEVELOPING THE REHABILITATION WORKFORCE GLOBAL REHABILITATION APPROACHES

ID 121

TOPIC COMMUNITY

SPEAKERS JULIA TO DUTKA (USA)
LYNNE MORONSKI (USA)
HAZEM QANNAM (SAUDI ARABIA)
BEATRICE REY-MATIAS (PHILIPPINES)

CHAIR JULIA TO DUTKA

WITH 2.4 BILLION PEOPLE AROUND THE WORLD NEEDING REHABILITATION CARE, THE WORLD HEALTH ORGANIZATION (WHO) RECOGNIZES THAT A MULTIDISCIPLINARY APPROACH OFFERS THE BEST LIKELIHOOD FOR SUCCESS IN IMPROVING REHABILITATION HEALTH OUTCOMES WORLDWIDE. THE INTEGRATION OF REHABILITATION HEALTH WORKERS FROM DIFFERENT PROFESSIONAL DISCIPLINES, INCLUDING NURSES, ALLIED HEALTH PROFESSIONALS, AND ASSISTIVE PERSONNEL, HAS BEEN LESS INTENTIONAL THAN WARRANTED TO EFFECT CHANGE. THE LACK OF ACCESS TO FORMAL EDUCATION AND COMPETENCY-BASED TRAINING FOR HEALTH WORKERS HAVE MADE IT DIFFICULT FOR COUNTRIES TO BUILD A MULTIDISCIPLINARY REHABILITATION HEALTH WORKFORCE. INSTEAD, HEALTH WORKERS LEARN REHABILITATION CARE ON THE JOB, OFTEN WITHOUT STANDARDIZED, EVIDENCE-BASED FRAMEWORKS. THIS SESSION WILL EXPLORE THE DEVELOPMENT AND SIGNIFICANCE OF GLOBAL EXAM-BASED REHABILITATION CERTIFICATIONS DESIGNED TO EMPOWER THESE PROFESSIONALS BY ASSESSING AND VALIDATING THEIR COMPETENCIES THROUGH HIGH-STAKES CERTIFICATION AND MICRO-CREDENTIALS. REHABILITATION WORKFORCE DEVELOPMENT IS NOT JUST A LOCAL ISSUE - IT IS A GLOBAL IMPERATIVE. THIS NEED RESONATES ACROSS LOCAL COMMUNITIES WORLDWIDE.

THE WORLD HEALTH ORGANIZATION (WHO) AND ITS WORLD REHABILITATION ALLIANCE (WRA) HAVE CONTINUOUSLY ADVOCATED FOR THIS SEISMIC CHANGE IN MINDSET BY STRENGTHENING REHABILITATION SERVICES AS PART OF THE WHO REHABILITATION 2030 INITIATIVE. WITH AN INCREASING GLOBAL DEMAND FOR REHABILITATION DUE TO AGING POPULATIONS, CHRONIC DISEASES, WAR, AND CONFLICT, THERE IS AN URGENT NEED FOR COMPETENT, WELL-TRAINED REHABILITATION PROFESSIONALS, TRAINED WITHIN A SOUND REHABILITATION COMPETENCY FRAMEWORK TO UNDERGIRD THIS LOCALIZED WORLDWIDE EFFORT.

HOWEVER, WORKFORCE INTEGRATION CHALLENGES PERSIST DUE TO INCONSISTENT EDUCATIONAL STANDARDS AND UNDERFUNDING OF REHABILITATION SERVICES. IN THIS SESSION, WE WILL SHARE INSIGHTS ON DEVELOPING THESE GLOBAL CERTIFICATIONS.

WE WILL ALSO SHARE EXAM DATA FROM THE BETA TESTING OF THESE HIGH-STAKES EXAMINATIONS FOR GLOBAL REHABILITATION NURSE, ALLIED HEALTH PROFESSIONAL, AND ASSISTIVE PERSONNEL. SESSION SPEAKERS WILL OUTLINE THE AREAS OF WEAKNESSES NEEDING ADDITIONAL INVESTMENT AND TRAINING TO IMPROVE THE COMPETENCE OF REHABILITATION PROFESSIONALS AND TO RECOGNIZE PRACTICE EXCELLENCE. ADDITIONALLY, PRESENTERS FROM THE PHILIPPINES AND SAUDI ARABIA, TWO COUNTRIES IN DIFFERENT STRATA OF THE GLOBAL ECONOMY, WILL DISCUSS HOW GLOBAL CERTIFICATION CAN EQUALLY SUPPORT PROFESSIONAL DEVELOPMENT, WORKFORCE INTEGRATION, AND POLICY-LEVEL IMPROVEMENTS IN THEIR LOCAL CONTEXTS. THE LESSONS LEARNED WILL OFFER MODELS FOR REHABILITATION HEALTH WORKFORCE DEVELOPMENT AND CARE DELIVERY.

11H00
OVERVIEW OF WORKSHOP OBJECTIVES AND TOPICS.

11H10
PRESENTATION OF KEY GLOBAL REHABILITATION CERTIFICATION CONCEPTS AND BETA TESTING RESULTS.

11H25
TWO CASE STUDIES OF IMPLEMENTING GLOBAL REHABILITATION CERTIFICATIONS IN TWO WORLD REGIONS: CHALLENGES AND BENEFITS.

11H40
OC ID 580 REHABILITATION PERSPECTIVE OF A DEVELOPING COUNTRY. EHSANUL HAQUE KHAN

11H45
OC ID 349 DEVELOPING AND VALIDATING THE EMPLOYER PERCEPTION ON DISABILITY EMPLOYMENT (EPDE) SCALE: ASSESSING KEY FACTORS INFLUENCING EMPLOYER WILLINGNESS TO HIRE PERSONS WITH DISABILITIES. FLORENCE BLASIUS

11H50
OPEN DISCUSSION AND SUMMARY.

11:00 - 12:00 PALMERAIE SESSION

PEDIATRIC REHABILITATION AND CHILDREN WITH CEREBRAL PALSY ON A GLOBAL STAG

ID 73

TOPIC PEDIATRIC

SPEAKERS SIMRA JAVAID (USA)
AUTUMN ATKINSON (USA)
KRISTINA TEBO (USA)
CHRISTINE HILL (USA)

CHAIR SIMRA JAVAID

THIS LECTURE WILL EXPLORE THE EVOLVING LANDSCAPE OF PEDIATRIC REHABILITATION FOR CHILDREN WITH CEREBRAL PALSY (CP) WITHIN A GLOBAL CONTEXT, WITH A PARTICULAR FOCUS ON AFRICA. IT ALIGNS WITH THE BROADER THEME OF "GLOBAL SOLUTIONS IN REHABILITATION: (RE)VISITING AFRICA BEFORE 2030" BY EMPHASIZING INCLUSIVE, EQUITABLE, AND SUSTAINABLE REHABILITATION APPROACHES. THE DISCUSSION WILL INTEGRATE INSIGHTS FROM GLOBAL BEST PRACTICES, INNOVATIVE SOLUTIONS, AND AFRICA'S UNIQUE OPPORTUNITIES AND CHALLENGES IN PEDIATRIC REHABILITATION.

11H00
OVERVIEW OF PEDIATRIC REHABILITATION AND CP IN A GLOBAL AND AFRICAN CONTEXT.

11H10
GLOBAL PERSPECTIVES ON CP AND REHABILITATION.

11H20
AFRICA'S ROLE IN ADVANCING REHABILITATION.

11H30
INNOVATIVE APPROACHES FROM THE U.S. FOR GLOBAL ADAPTATION.

11H45
OC ID 894 PROFIL DE FONCTIONNEMENT DES TROUBLES NEURODÉVELOPPEMENTAUX DE L'ENFANT À LIBREVILLE. ERIC LEBANDA

11H50
CALL TO ACTION: STRATEGIES FOR GLOBAL COLLABORATION, INVESTMENT, AND ADVOCACY BEFORE 2030.

REHABILITATION IN ONCOLOGICAL PATIENTS WHERE IS THE FOCUS

ID 110

TOPIC ONCOLOGY

SPEAKERS CAROLINA DE MIGUEL BENADIVA (SPAIN)
ASTRID TEIXEIRA TABORDA (SPAIN)
PILAR SÁNCHEZ TARIDA (SPAIN)
RAQUEL CUTILLAS (SPAIN)
CARMEN URBANEJA DORADO (SPAIN)

CHAIR CAROLINA DE MIGUEL BENADIVA

CANCER AND ITS TREATMENTS, SUCH AS CHEMOTHERAPY AND RADIOTHERAPY, HAVE A SIGNIFICANT IMPACT ON PATIENTS QUALITY OF LIFE, AFFECTING THEIR PHYSICAL, PSYCHOLOGICAL, AND FUNCTIONAL CAPACITIES. IN THIS CONTEXT, ONCOLOGICAL REHABILITATION PLAYS A CRUCIAL ROLE AT ALL STAGES OF THE DISEASE, AIMING TO MINIMIZE THE ADVERSE EFFECTS OF TREATMENT AND IMPROVE PATIENT RECOVERY.

ONCOLOGICAL REHABILITATION CAN BEGIN AT DIFFERENT STAGES OF THE THERAPEUTIC PROCESS: BEFORE TREATMENT (PREHABILITATION), DURING TREATMENT, AND AFTER TREATMENT COMPLETION. PREHABILITATION FOCUSES ON OPTIMIZING THE PATIENT'S PHYSICAL AND PSYCHOLOGICAL CONDITION BEFORE RECEIVING ONCOLOGICAL THERAPY, STRENGTHENING THE BODY TO BETTER TOLERATE SIDE EFFECTS. IN CONTRAST, REHABILITATION DURING TREATMENT AIMS TO MITIGATE SIDE EFFECTS IN REAL-TIME, PREVENTING COMPLICATIONS THAT COULD COMPROMISE TREATMENT CONTINUITY OR THE PATIENT'S QUALITY OF LIFE.

11H00
OVERVIEW OF OBJECTIVES AND TOPICS.

11H05
HEAD AND NECK CANCER.

11H15
SARCOPENIC DYSPHAGIA.

11H25
HEMATOPOIETIC TRANSPLANT.

11H35
BREAST CANCER (PRE RECORDED).

11H45
OC ID 576 BENEFITS OF PREHABILITATION IN PATIENTS WITH COLORECTAL CANCER: CASE-CONTROL STUDY. EMILIO JAVIER FRUTOS REYO

11H50
OPEN DISCUSSION AND SUMMARY.

SPINAL CORD INJURIES: CHALLENGES AND FUTURE PROSPECTS IN THE MENA REGION

SPEAKERS ALI OTOM

CHAIR AHMED AMINE EL OUMRI, AMI AL AHMAR

SPINAL CORD INJURIES (SCI) ARE AMONG THE MOST SEVERE CONDITIONS, CAUSING SIGNIFICANT PHYSICAL, PSYCHOSOCIAL, AND VOCATIONAL CHALLENGES FOR PATIENTS AND CAREGIVERS.

IN THE MENA REGION, WITH AN ESTIMATED INCIDENCE OF 23 PER MILLION, 80% OF SCI PATIENTS LACK ACCESS TO SPECIALIZED CARE DUE TO INSUFFICIENT INFRASTRUCTURE, TRAINED PROFESSIONALS, AND PUBLIC AWARENESS. ADDRESSING THESE CHALLENGES REQUIRES A COMPREHENSIVE, PATIENT-CENTERED APPROACH, INCLUDING PREVENTION, EARLY INTERVENTION IN SPECIALIZED CENTERS, MULTIDISCIPLINARY REHABILITATION, AND COMMUNITY REINTEGRATION.

FUTURE EFFORTS SHOULD FOCUS ON STRENGTHENING ADVOCACY, EXPANDING SPECIALIZED SERVICES, AND INTEGRATING ADVANCED REHABILITATION TECHNOLOGIES.

CONCEPT OF THE MULTIFUNCTION SIT-TO-STAND DEVICE IN THE REHABILITATION OF CHILDREN WITH CEREBRAL PALSY

SPEAKERS DANIEL (ALLOH)

CHAIR AHMED AMINE EL OUMRI, RAMI AL AHMAR

NEURO-ORTHOPEDIC COMPLICATIONS OBSERVED IN CHILDREN WITH CEREBRAL PALSY RESULT FROM INADEQUATE ADHERENCE TO POSITIONING PROTOCOLS, EXACERBATED BY THE VARIETY OF POSTURE DEVICES AVAILABLE. THE MULTIFUNCTIONAL VERTICALIZER DEVELOPED IN ABIDJAN, WHICH ACCOMMODATES MULTIPLE POSITIONS, PRESENTS A VIABLE SOLUTION TO THIS ISSUE.

ITS PRIMARY ADVANTAGE IS THE ABILITY TO MAINTAIN THE CHILD IN VARIOUS REQUIRED POSITIONS THROUGHOUT THE DAY WITH MINIMAL INTERVENTION FROM PARENTS.

13:00 - 14:30

PLENARY

LUNCH BREAK SYPOSIUM BY ABBVIE: EACH BONT/A IS UNIQUE: FROM THEORY TO CLINIC

abbvie

14:30 - 15:00

PLENARY

KEYNOTE

DOES SPASTICITY NEED A NEW NAME?

SPEAKERS GERARD (FRANCISCO)

CHAIR FRANÇOIS RANNOU, OURTASSI MARYAM

15:00 - 15:30

PLENARY

KEYNOTE

NOVEL INSIGHTS IN THE REHABILITATION OF UNILATERAL VISUOSPATIAL NEGLECT

SPEAKERS GILLES (RODE)

CHAIR FRANÇOIS RANNOU, FOURTASSI MARYAM

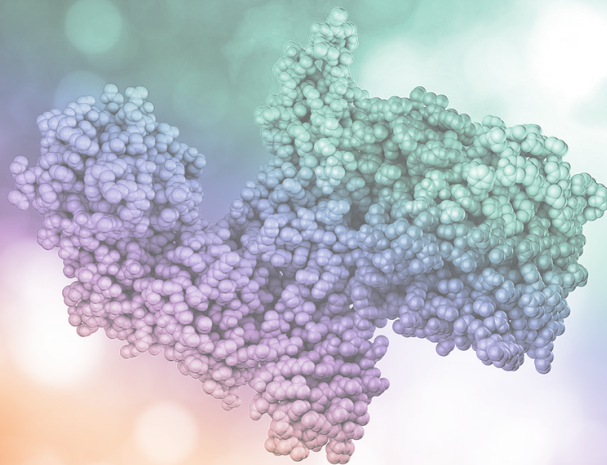
DEFICITS IN SPATIAL COGNITION SECONDARY TO RIGHT BRAIN INJURY ARE A POOR PROGNOSTIC FACTOR FOR MOTOR AND FUNCTIONAL RECOVERY.

THE MOST SEVERE OF THESE DEFICITS IS VISUOPATIAL NEGLECT. THIS IS A MULTIFACETED SYNDROME WHOSE DEFICITS AND PRODUCTIVE MANIFESTATIONS CAN AFFECT THE DIFFERENT DIMENSIONS OF SPACE: EXTRACORPOREAL, CORPOREAL, EGOCENTRIC, ALLOCENTRIC OR IMAGINED, AS WELL AS MOTOR AND SENSORY MODALITIES.

THIS DEFICIT THEREFORE REPRESENTS A CHALLENGE IN REHABILITATION TO ENCOURAGE RECOVERY, AUTONOMY AND PARTICIPATION. SEVERAL REHABILITATION METHODS EXIST, WHICH CAN BE CLASSIFIED ACCORDING TO THEIR "TOP-DOWN" OR "BOTTOM-UP" MECHANISM OF ACTION, AS WELL AS INNOVATIVE METHODS BASED ON CEREBRAL NEUROMODULATION, VIRTUAL REALITY OR ARTISTIC ACTIVITY.

Plenary room
Thursday, 6 November
13:00–14:00

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Rajiv Reebye (Chair)
University of British
Columbia, Vancouver,
BC, Canada



Claire Spronk
AbbVie



Jorge Jacinto
Centro de Medicina de
Reabilitação de Alcoitão,
Cascais, Portugal



Mahesh Cirasanambati
Burjeel Medical City,
Abu Dhabi,
United Arab Emirates

We look forward to seeing you!

15:30 - 16:30

PLENARY

SESSION

UPDATES AND INNOVATIONS IN CONCUSSION AND MILD TRAUMATIC BRAIN INJURY RECOVERY

ID 89

TOPIC NEUROREHABILITATION

SPEAKERS DAVID CANCEL (USA)
AMANDA AYALA (USA)
RUTH ALEJANDRO (USA)

CHAIR DAVID CANCEL

THIS SESSION WILL PROVIDE UPDATES AND HIGHLIGHT INNOVATIONS IN THE DIAGNOSIS AND TREATMENT OF PATIENTS WITH CONCUSSION, PERSISTENT POST-CONCUSSION SYMPTOMS AND VESTIBULAR DISORDERS FOLLOWING MILD TRAUMATIC BRAIN INJURY (MTBI)

15H30

OVERVIEW OF SESSION OBJECTIVES AND TOPICS. DAVID CANCEL

15H35

INNOVATIONS IN IMAGING AND SERUM STUDIES IN THE DIAGNOSIS OF CONCUSSION AND PERSISTING/POST-CONCUSSIVE SYMPTOMS. DAVID CANCEL

15H55

OUTCOMES AND TREATMENT PARADIGMS FOR PERSISTENT POST-CONCUSSION SYMPTOMS INCLUDING MEDICATIONS AND RETURN TO LEARN/WORK STRATEGIES. AMANDA AYALA

15H55

THE ASSESSMENT AND TREATMENT OF VESTIBULAR DISORDERS FOLLOWING CONCUSSION AND MTBI. RUTH ALEJANDRO

16H15

OC ID 303 COG-FIRST: STANDARDIZATION OF A TABLET-BASED SELF-ADMINISTERED COGNITIVE SCREENING. CAMILLE HESLOT

16H20

OC ID 768 ROADSIDE TO RECOVERY: THE INPATIENT TRAUMA SERVICE, AN INTEGRATED CARE MODEL IN A MAJOR TRAUMA CENTRE IN IRELAND. AOIFE MURRAY

16H25

OPEN DISCUSSION AND SUMMARY.

15:30 - 16:30

OLIVERAIE

SESSION

INNOVATIVE NON-SURGICAL THERAPIES FOR PAIN AND FUNCTIONAL RECOVERY

TOPIC INNOVATION

SPEAKERS AREERAT SUPUTTITADA (THAÏLANDE)

CHAIR AHMED AMINE EL OUMRI, LEVENT ÖZÇAKAR

NON-SURGICAL AND NON-INVASIVE THERAPIES ARE GAINING INCREASING RELEVANCE IN PHYSICAL AND REHABILITATION MEDICINE, OFFERING EFFECTIVE ALTERNATIVES TO SURGERY FOR MANAGING PAIN, RESTORING FUNCTION, AND IMPROVING QUALITY OF LIFE. THIS SESSION WILL HIGHLIGHT INNOVATIVE APPROACHES SUCH AS EXTRACORPOREAL SHOCKWAVE THERAPY, ULTRASOUND-GUIDED PROCEDURES, THERAPEUTIC EDUCATION, VIBRATION TRAINING, AND KINESIO-TAPING. THROUGH CLINICAL EVIDENCE AND PRACTICAL INSIGHTS, SPEAKERS WILL PRESENT HOW THESE TECHNIQUES CAN BE OPTIMIZED AND INTEGRATED INTO REHABILITATION PATHWAYS. BY ADDRESSING DIVERSE CONDITIONS INCLUDING CALCIFICATIONS, CARPAL TUNNEL SYNDROME, FIBROMYALGIA, AND CHRONIC LOW BACK PAIN, THIS SESSION WILL PROVIDE PARTICIPANTS WITH UPDATED KNOWLEDGE ON THE ROLE OF INNOVATIVE NON-SURGICAL STRATEGIES IN MODERN REHABILITATION PRACTICE.

15H30

INTRODUCTION

15H35

LECTURE ID 52 INNOVATIVE NON-SURGICAL APPROACH FOR REMOVING CALCIFICATION AND FIBROSIS IN NEUROMUSCULOSKELETAL JOINTS. AREERAT SUPUTTITADA

15H55

OC ID 187 OPTIMIZING THE RESULTS OF EXTRACORPOREAL SHOCK WAVE THERAPY: THE IMPACT OF THERAPEUTIC EDUCATION. NAJIA HAJJIOUI

16H00

OC ID 770 ULTRASOUND-GUIDED PERIPHERAL NERVE BLOCKS FOR PAIN MANAGEMENT IN PERCUTANEOUS TENDON FENESTRATION AND PRP INJECTION: A PRACTICAL GUIDE. TOMÁS RIBEIRO DA SILVA

16H05

OCID 102 COMPARISON OF THE EFFECTS OF RADIAL ESWT WITH DIFFERENT PULSES ON PAIN, FUNCTIONALITY, ELECTROPHYSIOLOGICAL, AND ULTRASONOGRAPHIC FINDINGS IN PATIENTS WITH CARPAL TUNNEL SYNDROME: A PROSPECTIVE, RANDOMIZED, SINGLE-BLIND STUDY. İBRAHİM DOĞRU

16H10

OC ID 150 EFFECT OF WHOLE-BODY VIBRATION TRAINING ON FIBROMYALGIA: A SYSTEMATIC REVIEW AND META-ANALYSIS OF RANDOMIZED CONTROLLED TRIALS. PO-CHUAN CHANG

16H15

OC ID 725 THE EFFECT OF KINESIO-TAPING ON CHRONIC NONSPECIFIC LOW BACK PAIN: A DOUBLE BLINDED RANDOMISED CLINICAL TRIAL. CHAIMAE NOURI

16H20

OC ID 807 ASSESSMENT OF EXERCISE RE-TRAINING IN CHRONIC LOW BACK PAIN PATIENTS IN SUB-SAHARAN AFRICA : A CASE SERIES STUDY USING INDIRECT MEASUREMENT OF VO2MAX. YIROZOUNLOMIAN TIAHO

16H25

DISCUSSION

15:30 - 16:30

ORANGERAIE

SESSION SUPPORTED BY ERGOLINE

EXERCISE-BASED CARDIAC REHABILITATION – BEYOND STENTS AND PILLS

SPEAKERS BIRNA BJARNASON (GERMANY)
ROLAND NEBEL (GERMANY)

ergoline

MOVING TO HEALTH

15:30 - 16:30

ROSEIRAIE

SESSION

INCORPORATING AEROBIC EXERCISE IN PRM – AN ESSENTIAL (BUT OFTEN OVERLOOKED) MODALITY IN OPTIMAL NEUROLOGICAL REHABILITATION

ID 17

TOPIC GLOBAL APPROACHE

SPEAKERS GLOBAL (APPROACHE)

JONATHAN WHITESON (USA)

CHAIR JONATHAN WHITESON (USA)

BENEFITS FROM STANDARD PRM PROGRAMS FOR NEUROLOGIC, ONCOLOGIC AND CARDIOVASCULAR DISORDERS HAVE BEEN WELL ESTABLISHED. REHABILITATION PROGRAMS TYPICALLY FOCUS ON FOCAL AREAS OF DEFICIT DESIGNED TO OPTIMIZE SPECIFIC FUNCTIONS SUCH AS STANDING, SELF-CARE, BALANCING AND WALKING. AEROBIC EXERCISE IS CENTRAL TO REHABILITATION PROGRAMS FOR CARDIAC AND PULMONARY CONDITIONS. WHILE THERE IS BENEFIT TO THE 'CENTRAL' ORGAN – THE HEART OR LUNG – FROM CARDIAC AND PULMONARY REHABILITATION PROGRAMS, AEROBIC EXERCISE IN THESE PROGRAMS SIGNIFICANTLY IMPROVES FUNCTION AND OVERALL HEALTH BY IMPACTING MULTIPLE ORGAN SYSTEMS AND PHYSIOLOGIC, BIOCHEMICAL, NEUROLOGIC AND IMMUNOLOGIC PATHWAYS. BEYOND RECOVERY OF HEALTH AND FUNCTION, AEROBIC EXERCISE BUILDS CELLULAR AND ORGAN SYSTEM RESILIENCY AND RESERVE AND CONTRIBUTES SIGNIFICANTLY TO SECONDARY PREVENTION AND LONGEVITY. AEROBIC EXERCISE AS A CORE MODALITY IS OFTEN OVERLOOKED IN REHABILITATION PROGRAMS DESIGNED TO OVERCOME DISABILITY RESULTING FROM NEUROLOGIC AND ONCOLOGIC DISEASES. YET THE DATA IS GROWING SUPPORTING THE VALUE OF AEROBIC EXERCISE FROM THE TIME OF THE ACUTE EVENT THROUGHOUT THE COURSE OF RECOVERY AND INTO THE WELLNESS PERIOD. WHILE ADVANCES IN PRM SCIENCE AND TECHNOLOGY MAY COME WITH SIGNIFICANT EXPENSE BEYOND THE REACH OF MANY CENTERS AND COUNTRIES DELIVERING PRM PROGRAMS, AEROBIC EXERCISE REQUIRES LITTLE OR NO FINANCIAL OUTLAY TO MAKE AVAILABLE AND IS UNIVERSALLY ACCESSIBLE. THIS SESSION WILL PRESENT CORE DATA SUPPORTING THE ADDED VALUE OF AEROBIC EXERCISE IN FUNCTIONAL AND HEALTH RECOVERY FROM DEBILITATING NEUROLOGIC AND ONCOLOGIC ILLNESSES. IT WILL INCLUDE GUIDANCE ON INTEGRATING SAFE AEROBIC EXERCISE PROGRAMS AS PART OF TRADITIONAL PRM RECOVERY PROGRAMS AND DISCUSS DETAILS OF THE AEROBIC EXERCISE PRESCRIPTION, PRECAUTIONS, MONITORING AND OUTCOME MEASURES. A DISCUSSION OF THE US DEPARTMENT OF HEALTH PHYSICAL ACTIVITY GUIDELINES WILL SUPPORT THE PRIMARY AND SECONDARY PREVENTIVE ROLE OF AEROBIC EXERCISE THAT CAN BE EMPLOYED BY PRM PHYSICIANS GLOBALLY.

15H30

US PHYSICAL ACTIVITY GUIDELINES FOR HEALTH AND WELLNESS. JONATHAN WHITESON

15H40

CARDIAC / PULMONARY REHABILITATION – AN EXISTING MODEL FOR AEROBIC EXERCISE IN DISEASE RECOVERY. JONATHAN WHITESON

15H50

EVIDENCE FOR AEROBIC EXERCISE IN CANCER REHABILITATION. JONATHAN WHITESON

16H00

NEUROLOGIC REHABILITATION – STROKE AND BRAIN INJURY RECOVERY ENHANCED BY AEROBIC EXERCISE. JONATHAN WHITESON

16H10

OC ID 629 BOTULINUM TOXIN A FOR POST-STROKE SPASTICITY: INSIGHTS FROM THE FRENCH NATIONAL HOSPITAL DISCHARGE DATABASE (2015-2023). DJAMEL BENSMAIL

16H15

OC ID 636 THE UNRAVELLING OF A 'CATEGORY MISTAKE': A NEW EXEGESIS FOR POST CNS LESION PARALYSIS PROCESS AND THE DEVELOPMENT OF A NEW RESTORATION THERAPY. ANDROMACHI SALACHA

16H20

OC ID 89 IMPACT OF PREMORBID PHYSICAL ACTIVITY LEVEL ON RECOVERY FOLLOWING AN ISOLATED TRAUMATIC BRAIN INJURY IN ACUTE CARE SETTING. JEANE DAGHER

16H25

DISCUSSION.

15:30 - 16:30

PALMERAIE

SESSION

PALLIATIVE CARE : NEED OF THE HOUR

ID 80

TOPIC GLOBAL REHABILITATION APPROACHES

SPEAKERS NAVITA PUROHIT VYAS (INDIA)

ABHISHEK SRIVASTAVA (INDIA)

SIVA NAIR (INDIA)

CHAIR ABHISHEK SRIVASTAVA

PALLIATIVE CARE HELPS PATIENTS AND THEIR FAMILIES MANAGE THE PHYSICAL, EMOTIONAL, AND SPIRITUAL NEEDS THAT ARISE FROM A SERIOUS ILLNESS. IT CAN BE STARTED EARLY IN THE COURSE OF A DISEASE TO IMPROVE THE QUALITY OF LIFE AND TREATMENT OUTCOMES.

- EACH YEAR, AN ESTIMATED 56.8 MILLION PEOPLE, INCLUDING 25.7 MILLION IN THE LAST YEAR OF LIFE, ARE IN NEED OF PALLIATIVE CARE. WORLDWIDE, ONLY ABOUT 14% OF PEOPLE WHO NEED PALLIATIVE CARE CURRENTLY RECEIVE IT.
- PALLIATIVE CARE IS REQUIRED FOR A WIDE RANGE OF DISEASES. THE MAJORITY OF ADULTS IN NEED OF PALLIATIVE CARE HAVE CHRONIC DISEASES SUCH AS CARDIOVASCULAR DISEASES (38.5%), CANCER (34%) (ONCOPALLIATIVE CARE), CHRONIC RESPIRATORY DISEASES (10.3%), AIDS (5.7%) AND DIABETES (4.6%). MANY OTHER CONDITIONS MAY REQUIRE PALLIATIVE CARE, INCLUDING KIDNEY FAILURE, CHRONIC LIVER DISEASE, MULTIPLE SCLEROSIS, PARKINSON'S DISEASE, NEUROLOGICAL DISEASE, DEMENTIA (NEURO-PALLIATIVE CARE).

- 15H30
ONCOPALLIATIVE CARE. NAVITA PUROHIT VYAS
- 15H45
NEUROPALLIATIVE CARE. ABHISHEK SRIVASTAVA
- 16H00
END OF LIFE CARE. SIVA NAIR
- 16H15
OC ID 879 OPTIMIZING REHABILITATION WARD NURSING: A PROPOSED PROTOCOL FOR TAILORED PATIENT OBSERVATIONS. FRANCOIS THERON
- 16H20
OC ID 658 MAPPING FUNCTIONING IN HEAD AND NECK CANCER SURVIVORS: A CONTENT COMPARISON USING THE INTERNATIONAL CLASSIFICATION OF FUNCTIONING, DISABILITY, AND HEALTH (ICF). SARA LAXE
- 16H25
DISCUSSION

15:30 - 16:30

ARGANIER

SESSION

OBSESITY, REHABILITATION, AND LYMPHEDEMA: CHALLENGES AND ADVANCES IN COMPREHENSIVE MANAGEMENT

ID 116

TOPIC GLOBAL APPROACHE

SPEAKERS ASTRID TEIXEIRA TABORDA (SPAIN)
MARTA SUPERVIA POLO (SPAIN)
JUDITH SANCHEZ RAYA (SPAIN)
HELENA BASCUÑANA (SPAIN)

CHAIR ASTRID TEIXEIRA TABORDA

OBSESITY IS A COMPLEX CHRONIC DISEASE ITS PREVALENCE HAS SIGNIFICANTLY INCREASED IN RECENT DECADES, MAKING IT A GLOBAL PUBLIC HEALTH ISSUE. IN ADDITION TO ITS WELL-KNOWN ASSOCIATION WITH CARDIOVASCULAR AND METABOLIC DISEASES, OBSESITY HAS A CONSIDERABLE IMPACT ON THE MUSCULOSKELETAL AND LYMPHATIC SYSTEMS, CONTRIBUTING TO THE DEVELOPMENT OF OSTEOARTICULAR PATHOLOGIES AND LYMPHEDEMA. OBSESITY INCREASES THE MECHANICAL LOAD ON JOINTS, ESPECIALLY WEIGHT-BEARING ONES SUCH AS THE KNEES AND HIPS, ACCELERATING CARTILAGE WEAR AND PROMOTING OSTEOARTHRITIS. ADDITIONALLY, EXCESS ADIPOSE TISSUE PRODUCES INFLAMMATORY MEDIATORS THAT CAN EXACERBATE JOINT INFLAMMATION, WORSENING CONDITIONS LIKE RHEUMATOID ARTHRITIS. RECENT STUDIES INDICATE THAT INDIVIDUALS WITH OBSESITY EXPERIENCE HIGHER DISEASE ACTIVITY AND LOWER QUALITY OF LIFE DUE TO INCREASED PAIN AND GENERALIZED INFLAMMATION. OBSESITY IS A SIGNIFICANT RISK FACTOR FOR LYMPHEDEMA, AS EXCESS FAT CAN COMPRESS LYMPHATIC VESSELS, IMPAIRING PROPER LYMPH DRAINAGE. ADDITIONALLY, CHRONIC INFLAMMATION ASSOCIATED WITH OBSESITY CAN DAMAGE THE LYMPHATIC SYSTEM, INCREASING SUSCEPTIBILITY TO LYMPHEDEMA. STUDIES HAVE SHOWN THAT PATIENTS WITH A BODY MASS INDEX (BMI) OVER 30 HAVE AN INCREASED RISK OF DEVELOPING THIS CONDITION. THE IMPLEMENTATION OF COMPREHENSIVE THERAPEUTIC STRATEGIES INCLUDING PHARMACOLOGICAL, SURGICAL, AND REHABILITATIVE INTERVENTIONS IS ESSENTIAL TO EFFECTIVELY ADDRESS THESE COMPLICATIONS AND IMPROVE PATIENTS' QUALITY OF LIFE.

- 15H30
OVERVIEW OF OBJECTIVES AND TOPICS.
- 15H35
OBSESITY, REHABILITATION: DIAGNOSIS AND MORPHOFUNCTIONAL ASSESSMENT.
- 15H45
THE IMPACT OF OBSESITY ON REHABILITATION PATHOLOGIES: A COMPREHENSIVE APPROACH.
- 15H55
CLINICAL CASE: THERAPEUTIC MANAGEMENT OF OBSESITY IN PATIENTS WITH LYMPHEDEMA.
- 16H10
OC ID 484 REHABILITATION AND MOTHERHOOD: A CHALLENGING PUBLIC HEALTH ISSUE. DANA CLAUDIA THOMPSON
- 16H15
OC ID 42 FOOT PRESSURE CHANGES DURING PREGNANCY AND ASSOCIATION WITH LOW BACK PAIN - A PROSPECTIVE COHORT STUDY. INDULEKHA SHIBU
- 16H20
OC ID 205 LYMPHEDEMA MANAGEMENT: A SURVEY OF MOROCCAN PHYSICIANS' KNOWLEDGE. ZINEB RAFFA
- 16H25
DISCUSSION

16:30 - 17:00

BRERAK

REHABILITATION

NEUROLOGICAL. MOTION. CARDIAC

NEURO-MSX

TRANSCRANIAL MAGNETIC STIMULATOR

- transcranial and peripheral magnetic stimulation
- stimulation frequency — up to 150 Hz
- advanced liquid cooling technology
- flexible software for smooth performance



STEADYS

SYSTEM FOR MOTION ANALYSIS AND TRAINING

- all-in-one: motion assessment and training system
- 10 minutes for comprehensive clinical gait analysis
- 3D kinematics and dynamic EMG recording by one sensor
- targeted rehabilitation using biofeedback



MULTITRAINER

SYSTEM FOR CARDIAC REHABILITATION WITH ECG CONTROL

- individual training plan for each patient
- automatic HR control within the specified range
- control of averaged QRST, ST segment, SpO₂ and BP
- supports different models of ergometers and treadmills



INNOVATIVE APPROACHES IN STROKE REHABILITATION: BENEFITS AND PERSPECTIVES

ID 90
TOPIC NEUROREHABILITATION
SPEAKERS SANAZ POURNAJAF (ITALY)
ALESSANDRO GIUSTINI (ITALY)
THIERRY LEJUENE (BELGIUM)
RAJIV REEBYE (CANADA)
SARA LAXE (SPAIN)

CHAIR MARCO FRANCESCHINI, FRANCESCA GIMIGLIANO
ATTENDEES

THIS SESSION WILL EXPLORE GROUNDBREAKING ADVANCEMENTS IN STROKE REHABILITATION, FOCUSING ON INNOVATIVE APPROACHES THAT ENHANCE FUNCTIONAL RECOVERY AND QUALITY OF LIFE. DISCUSSIONS WILL COVER THE INTEGRATION OF TECHNOLOGY INTO PHYSICAL AND REHABILITATION MEDICINE (PRM), ADDRESSING ITS ROLE IN EDUCATION, CLINICAL APPLICATIONS, AND GLOBAL REHABILITATION STRATEGIES. THE SESSION WILL ALSO EXAMINE THE CLINICAL APPLICATION OF VIRTUAL REALITY (VR) IN STROKE RECOVERY, EVALUATING ITS POTENTIAL AS A REHABILITATION TOOL. ADDITIONALLY, EMERGING REHABILITATION TECHNOLOGIES WILL BE HIGHLIGHTED, INCLUDING IMMERSIVE VR ADAPTATIONS OF STANDARDIZED DEXTERITY TESTS, SENSOR-BASED FEEDBACK SYSTEMS TO PROMOTE UPPER LIMB ACTIVITY, AND NOVEL TREATMENT STRATEGIES. RESULTS FROM A MULTICENTER RANDOMIZED CONTROLLED TRIAL ON EARLY EXOSKELETON ASSISTED THERAPY WILL BE PRESENTED, DEMONSTRATING ITS IMPACT ON UPPER LIMB MOTOR RECOVERY IN THE SUBACUTE PHASE. FINALLY, MULTIMODAL THERAPY AND THE USE OF ADJUNCTIVE THERAPIES TO BOTULINUM TOXIN A (BONT-A) IN SPASTICITY MANAGEMENT WILL BE DISCUSSED, ALONG WITH STRATEGIES FOR INTEGRATING THESE ADVANCEMENTS INTO EVERYDAY CLINICAL PRACTICE. DESIGNED FOR CLINICIANS, RESEARCHERS, AND ENGINEERS, THIS SESSION OFFERS VALUABLE INSIGHTS INTO THE LATEST INNOVATIONS DRIVING STROKE REHABILITATION FORWARD.

- 17H00
INTEGRATING TECHNOLOGY IN PRM: EDUCATION, CLINICAL APPLICATIONS, AND GLOBAL PERSPECTIVES. ALESSANDRO GIUSTINI
- 17H15
VIRTUAL REALITY IN STROKE REHABILITATION: A CLINICAL PERSPECTIVE. SARA LAXE
- 17H30
CONCURRENT VALIDITY OF AN IMMERSIVE VR VERSION OF THE BOX AND BLOCK TEST. THIERRY LEJUENE
- 17H45
MULTIMODAL THERAPY AND USE OF ADJUNCTIVE THERAPIES TO BONT-A IN SPASTICITY MANAGEMENT. RAJIV REEBYE
- 18H00
EARLY EXOSKELETON-ASSISTED THERAPY FOR UPPER LIMB RECOVERY: CLINICAL RESULTS AND BIOMECHANICAL OBSERVATIONS. SANAZ POURNAJAF
- 18H15
OC ID 999 EFFICACY AND SAFETY OF BOTULINUM TOXIN TREATMENT IN THE EARLY MANAGEMENT OF SPASTICITY IN PATIENTS WITH SPINAL CORD INJURY (SCI). SERENA VICENZA CAPOBIANCO
- 18H20
CO ID 631 UPPER LIMB KINEMATICS IN IMMERSIVE VIRTUAL REALITY: COMPARISON BETWEEN STROKE AND HEALTHY SUBJECTS DURING A BOX AND BLOCK TEST WITH CONTROLLERS AND HAND TRACKING. THÉRÈSE NTABUHASHE BIBENTYO
- 18H25
OC ID186 GROWTH IN SIMULATED MICROGRAVITY MODIFIES 3D GENOME ORGANIZATION IN DIFFERENTIATING HUMAN MOTOR NEURONS. HONG CHEN
- 18H30
OC ID 582 REPETITIVE PERIPHERAL MAGNETIC STIMULATION (RPMS) TO RECOVER BALANCE FUNCTION IN HEMIPARETIC PATIENTS. EVGENIA TSVETKOVA
- 18H35
OC ID 417 PERSONALIZATION OF POSTURAL REHABILITATION STRATEGIES IN MULTIPLE SCLEROSIS USING ARTIFICIAL INTELLIGENCE: A MACHINE LEARNING APPROACH. DOUA EL OUAZZANI
- 18H40
DISCUSSION AND SUMMARY OF KEY INSIGHTS AND FUTURE DIRECTIONS.

EXPLORING CULTURAL DIFFERENCES AND STIGMA IN THE DIAGNOSIS AND TREATMENT OF CEREBRAL PALSY (CP)

ID 75
TOPIC NEUROREHABILITATION
SPEAKERS HANA AZIZI (USA)
HEAKYUNG KIM (USA)
NATHAN ROSENBERG (USA)
RAJASHREE SRINIVASAN (USA)

CHAIR HANA AZIZI
ATTENDEES 60

THIS INTERACTIVE WORKSHOP AIMS TO EXPLORE THE CULTURAL PERCEPTIONS AND STIGMA SURROUNDING THE DIAGNOSIS OF CEREBRAL PALSY (CP) IN CHILDREN, FOCUSING ON HOW FAMILIES FROM DIVERSE BACKGROUNDS RESPOND TO AND COPE WITH THIS DIAGNOSIS. THE SESSION WILL PROVIDE HEALTHCARE PROFESSIONALS WITH INSIGHTS INTO CULTURAL SENSITIVITY AND EFFECTIVE COMMUNICATION STRATEGIES WHEN DELIVERING A CP DIAGNOSIS. THROUGH INTERACTIVE DISCUSSIONS AND CASE STUDIES, PARTICIPANTS WILL LEARN HOW TO NAVIGATE CULTURAL BARRIERS, REDUCE STIGMA, FOSTER EMPATHY WHEN WORKING WITH FAMILIES FROM DIVERSE CULTURAL BACKGROUNDS AND PROMOTE ACCEPTANCE, ULTIMATELY ENHANCING REHABILITATION OUTCOMES. GIVEN THE CONGRESS THEME, *GLOBAL SOLUTIONS IN REHABILITATION: (RE)VISITING AFRICA BEFORE 2030*, THIS WORKSHOP IS PARTICULARLY RELEVANT AS IT ADDRESSES CULTURAL FACTORS INFLUENCING HEALTHCARE DELIVERY IN VARIOUS REGIONS, INCLUDING AFRICA. IT SUPPORTS THE GOAL OF IMPROVING GLOBAL REHABILITATION STRATEGIES BY FOSTERING CULTURALLY COMPETENT CARE.

17H00

WELCOME AND OVERVIEW OF OBJECTIVES.

17H10

CULTURAL PERCEPTIONS AND STIGMA

- A. BRIEF DISCUSSION ON CP AND ITS GLOBAL IMPACT.
- B. THE IMPORTANCE OF CULTURAL COMPETENCE IN REHABILITATION: OVERVIEW OF CULTURAL ATTITUDES TOWARD DISABILITY IN DIFFERENT REGIONS. THE ROLE OF STIGMA IN DELAYING DIAGNOSIS AND TREATMENT.
- C. FAMILY DYNAMICS AND SOCIETAL PRESSURES IN ACCEPTING A CP DIAGNOSIS.

17H30

INTERACTIVE SESSION: GROUP ACTIVITIES

- A. DELIVERING A CP DIAGNOSIS IN DIFFERENT CULTURAL SETTINGS.
- B. STIGMA REDUCTION STRATEGIES.
- C. DEVELOPING PERSONALIZED COMMUNICATION TECHNIQUES.

18H00

GROUP PRESENTATIONS

18H30

Q&A AND WRAP-UP

- A. SUMMARY OF KEY TAKEAWAYS.
- B. OPEN DISCUSSION FOR SHARED EXPERIENCES AND BEST PRACTICES.
- C. CLOSING REMARKS AND FINAL THOUGHTS.

17:00 - 19:00

ORANGERAIE

SESSION

CARDIOVASCULAR AND PULMONARY REHABILITATION FOR INDIVIDUALS WITH OTHER DISABILITIES: OPPORTUNITIES TO ENHANCE OUTCOMES

ID 67

TOPIC CARDIOPULMONARY

SPEAKERS MATTHEW BARTELS (USA)
AREERAT SUPUTTITADA (THAILAND)
JOHNATHAN WHITESON (USA)
GEROLD EBENBICHLER (AUSTRIA)

CHAIR MATTHEW BARTELS

AS THE POPULATION TREATED IN REHABILITATION SETTINGS BECOMES OLDER WITH INCREASING MEDICAL COMPLEXITY, IT IS IMPORTANT FOR REHABILITATION PRACTITIONERS TO BE ABLE TO TREAT INDIVIDUALS WITH MORE THAN ONE DISABILITY. AMONG THE MOST COMMON CONDITIONS TO PRESENT WITH DISABILITY ARE CARDIOVASCULAR AND PULMONARY DISEASE. IT IS ESSENTIAL FOR OUR REHABILITATION PROGRAMS TO PROVIDE CARE FOR INDIVIDUALS WITH CARDIOVASCULAR AND PULMONARY DISEASE AND ANOTHER DISABILITY. THIS SESSION WILL PRESENT SOLUTIONS FROM AROUND THE WORLD TO PROVIDING TWO TYPES OF ADAPTATIONS FOR MULTI DISABLED INDIVIDUALS.

FIRST, THE ADAPTATIONS AND CREATION OF SAFE PROGRAMS OF REHABILITATION FOR PEOPLE WITH BRAIN INJURY AND STROKE, SPINAL CORD INJURY, LIMB LOSS, OR MUSCULOSKELETAL ISSUES WHO ALSO HAVE CARDIOVASCULAR AND PULMONARY CONDITIONS. SECOND, THERE WILL BE A DISCUSSION OF ADAPTING CARDIOVASCULAR AND PULMONARY REHABILITATION PROGRAMS TO ALLOW FOR TREATMENT OF OUR PATIENTS WITH NEUROLOGICAL, SPINAL CORD INJURIES, MUSCULOSKELETAL ISSUES WHO DEVELOP CARDIOVASCULAR OR PULMONARY DISEASE THAT WILL BENEFIT FROM REHABILITATION. THIS SESSION IS DESIGNED FOR PRACTITIONERS OF ALL SKILL AND EXPERIENCE LEVELS.

IT WILL START WITH AN OVERVIEW OF THE EPIDEMIOLOGY OF CARDIOVASCULAR AND PULMONARY DISEASE AS WELL AS THE PREVALENCE AND ISSUES OF INDIVIDUALS WHO PRESENT WITH MORE THAN ONE DISABILITY INCLUDING THEIR CARDIOVASCULAR AND PULMONARY DISEASE. SPECIAL ATTENTION WILL BE GIVEN TO BOTH SAFETY AND ALSO TO THE MORBIDITY AND MORTALITY BENEFITS OF INCORPORATION OF CARDIOVASCULAR AND PULMONARY REHABILITATION IN THE PROGRAMS OF PATIENT RECOVERY. THE SESSION WILL BE DIVIDED INTO A LECTURES GIVING A SUMMARY OF CARDIOVASCULAR AND PULMONARY DISEASE IN VARIOUS COMMUNITIES. THIS WILL BE FOLLOWED BY LECTURES ON

- 1) TREATING PATIENTS WITH PRIMARY DISABILITY FOR CARDIOVASCULAR AND PULMONARY DISEASE
- 2) APPLICATION OF CARDIOVASCULAR AND PULMONARY REHABILITATION PRINCIPLES IN THE REHABILITATION OF PATIENTS WITH NEW PRIMARY NEUROLOGICAL OR MUSCULOSKELETAL DISABILITY WHO HAVE CARDIOVASCULAR AND PULMONARY COMORBIDITY.

THE SESSION WILL CONCLUDE WITH A ROUNDTABLE FOR A QUESTION AND ANSWER PERIOD TO ALLOW PARTICIPANTS TO EXPLORE OPTIONS FOR THEIR UNIQUE PATIENT POPULATIONS. OUR LECTURERS ARE FROM ALL AREAS OF THE WORLD WHO ARE EXPERTS IN CARDIOVASCULAR AND PULMONARY REHABILITATION AND ARE FAMILIAR WITH APPLICATION OF THESE REHABILITATION PRINCIPLES IN A VARIETY OF SETTINGS.

17H00

OVERVIEW OF SESSION OBJECTIVES AND TOPICS.

17H05

OVERVIEW OF THE PREVALENCE AND EPIDEMIOLOGY OF CARDIOVASCULAR AND PULMONARY CONDITIONS WORLDWIDE, AS WELL AS THE PREVALENCE OF COMORBIDITY OF CARDIOVASCULAR AND PULMONARY DISEASE AND OTHER DISABLING CONDITIONS.

17H20

DISCUSSION OF APPLICATION OF CARDIOVASCULAR AND PULMONARY REHABILITATION PRINCIPLES ON THE INPATIENT REHABILITATION UNIT FOR PATIENTS WITH STROKE, SPINAL CORD INJURY, ORTHOPEDIC INJURIES AND OTHER CONDITIONS.

17H40

APPLICATION OF CARDIOVASCULAR AND PULMONARY REHABILITATION PRINCIPLES ON THE OUTPATIENT SETTING FOR PATIENTS WITH NEUROLOGIC, MUSCULOSKELETAL, PAIN, AND OTHER CONDITIONS.

18H00

HOW TO APPLY REHABILITATION PRINCIPALS TO OUTPATIENT CARDIOVASCULAR AND PULMONARY REHABILITATION PROGRAMS IN ORDER TO ENHANCE ACCESS FOR PATIENTS WITH PRIMARY DISABILITIES WHO NOW NEED CARDIOVASCULAR AND PULMONARY REHABILITATION FOR NEW CARDIOVASCULAR AND PULMONARY DISEASE.

18H25

OC ID 146 STUDY ON FIRST AID AND CARDIOPULMONARY RESUSCITATION (CPR) KNOWLEDGE AMONG THERAPISTS IN THE REHABILITATION GYM. ARIÀ CAMPS

18H30

OC ID 595 COGNITIVE-BEHAVIORAL CARDIAC REHABILITATION REDUCES CARDIAC ANXIETY FOR UP TO THREE MONTHS AFTER COMPLETION: A RANDOMIZED CONTROLLED TRIAL. MATTHIAS BETHGE

18H35

OC ID 222 PHYSIO ADVENTURE: GAMIFIED THERAPY SYSTEM FOR CARDIAC REHABILITATION (PATENT APPLIED). SEYYADA TAHNIAT ALI

18H45

OPEN DISCUSSION WITH OPPORTUNITY FOR PARTICIPANTS TO ASK QUESTIONS OF THE SPEAKERS, AND SUMMARY.

17:00 - 19:00

ROSERAIE

SHORT WORKSHOP

ELECTRODIAGNOSIS AND DIAGNOSTIC NERVE BLOCKS IN LOWER EXTREMITY SPASTICITY ASSESSMENT AND TREATMENT. FROM TOXIN TO CRYONEUROLYSIS. FROM EGYPT TO CANADA

ID 7

TOPIC SPASTICITY

SPEAKERS PAUL WINSTON (CANADA)
NAGLAA GADALLAH (EGYPT)
EVE BOISSONNAULT (CANADA)
MAHDIS HASHEMI (CANADA)

CHAIR PAUL WINSTO

ATTENDEES 60

EXPERTS FROM EGYPT AND CANADA WILL PRESENT.

1. THE USE OF ELECTROPHYSIOLOGICAL MEASUREMENTS IN LOWER EXTREMITY SPASTICITY.
2. THE USE OF DIAGNOSTIC NERVE BOCKS IN MUSCLE SELECTION IN SPASTICITY.
3. THE USE OF THE -REFLEX TO MEASURE THE EFFECTIVES OF CRYONEUROLYSIS IN TIBIAL NERVE CRYONEUROLYSIS ON THE SPASTIC EQUINUS FOOT.
4. HAND ON ULTRASOUND DEMONSTRATION.

17H00

ELECTROPHYSIOLOGY IN LOWER EXTREMITY SPASTICITY ASSESSMENT. NAGLAA GADALLAH

17H25

QUESTIONS AND DEMONSTRATION

17H30

DIAGNOSTIC NERVE BLOCKS AND CRYONEUROLYSIS FOR THE LOWER EXTREMITY. PAUL WINSTON

17H55

QUESTIONS AND DEMONSTRATION

18H00

ELECTROPHYSIOLOGICAL CHANGES AFTER TIBIAL NERVE CRYONEUROLYSIS FOR THE SPASTIC EQUINOVARUS FOOT. MAHDIS HASHEMI

18H15

QUESTIONS AND DEMONSTRATION.

18H20

ULTRASOUND DEMONSTRATION OF DIAGNOSTIC NERVE BLOCKS HANDS ON. SIMULTANEOUS WITH EMG MACHINE STATION. EVE BOISSONNAULT

17:00 - 18:00

PALMERAIE

SESSION

FROM EARTHQUAKES TO WILDFIRES: A GLOBAL PERSPECTIVE ON DISASTER REHABILITATION

ID 48

TOPIC COMMUNITY

SPEAKERS FAROOQ AZAM RATHORE (PAKISTAN)
FATEMA NAWAZ (BANGLADESH)
MAYA NEWMAN (USA)
ALAEIDIN ELMALIK (AUSTRALIA)

CHAIR FAROOQ AZAM RATHORE

NATURAL DISASTERS SUCH AS EARTHQUAKES, FLOODS, AND WILDFIRES, AS WELL AS HUMAN-MADE DISASTERS LIKE CIVIL WARS, RESULT IN A HIGH BURDEN OF TRAUMATIC INJURIES, INCLUDING SPINAL CORD INJURIES (SCI), BRAIN INJURIES, AMPUTATIONS, FRACTURES, AND PERIPHERAL NERVE INJURIES.

THE IMMEDIATE AFTERMATH OF THESE EVENTS REQUIRES A COORDINATED APPROACH TO REHABILITATION THAT EXTENDS FROM EMERGENCY RESPONSE TO LONG-TERM RECOVERY. THIS WORKSHOP WILL EXPLORE THE CHALLENGES AND SOLUTIONS IN DISASTER REHABILITATION BY ANALYZING FOUR MAJOR DISASTER EVENTS: THE 2005 PAKISTAN EARTHQUAKE, BANGLADESH FLOODS, 2024 CALIFORNIA WILDFIRES, AND THE SUDAN CIVIL WAR CRISIS.

17H00

INTRODUCTION. MARIA PAUL

17H05

PMR MEDICAL RESPONSE TO THE 2024 BANGLADESH FLOODS: WHAT WE LEARNED? FATEMA NAWAZ

17H15

IMPACT OF CLIMATE CHANGE ON PEOPLE WITH THE LIVED EXPERIENCE OF DISABILITY: BASELINE PERSPECTIVES FROM 2024 COMPARED TO 2025 FOLLOWING THE LOS ANGELES FIRES. MAYA NEWMAN

17H25

SPINAL CORD INJURY MANAGEMENT IN DISASTER SETTINGS: LESSONS FROM THE 2005 PAKISTAN EARTHQUAKE. FAROOQ AZAM RATHORE

17H35

PRM IN SUDAN; CRUISING THROUGH AND SURVIVING DISASTERS - COVID AND WAR. ALAEIDIN ELMALIK

17H45

DISCUSSION AND Q&A.

17:00 - 19:00

ARGANIER

SHORT WORKSHOP

ADAPTING, ADVANCING, ACHIEVING: NAMIBIA AS A MODEL FOR AFRICAN REHABILITATION MEDICINE

ID 136

TOPIC COMMUNITY

SPEAKERS NIÑA CARMELA TAMAYO (USA)
LETTIE LANGENDORF (NAMIBIA)
LOUISA BLAAUW-DE WIT (NAMIBIA)
LAURENIE LOUISSAINT (USA)
JINA LIBBY (USA)

CHAIR NIÑA CARMELA TAMAYO

ATTENDEES 30

OBJECTIVES: UNDERSTAND THE CURRENT LANDSCAPE OF PRM IN NAMIBIA – PROVIDE AN OVERVIEW OF THE PUBLIC AND PRIVATE REHABILITATION SECTORS, INCLUDING WORKFORCE CAPACITY, INPATIENT AND OUTPATIENT CARE MODELS, AND EXISTING PROGRAMS WITH A SPECIAL FOCUS ON SPINALIS NAMIBIA AND LADY POHAMBA HOSPITAL.

EXPLORE STAKEHOLDER PARTNERSHIPS AND COLLABORATIONS – SHOWCASE THE IMPACT OF PARTNERSHIPS WITH GOVERNMENTAL ORGANIZATIONS SUCH AS MVA FUND, UNAM AND INTERNATIONAL INSTITUTIONS IN SHAPING REHABILITATION SERVICES IN NAMIBIA. EXAMINE KEY CHALLENGES AND POTENTIAL SOLUTIONS – IDENTIFY BARRIERS TO EFFECTIVE REHABILITATION CARE IN BOTH SECTORS AND EXPLORE INNOVATIVE SOLUTIONS TO IMPROVE SERVICE DELIVERY AND PATIENT OUTCOMES.

HIGHLIGHT WORKFORCE DEVELOPMENT AND TRAINING NEEDS – DISCUSS THE ROLES OF VARIOUS REHABILITATION PROFESSIONALS, CURRENT TRAINING PROGRAMS, AND STRATEGIES FOR EXPANDING EDUCATION AND CAPACITY IN REHABILITATION MEDICINE. DISCUSS FUTURE DIRECTIONS AND SUSTAINABILITY – OUTLINE STRATEGIC PLANS FOR THE GROWTH OF REHABILITATION PROGRAMS OVER THE NEXT 3–5 YEARS, INCLUDING POLICY RECOMMENDATIONS, WORKFORCE EXPANSION, AND IMPROVED ACCESS TO REHABILITATION SERVICES THROUGHOUT NAMIBIA.

17H00

THE CURRENT STATE OF PRM IN NAMIBIA. NIÑA CARMELA TAMAYO

17H30

PRM IN NAMIBIA: A PUBLIC SECTOR OVERVIEW. LETTIE LANGENDORF

18H00

PRM IN NAMIBIA: A PRIVATE SECTOR OVERVIEW. LOUISA BLAAUW-DE WIT

18H30

NAMIBIAN MEDICAL MISSION + FUTURE DIRECTIONS AND PLANS. LAURENIE LOUISSAINT, JINA LIBBY

18H40

TROUBLESHOOTING PRM IN NAMIBIA: AN INTERACTIVE GROUP SESSION.



PROGRAM DAY 6
FRIDAY 07/11/2025



ARTIFICIAL INTELLIGENCE IN REHABILITATION MEDICINE: CURRENT APPLICATIONS, CHALLENGES AND FUTURE DIRECTIONS

TOPIC TECHNOLOGY & ROBOTICS
SPEAKERS FAROOQ RATHORE (PAKISTAN)
CHAIR LMIDMANI FATIMA, FRANCESCA GIMIGLIANO

ARTIFICIAL INTELLIGENCE (AI) IS TRANSFORMING REHABILITATION MEDICINE BY ENHANCING PATIENT ASSESSMENT, PERSONALIZING TREATMENT PLANS, AND IMPROVING CLINICAL DECISION-MAKING.

THIS KEYNOTE WILL EXPLORE CURRENT AI APPLICATIONS IN REHABILITATION, FROM PREDICTIVE ANALYTICS TO ROBOTIC-ASSISTED THERAPY, AND ADDRESS CHALLENGES SUCH AS DATA PRIVACY, ETHICAL CONSIDERATIONS, AND INTEGRATION INTO CLINICAL WORKFLOWS.

DRAWING ON REAL-WORLD EXAMPLES AND THE LATEST EVIDENCE, IT WILL HIGHLIGHT BOTH THE OPPORTUNITIES AND LIMITATIONS OF AI IN OPTIMIZING PATIENT OUTCOMES. THE SESSION WILL CONCLUDE WITH FUTURE DIRECTIONS FOR AI-DRIVEN INNOVATIONS IN REHABILITATION CARE, EMPHASIZING THE NEED FOR ETHICAL, PATIENT-CENTERED APPROACHES AND AN INCLUSIVE APPROACH THAT DOES NOT LEAVE THOSE WITH LIMITED RESOURCES BEHIND.

ISPRM ACADEMIC FORUM: ADVANCING ACADEMIC LEADERSHIP IN PHYSICAL AND REHABILITATION MEDICINE WORLDWIDE

ID 37
TOPIC EDUCATION & TRAINING
SPEAKERS FRANCESCA GIMIGLIANO (ITALY)
STEFANO NEGRINI (ITALY)
SINFORIAN KAMBOU (CAMEROUN)
RAJU DAKHAL (NEPAL)
CHAIR FRANCESCA GIMIGLIANO, GEROLD STUCKI

THE PRIMARY OBJECTIVE OF THIS SESSION IS TO ADDRESS THE NEED TO STRENGTHEN ACADEMIC CAPACITY IN PHYSICAL AND REHABILITATION MEDICINE (PRM) WORLDWIDE. THIS IS IN LIGHT OF THE RESOLUTION ON STRENGTHENING REHABILITATION IN HEALTH SYSTEMS, WHICH URGES MEMBER STATES "TO DEVELOP STRONG MULTIDISCIPLINARY REHABILITATION SKILLS SUITABLE TO THE COUNTRY CONTEXT, INCLUDING FOR ALL RELEVANT HEALTH WORKERS; TO STRENGTHEN CAPACITY FOR ANALYSIS AND PROGNOSIS OF WORKFORCE SHORTAGES; TO PROMOTE THE DEVELOPMENT OF INITIAL AND CONTINUOUS TRAINING FOR PROFESSIONALS AND STAFF WORKING IN REHABILITATION SERVICES; AND TO RECOGNIZE AND RESPOND TO DIFFERENT TYPES OF REHABILITATION NEEDS, SUCH AS THOSE RELATED TO PHYSICAL, MENTAL, SOCIAL, AND VOCATIONAL FUNCTIONING, INCLUDING THE INTEGRATION OF REHABILITATION IN THE EARLY TRAINING OF HEALTH PROFESSIONALS, SO THAT REHABILITATION NEEDS CAN BE IDENTIFIED AT ALL LEVELS OF CARE." IN THE FIRST LECTURE, "ISPRM ACADEMIC FORUM: WHY THERE'S THE NEED TO ADVOCATE FOR ACADEMIC LEADERSHIP IN PRM WORLDWIDE," WE AIM TO UNDERSTAND THE CURRENT GLOBAL LANDSCAPE OF ACADEMIC LEADERSHIP IN PRM, IDENTIFY EXISTING GAPS, EXPLORE THE IMPORTANCE OF STRONG ACADEMIC LEADERSHIP FOR ADVANCING THE FIELD OF PRM AND IMPROVING PATIENT OUTCOMES ON A GLOBAL SCALE, AND RECOGNIZE THE ROLES OF VARIOUS STAKEHOLDERS IN PROMOTING ACADEMIC LEADERSHIP AND THE COLLABORATIVE EFFORTS NEEDED TO EFFECT CHANGE. IN THE SUBSEQUENT LECTURES, WE WILL EXAMINE THE SITUATION IN DIFFERENT GEOGRAPHIC REGIONS AND REPORT ON MODELS FOR THE DEVELOPMENT OF ACADEMIC PRM PROGRAMS.

- 9H00
ISPRM ACADEMIC FORUM: WHY THERE'S THE NEED OF ADVOCATE FOR ACADEMIC LEADERSHIP IN PRM WORLDWIDE. FRANCESCA GIMIGLIANO
- 9H15
ADVANCING ACADEMIC LEADERSHIP IN PRM IN THE AMERICAS. WALTER FRONTERA
- 9H30
ADVANCING ACADEMIC LEADERSHIP IN PRM IN EUROPE: INITIATING THE UNIPRM. STEFANO NEGRINI
- 9H45
ADVANCING ACADEMIC LEADERSHIP IN PRM IN AFRICA. NANDJUI MANSÉ BÉATRICE, TOUSSAINT GODONOU KPADONOU
- 10H00
ADVANCING ACADEMIC LEADERSHIP IN PRM IN AFRICA: THE CASE OF CAMEROON. SINFORIAN KAMBOU
- 10H10
ADVANCING ACADEMIC LEADERSHIP IN ASIA. NABILA NAJAM SOOMRO
- 10H20
ISPRM DISTINGUISHED RESEARCHER AWARDEE 2025 - SENIOR. MASAHIKO MUKAINO
- 10H30
ISPRM DISTINGUISHED RESEARCHER AWARDEE 2025 - JUNIOR. ROGER DE LA CERNA
- 10H35
ISPRM DISTINGUISHED RESEARCHER AWARDEE 2025 - JUNIOR. RADHA KORUPOLU
- 10H40
OC ID 747 REHABILITATING SOFT SKILLS: DESIGNING A NOVEL CURRICULUM FOR PR&M RESIDENTS. OMAR EL AKADI
- 10H45
DISCUSSION

09:00 - 11:00

OLIVERAIE
SHORT WORKSHOP



THINKING OUTSIDE THE BOX FOR MULTIMODAL TREATMENT APPROACH TO MANAGING MULTIFOCAL LOWER LIMB SPASTICITY

ID 87

TOPIC SPASTICITY

SPEAKERS KAREN ETHANS (CANADA)
CINDY IVANHOE (CANADA)
COLLEEN O'CONNELL (CANADA)

CHAIR KAREN ETHANS

ATTENDEES 50

THIS WORKSHOP WILL BE PRESENTED BY 3 EXPERIENCED PHYSIATRISTS, EACH WITH DECADES OF EXPERIENCE TREATING SPASTICITY IN PEOPLE OF VARIOUS ETIOLOGIES. FOCUS WILL BE OF THE LOWER LIMB AS IT IS MORE NEGLECTED TYPICALLY IN INTERNATIONAL DISCUSSIONS. 3-4 CASE REPORTS WILL BE DISCUSSED, WITH PRESENTATION AND TREATMENT NEEDS CHANGING AS THE PATIENT COURSE EVOLVES. TYPICALLY, DISCUSSIONS AROUND LOWER LIMB SPASTICITY ARE FOCUSED ON CHEMODENERVATION TREATMENT IN THE DISTAL LOWER LIMB FOR STROKE, SEGMENTAL SPASTICITY TREATMENT WITH INTRATHECAL BACLOFEN FOR UPPER MOTOR NEURON DISEASES SUCH AS SPINAL CORD INJURY OR MULTIPLE SCLEROSIS, OR GENERALIZED SPASTICITY THERAPY WITH ORAL AGENTS. IT IS RARE TO HAVE WORKSHOPS OR PRESENTATIONS ADDRESSING THE PATIENT WITH MULTIFOCAL SPASTICITY OF LOWER LIMBS, INCLUDING THE PROXIMAL LOWER LIMB, IN THE POPULATIONS OTHER THAN JUST STROKE.

DISCUSSION WILL BE INTERACTIVE, ENCOURAGING PARTICIPATION FROM THE AUDIENCE MEMBERS, AS TO WHAT TREATMENTS TO CONSIDER AND WHY. ASSESSMENT WILL BE DISCUSSED, INCLUDING GOALS OF THERAPY, NOT JUST AMBULATION BUT OTHER GOALS SUCH AS DRESSING, CATHETERIZING, HYGIENE ETC, WITH MEASURABLE TARGETS SUCH AS TARDIEU SCALE FOR THE HIPS, AND MODIFIED CARER BURDEN SCALE. USE OF BOTULINUM TOXIN WILL BE DISCUSSED ESPECIALLY IN THE PROXIMAL LOWER LIMB MUSCLES, WHERE IT IS RARELY DISCUSSED AT SUCH MEETINGS AS THERE HAS BEEN LITTLE RESEARCH IN THIS AREA.

CONSIDERATION AS TO WHY TO TARGET MUSCLES SUCH AS TENSOR FASCIA LATA, RECTUS FEMORIS, AND SARTORIUS ARE EXAMPLES AND WHAT TO BE CAUTIOUS OF IN THESE AREAS. AVOIDING PITFALLS IN THE ANKLE AND FOOT WILL BE DISCUSSED, INCLUDING RECOGNIZING TENODESIS AND NOT OVER DIAGNOSING SPASTICITY OF EXTENSOR HALLUCIS LONGUS AND UNDERDIAGNOSING SPASTICITY OF FLEXOR DIGITORUM LONGUS. BIOMECHANICS WILL BE TOUCHED ON, WITH RECOGNITION OF ALL ANKLE INVERTERS WHEN TREATING INVERSION, AND WHY THE ANKLE IS SO UNSTABLE INTO INVERSION WHEN PLANTAR FLEXION TONE IS PRESENT. PHENOL NEUROLYSIS WILL BE DISCUSSED IN SOME DETAIL, INCLUDING THE HISTORY, AND HOW TO PICK TARGETS FOR PHENOL NEUROLYSIS, INCLUDING MOTOR NERVES, MOTOR BRANCHES OF NERVES, AND MOTOR POINTS, WITH PRACTICAL EXPLANATIONS AND VIDEO DEMONSTRATIONS OF USE AND HOW TO INCORPORATE ITS USE IN PEOPLE WITH MULTIFOCAL LOWER LIMB SPASTICITY FOR BOTULINUM TOXIN SPARING OF LARGE DOSES, OR IN THOSE INTOLERANT OF BOTULINUM TOXIN, WITH CASES PRESENTED. BRACING OF THE LOWER LIMB WILL BE CONSIDERED, AND CASES WILL ALSO INCLUDE PATIENTS THAT HAVE GONE ON TO SURGICAL INTERVENTION AND WHY, AS WELL AS INTRATHECAL PUMP MANAGEMENT.

USING MULTIMODAL THERAPIES TO ADDRESS MULTIFOCAL SPASTICITY OF THE LOWER LIMBS IN VARIOUS POPULATIONS WITH UPPER MOTOR NEURON DISORDER IS ESSENTIAL FOR THE PHYSIATRIST SPECIALIZING IN SPASTICITY MANAGEMENT, AND EACH TOOL IN THE TOOLBOX NEEDS TO BE INDIVIDUALIZED FOR EACH PATIENT.

9H00

INTRODUCTION & OBJECTIVES.

9H10

CASE SERIES PART 1: ASSESSMENT & GOAL SETTING.

9H40

MULTIMODAL THERAPIES: FOCAL & PROXIMAL INTERVENTIONS.

10H10

EXPANDING THE TOOLBOX: NEUROLYSIS, BRACING & SURGICAL OPTIONS.

10H40

CASE SERIES PART 2: EVOLVING GOALS.

10H55

CLOSING REMARKS.

09:00 - 11:00

ORANGERAIE
SHORT WORKSHOP



ULTRASOUND IDENTIFICATION OF NECK MUSCLES FOR DYSTONIA/INJECTIONS

ID 72

TOPIC MUSCULOSKELETAL

SPEAKERS FAHIM ANWAR (UK)

CHAIR FAHIM ANWAR

ATTENDEES 60

THIS HANDS-ON WORKSHOP FOCUSES ON THE ANATOMY AND ULTRASOUND IDENTIFICATION OF NECK MUSCLES, SPECIFICALLY FOR USE IN THE MANAGEMENT OF DYSTONIA AND THERAPEUTIC INJECTIONS. PARTICIPANTS WILL GAIN A DEEPER UNDERSTANDING OF MUSCLE ANATOMY, SONOGRAPHIC TECHNIQUES, AND CLINICAL APPLICATIONS FOR PRECISE TARGETING IN DYSTONIA TREATMENT. THE SESSION IS HIGHLY RELEVANT TO THE THEME OF ADVANCING REHABILITATION TECHNIQUES THROUGH MODERN IMAGING MODALITIES.

- 9H00
OVERVIEW OF WORKSHOP OBJECTIVES AND CLINICAL RELEVANCE OF ULTRASOUND IN DYSTONIA TREATMENT.
- 9H10
- REVIEW OF NECK MUSCLE ANATOMY WITH A FOCUS ON DYSTONIA-RELATED MUSCLES.
 - IMPORTANCE OF ACCURATE MUSCLE IDENTIFICATION IN TREATMENT OUTCOMES.
- 9H40
- LIVE DEMONSTRATION OF ULTRASOUND SCANNING ON KEY NECK MUSCLES.
 - IDENTIFYING NORMAL ANATOMY AND COMMON VARIANTS.
- 10H10
- SUPERVISED ULTRASOUND SCANNING WITH INSTRUCTOR GUIDANCE.
 - INTERACTIVE FEEDBACK ON TECHNIQUE AND IMAGING INTERPRETATION.
- 10H55
DISCUSSION ON COMMON CHALLENGES, CLINICAL INTEGRATION, AND CASE APPLICATIONS.

09:00 - 11:00

ROSERAIE

SHORT WORKSHOP



ELECTRODIAGNOSIS INTERMEDIATE COURSE: HANDS-ON WORKSHOP

ID 11

TOPIC ELECTRODIAGNOSIS

SPEAKERS NAGLAA GADALLAH (EGYPT)
ABEER EL ZOHIERY (EGYPT)

CHAIR NAGLAA GADALLAH

ATTENDEES 25

LEARNING OUTCOMES

- LEARN HOW TO DIAGNOSE DIFFERENT TYPES OF ENTRAPMENT NEUROPATHY BY ELECTRODIAGNOSIS AND HOW TO ASSESS THE DEGREE OF SEVERITY AND TO DETERMINE THE EXACT SITE OF ENTRAPMENT.
- KNOW HOW TO AVOID DIFFERENT PITFALLS WE MEET IN PERFORMING ELECTRODIAGNOSIS.
- LEARN HOW TO DIFFERENTIATE BETWEEN DIFFERENT TYPES OF NEUROMUSCULAR JUNCTION DISEASES.
- LEARN HOW TO ASSESS THE EXTENT AND PROGNOSIS OF FACIAL NERVE LESION, AND SOME OTHER CRANIAL NERVE LESIONS.
- STEP BY STEP INSTRUCTIONS TO ALLOW ATTENDEES TO REPRODUCE ALL OF THE ELECTRODIAGNOSTIC TECHNIQUES.
- KNOW HOW TO WRITE A DETAILED COMPREHENSIVE ELECTRODIAGNOSTIC REPORT.

- 9H00
GENERAL PRINCIPLES OF DIAGNOSING ENTRAPMENT SYNDROME. NAGLAA GADALLAH
- 9H15
EDX OF NEUROMUSCULAR JUNCTION. ABEER EL ZOHIERY
- 9H30
CRANIAL NERVE ELECTRODIAGNOSIS. NAGLAA GADALLAH
- 9H45
INTERPRETATION AND REPORT WRITING. NAGLAA GADALLAH
- 10H00
HANDS ON TRAINING. NAGLAA GADALLAH, ABEER EL ZOHIERY

09:00 - 11:00

PALMERAIE

SHORT WORKSHOP



BREAKING BARRIERS: INCLUSIVE SPORTS FOR INDIVIDUALS WITH DISABILITIES

ID 61

TOPIC SPECIFIC CONDITION & DISABILITY

SPEAKERS ANGELA PALOMBA (ITALY)
ANDREI KRASSIOUKOV (CANADA)
UMA PANDIYAN (QATAR)
JAIMIE BOROSOFF (CANADA)
LENINE CUNHA (PORTUGAL)
BECCA FAREWELL (USA)
CHANTAL NGUYEN (USA)
ABDERRAZAK HAJJIOUI (MOROCCO)
TRICHA MOHAMMED (MOROCCO)

CHAIR ANGELA PALOMBA

ATTENDEES 50

PARTICIPATING IN SPORTS CAN OFFER NUMEROUS BENEFITS TO INDIVIDUALS WITH DISABILITIES, INCLUDING PHYSICAL FITNESS, SOCIAL INTERACTION, AND MENTAL WELL-BEING. THE PARTICIPATION OF INDIVIDUALS WITH DISABILITIES IN INTERNATIONAL SPORTS, PARTICULARLY THROUGH THE PARALYMPIC GAMES, IS A PROFOUND TESTAMENT TO RESILIENCE AND DETERMINATION. HOWEVER, VARIOUS MEDICAL AND PHYSICAL BARRIERS CAN IMPACT PARTICIPATION. FOR ATHLETES WITH INTELLECTUAL DISABILITIES, CLASSIFICATION CAN BE PARTICULARLY CHALLENGING, AS IT REQUIRES AN ACCURATE ASSESSMENT OF THEIR COGNITIVE AND PHYSICAL ABILITIES RELATIVE TO THEIR PEERS. MISUNDERSTANDINGS ABOUT THE CAPABILITIES OF ATHLETES WITH INTELLECTUAL DISABILITIES MAY LEAD TO UNDERREPRESENTATION IN COMPETITIVE SPORTS.

PHYSICAL DISABILITIES ALSO PRESENT UNIQUE BARRIERS, SUCH AS ACCESSIBILITY ISSUES RELATED TO FACILITIES, EQUIPMENT, AND TRANSPORTATION. ATHLETES MAY STRUGGLE TO FIND APPROPRIATE ADAPTIVE SPORTS EQUIPMENT OR TAILORED TRAINING OPPORTUNITIES. MOREOVER, LACK OF FUNDING AND RESOURCES FOR SPECIALIZED PROGRAMS CAN DETER OTHERS FROM PARTICIPATION IN SPORT. FOR ATHLETES WITH ABNORMAL AUTONOMIC CONTROL, CONDITIONS AFFECTING INVOLUNTARY BODILY FUNCTIONS ADD FURTHER COMPLEXITIES. THESE ATHLETES MAY FACE HEALTH RISKS DURING INTENSE PHYSICAL ACTIVITIES DUE TO COMPROMISED ABILITY TO REGULATE BODY TEMPERATURE, BLOOD PRESSURE, OR HEART RATE. CONSEQUENTLY, TAILORED TRAINING REGIMENS AND VIGILANT MEDICAL SUPERVISION MAY BE REQUIRED BUT CAN BE DIFFICULT TO ACCESS AND IMPLEMENT.

ADDRESSING THESE BARRIERS IS CRUCIAL NOT ONLY FOR IMPROVED CLASSIFICATION IN INTERNATIONAL COMPETITIONS BUT ALSO FOR FOSTERING AN INCLUSIVE ENVIRONMENT WHERE ALL ATHLETES, REGARDLESS OF THEIR DISABILITY, CAN THRIVE AND SHOWCASE THEIR TALENTS ON THE WORLD STAGE. MAINTAINING THE HEALTH OF ATHLETES WITH DISABILITIES IS A ROLE PHYSIATRISTS ARE CALLED TO PLAY. IN THIS WORKSHOP, WE BRING TOGETHER PARALYMPIC AND RECREATIONAL ATHLETES WHO SHARE UNIQUE INSIGHTS ON HEALTH AND SPORT WITH EXPERTS WHO HAVE WITNESSED THE TRAINING OF PARA ATHLETES IN ALL LEVELS OF COMPETITION, RAISED AWARENESS OF SYSTEMIC COMPLICATIONS, AND ADDRESSED ATHLETE MENTAL WELL-BEING AND GENDER BIAS AMONG OTHER AREAS. THE WORKSHOP AIMS TO CREATE A COMPREHENSIVE UNDERSTANDING OF BARRIERS AND SOLUTIONS FOR ATHLETES WITH DISABILITIES, HIGHLIGHTING THE IMPACT OF RECENT ADVANCES IN TECHNOLOGY AND LEVERAGING EXPERTISE FROM BOTH ATHLETES AND MEDICAL PROFESSIONALS TO IMPROVE SAFETY IN SPORT AND INSPIRE/EDUCATE PARTICIPANTS.

9H00

INTRODUCTION, WELCOME, AND OBJECTIVES, INCLUDING OVERVIEW OF WORKSHOP OBJECTIVES AND TOPICS.

9H05

A PARALYMPIC ATHLETES PERSPECTIVE. JAIMIE BOROSOFF (PRE RECORDED)

9H15

REPRESENTING ATHLETES WITH INTELLECTUAL IMPAIRMENT IN THE IPC ATHLETES' COUNCIL. LENINE CUNHA

9H25

PERSPECTIVE OF RECREATIONAL ADAPTIVE SKIERS ON VENTILATORS. BECCA FAREWELL

9H35

AUTONOMIC CONTROL AND SPORT PERFORMANCE IN PARALYMPIC ATHLETES WITH SPINAL CORD INJURY. ANDREI KRASSIOUKOV

9H55

Q&A

10H00

FUNCTIONAL ASSESSMENT IN PARALYMPIC ATHLETES WITH INTELLECTUAL IMPAIRMENTS. ANGELA PALOMBA

10H10

SPORTS EQUITY. CHANTAL NGUYEN

10H20

COMMUNITY SPORT. UMA PANDIYAN

10H30

BREAKING BARRIERS: THE IMPACT OF GOLF, DIVING, AND EQUESTRIANISM ON DISABILITY SPORTS IN MOROCCO. ABDERRAZAK HAJJIOUI, TRICHA MOHAMMED

10H50

OPEN DISCUSSION AND SUMMARY.

09:00 - 11:00

ARGANIER

SHORT WORKSHOP



REVOLUTIONIZING CHRONIC LOW BACK PAIN CARE: HOLISTIC THERAPY WITH ACUPUNCTURE, DRY NEEDLING, MESOTHERAPY, YOGA

ID 113

TOPIC PAIN

SPEAKERS NADRA EL FENI (TUNISIA)
GADDOUR MARIEM (TUNISIA)
MONCER RIHAB (TUNISIA)
MTAOUA SAHBI (TUNISIA)
MARWA GHANMI (TUNISIA)

CHAIR NADRA EL FENI

ATTENDEES 30

THIS WORKSHOP IS DESIGNED TO PROVIDE HEALTHCARE PROFESSIONALS WITH A COMPREHENSIVE, HANDS ON APPROACH TO MANAGING CHRONIC LOW BACK PAIN (CLBP) USING A COMBINATION OF NON CONVENTIONAL THERAPIES.

FOCUSING ON ACUPUNCTURE, DRY NEEDLING, MESOTHERAPY, AND YOGA, THIS SESSION AIMS TO INTRODUCE PARTICIPANTS TO PRACTICAL TECHNIQUES AND EVIDENCE-BASED APPROACHES TO TREAT CLBP FROM A HOLISTIC PERSPECTIVE. THROUGH INTERACTIVE DEMONSTRATIONS AND VIDEO PRESENTATIONS, PARTICIPANTS WILL GAIN VALUABLE INSIGHTS INTO HOW THESE THERAPIES CAN BE INTEGRATED INTO CLINICAL PRACTICE.

9H00

OVERVIEW OF THE NON-CONVENTIONAL THERAPIES TO BE DISCUSSED: ACUPUNCTURE, DRY NEEDLING, MESO-THERAPY, AND YOGA AND PRESENTATION OF KEY CONCEPTS AND RECENT ADVANCEMENTS.

9H20

PRACTICAL APPLICATION OF ACUPUNCTURE IN CLINICAL SETTING : SELECT THE ACUPUNCTURE POINTS TO APPLY AND DEMONSTRATE ON A REAL CASE OR MANNEQUIN. PRACTICAL APPLICATION OF DRY NEEDLING.

10H00

USE OF MESOTHERAPY : VIDEO-DEMONSTRATION OF THE TECHNIQUE IN ACTION - HOW YOGA AND PHYSICAL EXERCISES CONTRIBUTE TO PAIN MANAGEMENT AND IMPROVED MOBILITY.

10H40

OPEN DISCUSSION AND SUMMARY.

11:00 - 11:30 BREAK

11:30 - 12:30

PLENARY

SESSION

ADAPT AND EDUCATE: NEW STRATEGIES TO TEACH TODAY'S MODERN REHABILITATION LEARNER

ID 125

TOPIC EDUCATION

SPEAKERS NATHAN ROSENBERG (USA)
ROBERT RINALDI (USA)
MATTHEW MCLAUGHLIN (USA)

CHAIR NATHAN ROSENBERG

AS TECHNOLOGY, LEARNING MODES AND INDIVIDUAL CULTURES HAVE CHANGED OVER TIME, THE OPTIMAL MODALITIES FOR THE LEARNERS OF THOSE GENERATIONS HAVE ALSO CHANGED. IT HAS BECOME CLEAR THAT PRIOR DOMINANT PARADIGMS OF SOCRATIC TEACHING AND TEXTBOOK READING ARE NO LONGER SUITABLE TO ACHIEVE EDUCATIONAL EXCELLENCE. FORTUNATELY, THE MODERN CHALLENGE OF EDUCATING THE YOUNGER GENERATION OF LEARNERS HAS BEEN WELL-STUDIED IN A NUMBER OF COUNTRIES AND THERE IS INSIGHT AVAILABLE TO BETTER ADAPT TO THIS GENERATION'S STRENGTHS AND WEAKNESSES. WE WILL ADDRESS THE AVAILABLE DATA AND PROVIDE INSIGHT INTO OUR OWN GROWTH AS EDUCATORS.

ADDITIONALLY, WE WILL POINT OUT AREAS WHERE THE CURRENT GENERATION EXCELS COMPARED TO PRIOR GENERATIONS. EACH SPEAKER WAS BORN IN A DIFFERENT WESTERN CULTURAL GENERATION (BABY BOOMER, GENERATION X AND MILLENNIAL) AND WILL PROVIDE INSIGHT INTO THE FLEXIBILITY NEEDED TO MEET THE CURRENT NEEDS OF OUR LEARNERS. ADDITIONALLY, THE SPEAKERS HAVE EXPERIENCE AS EDUCATORS IN LOW TO MIDDLE INCOME COUNTRIES, INCLUDING EXPERIENCE TEACHING SPECIFICALLY IN AFRICA. FOR THIS REASON, TIME WILL BE SPENT DEMONSTRATING THE CONTRAST IN OUR OBSERVATIONS OF LEARNERS' APPROACHES BETWEEN LMIC AND WESTERN COUNTRIES.

11H30

INTRODUCTION.

11H35

AUDIENCE POLLING: QUESTIONS INVOLVING OPINIONS ABOUT LEARNERS AND THEIR APPROACHES.

11H40

REVIEW OF EVIDENCE.

11H50

APPLICATIONS IN LMIC.

12H00

OC ID 70 UNDERGRADUATE REHABILITATION EDUCATION: AN ACTION STEP TOWARD REHABILITATION 2030 AND THE WORLD HEALTH ASSEMBLY RESOLUTION. ABIGAIL AKANDE

12H05

OC ID 837 THE EFFICACY OF AN VIRTUAL REALITY EDUCATIONAL PROGRAM IN IMPROVING THE VISUOSPATIAL SKILLS OF THE RESIDENTS IN PHYSICAL AND REHABILITATION MEDICINE. ANDREA DEMECO

12H10

DISCUSSION & SUMMARY

tyromotion



Amadeo
finger & hand



Diego
shoulder & arm

Myro
interactive & task
specific therapy



Pablo
interactive & task
specific therapy

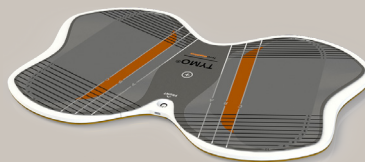


Tyrostation
the perfect therapy
setting

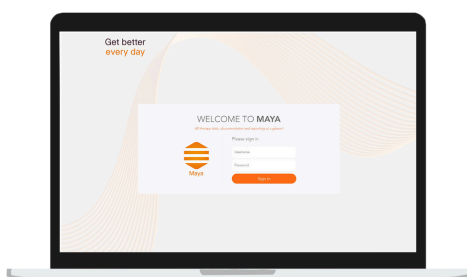


Omega Plus
gait training

Tymo
balance &
posture



Lexo
gait &
locomotion



Maya, focus on what really matters.
The Patient.

tyromotion.com

11:30 - 12:30

OLIVERAIE

SESSION

PHENOMENOLOGICAL APPROACH TO SPASTIC MOVEMENT DISORDERS

ID 56

TOPIC SPASTICITY

SPEAKERS BO BIERING-SØRENSEN (DANEMARK)
RAJIV REEBYE (CANADA)
PETER SANDERSON (UK)

CHAIR BO BIERING-SØRENSEN

HYPERKINETIC MOVEMENT DISORDERS, KNOWN FOR THEIR COMPLEX AND OVERLAPPING MOVEMENT PATTERNS, PRESENT SIGNIFICANT CHALLENGES IN CLASSIFICATION AND TREATMENT. THIS COMPLEXITY IS FURTHER COMPOUNDED BY EVOLVING DEFINITIONS AND THE INVOLVEMENT OF VARIOUS MEDICAL SPECIALTIES. THE INCONSISTENCY IN DEFINITIONS AND DESCRIPTORS COMPLICATES BOTH RESEARCH AND CLINICAL COMMUNICATION.

OUR GOAL IS TO PROVIDE AN OVERVIEW OF CURRENT TERMS AND DEFINITIONS RELATED TO SPASTIC MOVEMENT DISORDERS AND OTHER HYPERKINETIC MOVEMENT DISORDERS ASSOCIATED WITH CENTRAL NERVOUS SYSTEM (CNS) LESIONS. DURING THE SESSION WE WILL REVIEW THE DEFINITIONS OF SPASTICITY, DYSTONIA, TREMOR, CHOREA, HEMIBALLISMUS, ATHETOSIS, AND MYOCLONUS, HIGHLIGHTING THE OVERLAPS AND CHALLENGES IN DIFFERENTIATING THESE DISORDERS. VARIOUS HYPERKINETIC MOVEMENT DISORDERS ARE SIMILARLY DEFINED BY THEIR CLINICAL FEATURES AND ETIOLOGIES, OFTEN SHOWING SIGNIFICANT OVERLAP WITH SPASTICITY. WE WILL ALSO PROPOSE A UNIFIED TERMINOLOGY AND CLASSIFICATION SYSTEM FOR SPASTIC MOVEMENT DISORDERS TO ENHANCE COMMUNICATION AMONG HEALTHCARE PROFESSIONALS.

THE PROPOSED CLASSIFICATION SYSTEM FOR SPASTICITY INCORPORATES ELEMENTS FROM THE MOVEMENT DISORDER SOCIETY'S CLASSIFICATION OF DYSTONIA AND TREMOR, FOCUSING ON CLINICAL FEATURES AND ETIOLOGY. THIS APPROACH AIMS TO CREATE A COMMON LANGUAGE FOR DESCRIBING PHENOTYPES OBSERVED IN CLINICAL PRACTICE, FACILITATING BETTER COMMUNICATION AND COLLABORATION AMONG HEALTHCARE PROFESSIONALS. LASTLY, WE WILL DISCUSS WAYS TO ASSESS THE DIFFERENT PHENOTYPES IN SPASTIC MOVEMENT DISORDERS. THE SESSION WILL INCLUDE NUMEROUS CASE STUDIES FOR VISUAL ILLUSTRATION OF THE PHENOTYPES.

11H30
WELCOME AND SESSION OBJECTIVES.

11H35
CURRENT DEFINITIONS AND OVERLAPS.

11H45
CURRENT DEFINITIONS AND OVERLAPS.

12H00
ASSESSING PHENOTYPES IN PRACTICE.

12H10
OC ID 147 PREDICTIVE MARKERS FOR SPASTICITY MANAGEMENT: INTEGRATING CLINICAL, ELECTRODIAGNOSTIC, AND SURGICAL APPROACHES. NAJLAE GADALAH

12H15
OC ID 312 DIGITALIZED TREATMENT DIARY FOR MANAGING SPASTICITY. BO BIERING-SØRENSEN

12H20
DISCUSSION

11:30 - 12:30

ORANGERAIE

SHORT WORKSHOP (FRENCH)



SCOLIOSE IDIOPATHIQUE DE L'ADOLESCENT : STRATÉGIES DE PRISE EN CHARGE ORTHOPÉDIQUE

TOPIC MUSCULOSKELETAL

SPEAKERS KARKOURI SAMIA (MAROC)
LEILA BENZAKOUR (MAROC)
KHALID EL YOUBI (MAROC)
NAILA HALTOUT (MAROC)
LAMIAE HIDANE (MAROC)

CHAIR KHALID EL YOUBI, LEILA BENZAKOUR

ATTENDEES 30

LA SCOLIOSE IDIOPATHIQUE DE L'ADOLESCENT (SIA) REPRÉSENTE UN DÉFI MAJEUR EN TERMES DE DIAGNOSTIC, DE SUIVI ET DE PRISE EN CHARGE THÉRAPEUTIQUE. SA COMPLEXITÉ RÉSIDE DANS LA VARIABILITÉ DES PRÉSENTATIONS CLINIQUES ET DES ÉVOLUTIONS, NÉCESSITANT UNE APPROCHE PLURIDISCIPLINAIRE ET INDIVIDUALISÉE.

11H30
INTRODUCTION ET RAPPEL THÉORIQUE

11H45
DÉMONSTRATION PRATIQUE : EXAMEN CLINIQUE SUR MANNEQUIN

12H00
ANALYSE RADIOLOGIQUE ET ALGORITHMES DÉCISIONNELS

12H15
DISCUSSION

11:15 - 12:30

ROSERAIE

SESSION

CHALLENGING THE LONELINESS EPIDEMIC: PREVENTION AND SOLUTIONS

TOPIC UN SESSION (UNITED NATIONS)

SPEAKERS BRYAN O'YOUNG (USA)

AKIKO ITO (JAPAN)

GWENDOLYN PRICE (USA)

MARK (YOUNG)

AREERAT SUPUTTITADA (THAILAND)

MATTHEW BARTELS (USA)

BRYDIE-LEIGH BARTLEET (AUSTRALIA)

CHRIS ROBERTS (UK)

HANS GALUTERA (USA)



CHAIR BRYAN O'YOUNG

THE UNITED NATIONS (UN) AND THE WORLD HEALTH ORGANIZATION (WHO) HAVE TAKEN SIGNIFICANT STRIDES IN TACKLING THE PRESSING ISSUES OF LONELINESS AND SOCIAL ISOLATION. A LANDMARK ACHIEVEMENT OCCURRED DURING THE UN DECADE OF HEALTHY AGEING (2021–2030), WHEN LONELINESS WAS OFFICIALLY RECOGNIZED AS A GLOBAL PUBLIC HEALTH PRIORITY. IN A HISTORIC MOVE IN 2025, THE WHO'S EXECUTIVE BOARD ADDRESSED SOCIAL ISOLATION AND LONELINESS AS CRITICAL FACTORS CONTRIBUTING TO POOR MENTAL HEALTH FOR THE FIRST TIME.

THE PREVALENCE OF SOCIAL ISOLATION AND LONELINESS IS ALARMING, WITH APPROXIMATELY ONE IN FOUR OLDER ADULTS EXPERIENCING SOCIAL ISOLATION AND BETWEEN 5% AND 15% OF ADOLESCENTS FEELING LONELY. EXTENSIVE RESEARCH HAS CONSISTENTLY SHOWN THAT THE EFFECTS OF SOCIAL ISOLATION AND LONELINESS CAN BE DEVASTATING, IMPACTING PHYSICAL AND MENTAL HEALTH, DIMINISHING QUALITY OF LIFE, AND REDUCING LONGEVITY. IN FACT, THE INFLUENCE OF SOCIAL ISOLATION AND LONELINESS ON MORTALITY IS COMPARABLE TO WELL-KNOWN RISK FACTORS SUCH AS SMOKING, OBESITY, AND PHYSICAL INACTIVITY.

THIS SESSION WILL PROVIDE A BIRD'S EYE VIEW OF LONELINESS'S PHYSICAL AND PSYCHOLOGICAL CONSEQUENCES. A DISTINGUISHED PANEL OF INTERNATIONAL EXPERTS FROM AUSTRALIA, CANADA, CHINA, JAPAN, KENYA, THAILAND, THE UNITED KINGDOM, AND THE USA WILL BE PARTICIPATING. NOTABLE UN OFFICIALS WILL INCLUDE AKIKO ITO, CHIEF SECRETARIAT OF THE UN CONVENTION ON THE RIGHTS OF PERSONS WITH DISABILITIES; MOTOO KUSAKABE, FORMER VICE-PRESIDENT OF THE WORLD BANK FOR RESOURCE MOBILIZATION; AND JOSEPHINE OJAMBO, FORMER AMBASSADOR AND DEPUTY PERMANENT REPRESENTATIVE OF KENYA TO THE UNITED NATIONS IN NEW YORK, AS WELL AS THE IMMEDIATE PAST DEPUTY SECRETARY-GENERAL OF THE COMMONWEALTH OF NATIONS. TOGETHER, THEY WILL PRESENT VARIOUS INNOVATIVE SOLUTIONS ADDRESSING ADVOCACY, ADAPTIVE SPORTS, ARTIFICIAL INTELLIGENCE, ARCHITECTURE, THE ARTS, THE CRUISE INDUSTRY, CULTURE, MENTAL HEALTH, MEDITATION, AND MUSIC. AFTER THEIR INSIGHTS, THE FLOOR WILL OPEN FOR AN ENGAGING QUESTION-AND-ANSWER SESSION.

THE INTERNATIONAL SOCIETY OF PHYSICAL AND REHABILITATION MEDICINE (ISPRM) IS FIRMLY COMMITTED TO COLLABORATING WITH THE UNITED NATIONS TO ADVANCE THE UN SUSTAINABLE DEVELOPMENT GOALS (SDGS). EACH YEAR, THE UN LIAISON COMMITTEE WILL CONDUCT A VITAL SESSION AT THE ISPRM ANNUAL CONFERENCE, REINFORCING ISPRM'S JOINT EFFORTS TO COMBAT LONELINESS, PROMOTE RESILIENCE ACROSS ALL COMMUNITIES AND SUPPORT THE UN SDG 2030.

11H15

INTRODUCTION. BRYAN O'YOUNG

11H20

DISTRESS CALL BY THE UN/WHO: LONELINESS AS A HEALTH THREAT AND SOCIAL CONCERN. AKIKO ITO

11H30

LONELINESS IN THE MODERN SOCIETY: HEALTH AND SOCIAL RAMIFICATIONS. BRYAN O'YOUNG

11H40

MINDFULNESS MEDITATION IN LONELINESS: A PATH TO HEALING. AREERAT SUPUTTITADA

11H45

AGE, LONELINESS, DISABILITY AND SPORT. MATTHEW BARTELS

11H55

CREATIVE CONNECTIONS: HOW MUSIC CAN HELP ADDRESS LONELINESS. BRYDIE-LEIGH BARTLEET

12H00

DESIGNING BELONGING AT SEA: CRUISE INDUSTRY SOLUTIONS TO LONELINESS. HANS GALUTERA

12H10

AGEISM AS AN A.S.S.E.T. - ADVOCACY IN SUPPORTING AND STRENGTHENING THE ELDERLY & YOUTHS AMIDST TOTALITIES OF THE "LONELINESS EPIDEMIC". GWENDOLYN PRICE

12H25

DISCUSSION. MARK YOUNG

11:30 - 12:30

ARGANIER

SESSION

PAIN MANAGEMENT IN THE SPINAL CORD INJURY POPULATION

ID 38

TOPIC PAIN

SPEAKERS GREGORY BLAZEK (USA)

JOEL FRONTERA (USA)

KEMLY PHILIP (USA)

CHAIR GREGORY BLAZEK

THE SPINAL CORD INJURY POPULATION INCLUDES A WIDE ARRAY OF INJURY TYPES AND DISABILITY CLASSIFICATIONS. THROUGH THIS DIVERSITY, THERE IS A PLETHORA OF POSSIBLE NOCICEPTIVE, NEUROPATHIC, AND EVEN VISCERAL SOURCES OF PAIN OF WHICH BOTH INPATIENT AND OUTPATIENT CLINICIANS NEED TO BE AWARE. MANAGING PAIN IS CRITICAL FOR IDENTIFYING DEFICITS, OVERCOMING DISABILITIES, STRENGTHENING FUNCTIONAL MOVEMENTS, AND OPTIMIZING QUALITY OF LIFE. WE SEEK TO IDENTIFY AND PROVIDE UP-TO-DATE BEST PRACTICES FOR MEDICAL TRAINEES OR CURRENTLY PRACTICING PROVIDERS ON APPROACHES TO THE VARIOUS PAIN ETIOLOGIES AND THE NEXT STEPS FOR MANAGEMENT WITHIN THE SPINAL CORD INJURY POPULATION.

11H30

INTRODUCTION AND BACKGROUND.

11H40

OUTLINE AND DESCRIPTION OF PAIN FRAMEWORK FOR VISCERAL PAIN.

11H50

OUTLINE AND DESCRIPTION OF PAIN FRAMEWORK FOR NEUROPATHIC PAIN.

12H00

OUTLINE AND DESCRIPTION OF PAIN FRAMEWORK FOR NOCICEPTIVE PAIN.

12H10

INTERACTIVE DEMONSTRATION.

12H20

CO ID 776 FACTORS AFFECTING REHABILITATION PARTICIPATION IN PATIENTS WITH SPINAL CORD INJURY. GÜL METE CIVELEK

12H25

Q&A AND WRAP-UP

12:30 - 13:00

PLENARY

KEYNOTE

STRATEGIES TO INSPIRE AND RECRUIT THE NEXT GENERATION

SPEAKERS MARYAM FOURTASSI (MOROCCO)

CHAIR SAMIA KARKOURI, GERARD FRANCISCO

PHYSICAL AND REHABILITATION MEDICINE (PRM) IS ESSENTIAL YET OFTEN OVERLOOKED. TO SECURE ITS FUTURE, WE MUST ENGAGE, INSPIRE, AND ATTRACT THE NEXT GENERATION.

THIS KEYNOTE EXPLORES STORYTELLING, MENTORSHIP, INNOVATIVE EDUCATION, AND ADVOCACY TO MAKE PRM AN EXCITING CAREER CHOICE. DRAWING FROM PERSONAL EXPERIENCES IN TEACHING, LEADERSHIP, AND GLOBAL HEALTH (INCLUDING LMICS), IT HIGHLIGHTS PRACTICAL STRATEGIES TO POSITION PRM AS A DYNAMIC AND IMPACTFUL SPECIALTY.

13:00 - 14:00

PLENARY

CLOSING CEREMONY



UNDER THE HIGH PATRONAGE
OF HIS MAJESTY KING MOHAMMED VI



ISPRM 19TH WORLD CONGRESS
MARRAKESH
3-7 NOVEMBER 2025



E-POSTERS PLANNING PROGRAM



ID : 31

FRIDAY 7/11/2025 - SCREEN 2

ALFARI ABDOUL AZIZ , (NIGER)
COMMUNITY

AMPUTEE PATIENTS PROTHESIS CHALLENGE IN NIGER, EXPERIENCE OF THE PHYSICAL MEDICINE AND REHABILITATION DEPARTMENT OF NIAMEY'S GENERAL REFERENCE HOSPITAL

ID : 32

TUESDAY 4/11/2025 - SCREEN 1

ALFARI ABDOUL AZIZ , (NIGER)
SPECIFIC CONDITIONS & DISABILITIES

LATE DISCOVERY OF AN HOMOZYGOUS SS SICKLE CELL DISEASE. CASE REPORT

ID : 36

TUESDAY 4/11/2025 - SCREEN 2

KABIR SADARANGANI , (CHILE)
SPECIFIC CONDITIONS & DISABILITIES

HEALTH-RELATED QUALITY OF LIFE AND LEISURE TIME USE: A COMPARISON BETWEEN CHILEAN CHILDREN AND ADOLESCENTS WITH AND WITHOUT DISABILITIES. RESULTS FROM THE NATIONAL DISABILITY AND DEPENDENCY SURVEY 2022

ID : 38

WEDNESDAY 5/11/2025 - SCREEN 5

JACK FU , (UNITED STATES)
SPASTICITY

HEAD AND NECK CANCER SURVIVOR REPORTED BENEFITS OF ONABOTULINUM TOXIN INJECTIONS FOR NECK MUSCLE SPASMS

ID : 39

TUESDAY 4/11/2025 - SCREEN 1

ARMANDO SALONGA MICIANO MD , (UNITED STATES)
ELDERLY

LIFE SATISFACTION OF INDIVIDUALS AFTER A FALL INJURY

ID : 44

TUESDAY 4/11/2025 - SCREEN 2

BRUNO HOLANDA FERREIRA , (BRAZIL)
ELDERLY

PRACTICE OF PHYSICAL ACTIVITY AMONG OLDER ADULTS RESIDENTS IN THE MUNICIPALITY OF SÃO PAULO, BRAZIL.

ID : 46

WEDNESDAY 5/11/2025 - SCREEN 5

V.JEROSLAVA SLAVIC , (MONTENEGRO)
MUSCULOSKELETAL

THE ROLE OF HSP72 AND HEART RATE VARIABILITY IN ASSESSING REHABILITATION EFFICACY FOR INFLAMMATORY RHEUMATISM

ID : 48

TUESDAY 4/11/2025 - SCREEN 1

KWANG-IK JUNG , (SOUTH KOREA)
NEUROREHABILITATION

LANGUAGE NETWORK DIFFERENCE BETWEEN ANOMIC AND GLOBAL APHASIA

ID : 50

FRIDAY 7/11/2025 - SCREEN 5

JULIA FACIONE , (FRANCE)
MUSCULOSKELETAL

PLACE OF BOTULINUM TOXIN IN THE TREATMENT OF STUMP HYPERHIDROSIS

ID : 51

TUESDAY 4/11/2025 - SCREEN 3

JULIA FACIONE , (FRANCE)
SPORT

SUPPORTING THE BEGINNINGS OF RUNNING IN PEOPLE WITH LOWER LIMB AMPUTEES

ID : 52

TUESDAY 4/11/2025 - SCREEN 1

MADALINA ILIESCU , (ROMANIA)
MUSCULOSKELETAL

CLINICAL EVIDENCE REGARDING INFLUENCE OF SPECIFIC BALNEOTHERAPY IN SPONDYLOARTHROPATHIES

ID : 53

TUESDAY 4/11/2025 - SCREEN 1

MADALINA ILIESCU , (ROMANIA)
ONCOLOGY

THE EFFECTS OF PHYSICAL THERAPEUTIC METHODS FOR PATIENTS INCLUDED IN ONCOREHABILITATION PROGRAMS

ID : 56

TUESDAY 4/11/2025 - SCREEN 3

KABIR P. SADARANGANI , (CHILE)
SPECIFIC CONDITIONS & DISABILITIES

ASSOCIATION BETWEEN DISABILITY AND PERCEIVED DISCRIMINATION IN CHILEAN YOUTH: THE ROLE OF SOCIAL SUPPORT AND PEER RELATIONSHIPS – RESULTS FROM THE NATIONAL DISABILITY AND DEPENDENCY SURVEY 2022

ID : 59

WEDNESDAY 5/11/2025 - SCREEN 4

YING GUO , (UNITED STATES)
ONCOLOGY

ORTHOSTATIC HYPOTENSION IN CANCER PATIENTS WHO UNDERWENT INPATIENT REHABILITATION

ID : 61

FRIDAY 7/11/2025 - SCREEN 3

DINKO KOLARIĆ , (CROATIA)
COMMUNITY

GENDER DIFFERENCES IN PHYSICAL ACTIVITY HABITS AMONG PHYSIOTHERAPY STUDENTS

ID : 63

TUESDAY 4/11/2025 - SCREEN 2

DINKO KOLARIĆ , (CROATIA)
DIAGNOSTICS & PRACTICES

INFLUENCE OF AGE AND TYPE OF OPERATION ON OUTCOMES AND EXPECTATIONS AFTER ORTHOPEDIC SURGERIES

ID : 64

FRIDAY 7/11/2025 - SCREEN 4

ANA KOLARIĆ , (CROATIA)
COMMUNITY

DIFFERENCE IN OPINIONS ON THE NEED FOR THE MEDITERRANEAN DIET AMONG PHYSIOTHERAPY STUDENTS BASED ON THEIR PLACE OF RESIDENCE

ID : 68

TUESDAY 4/11/2025 - SCREEN 1

REBECA PARDO-GARCIA , (SPAIN)
RESEARCH

ANALYSIS AND CORRELATION BETWEEN MOTOR TASK-RELATED BRAIN OSCILLATIONS, AND FM-UE IN CHRONIC LEFT MCA ISCHEMIC STROKE PATIENTS. AN EXPLORATORY STUDY.

ID : 72

TUESDAY 4/11/2025 - SCREEN 1

MOHIT KATARUKA , (INDIA)
NEUROREHABILITATION

REHABILITATION OF TRAUMATIC BRAIN INJURY PATIENT WITH REPETITIVE TRANSCRANIAL MAGNETIC STIMULATION, A CASE REPORT

ID : 73

TUESDAY 4/11/2025 - SCREEN 3

ERWIN BAARS , (NETHERLANDS)
DIAGNOSTICS & PRACTICES

IS PROSTHESIS EVALUATION CHECKLIST (PEC) USE BENEFICIAL FOR SYSTEMATIC ASSESSMENT OF LOWER LIMB PROSTHESIS SATISFACTION?

ID : 74

FRIDAY 7/11/2025 - SCREEN 1

JAEMIN KIM , (SOUTH KOREA)
RESEARCH

A CADAVERIC STUDY OF ULTRASOUND-GUIDED NON-INCISIONAL TRIGGER FINGER RELEASE WITH SMARTWIRE

ID : 77

TUESDAY 4/11/2025 - SCREEN 4

KABIR P. SADARANGANI , (CHILE)
SPECIFIC CONDITIONS & DISABILITIES

SOCIODEMOGRAPHIC AND CLINICAL PROFILES OF USERS AT TELETÓN CHILE: A CROSS-SECTIONAL STUDY OF CHILDREN AND ADOLESCENTS WITH PHYSICAL DISABILITIES

ID : 78

TUESDAY 4/11/2025 - SCREEN 4

TIFFANY LIN , (UNITED KINGDOM)
DIAGNOSTICS & PRACTICES

FEASIBILITY AND IMPACT OF INTENSIVE REHABILITATION IN ACUTE MEDICAL UNITS: A PILOT STUDY

ID : 80

THURSDAY 6/11/2025 - SCREEN 1

ANA OÑA , (SWITZERLAND)
NEUROREHABILITATION

DEVELOPMENT OF A COMORBIDITY INDEX FOR PERSONS WITH SPINAL CORD INJURY COMBINING THE SPINAL CORD INJURY SECONDARY CONDITIONS SCALE (SCI-SCS) AND MORTALITY-BASED WEIGHTS

ID : 81

FRIDAY 7/11/2025 - SCREEN 1

CARLOS OMAR LÓPEZ LÓPEZ , (MEXICO)
TECHNOLOGY AND ROBOTICS

CORTICAL ACTIVITY DURING THE EXECUTION OF AN IMMERSIVE VIRTUAL REALITY GAME – A PILOT STUDY IN HEALTHY VOLUNTEERS

ID : 82

TUESDAY 4/11/2025 - SCREEN 5

KABIR P. SADARANGANI , (CHILE)
SPECIFIC CONDITIONS & DISABILITIES

CHANGES IN SELF-CARE, FUNCTIONAL MOBILITY, AND COGNITION IN CHILDREN AND ADOLESCENTS WITH DISABILITIES: A ONE-YEAR LONGITUDINAL STUDY OF INTERDISCIPLINARY INTERVENTIONS AT TELETÓN CHILE

ID : 88

FRIDAY 7/11/2025 - SCREEN 3

MOHIT KATARUKA , (INDIA)
DIAGNOSTICS & PRACTICES

A COMPARATIVE STUDY OF THE EFFECTIVENESS OF TOTAL CONTACT CASTING IN THE TREATMENT OF FOREFOOT VS. HINDFOOT NEUROPATHIC PLANTAR ULCERS

ID : 90

WEDNESDAY 5/11/2025 - SCREEN 1

SIMRAN PRAKASH , (UNITED STATES)
SPECIFIC CONDITIONS & DISABILITIES

IDENTIFYING GAPS AND NECESSARY MODIFICATIONS IN EXERCISE GUIDANCE FOR PERSONS WITH DISABILITIES

ID : 91

TUESDAY 4/11/2025 - SCREEN 1

SIMRAN PRAKASH , (UNITED STATES)
EDUCATION & TRAINING

ASSESSING THE EFFECTIVENESS OF CURRENT DISABILITY EDUCATION IN US MEDICAL SCHOOLS

ID : 94

THURSDAY 6/11/2025 - SCREEN 5

PIERRE DELZONGLE , (FRANCE)
MUSCULOSKELETAL

SPINAL DEFORMITY ASSOCIATED WITH DURAL ECTASIA IN INDIVIDUALS WITH MARFAN SYNDROME: A CROSS-SECTIONAL COMPARATIVE STUDY (MARFANEOS)

- ID : 96**
WEDNESDAY 5/11/2025 - SCREEN 2
 ANTOINE THÉODON , (FRANCE)
 MUSCULOSKELETAL
 FACTORS ASSOCIATED WITH HAND-SPECIFIC ACTIVITY LIMITATIONS IN PEOPLE WITH BASE-OF-THUMB OSTEOARTHRITIS: A SECONDARY ANALYSIS OF THE RHIBOT AND RHIZORTHÈSE
- ID : 97**
THURSDAY 6/11/2025 - SCREEN 2
 FRANCESCA MILONE , (FRANCE)
 MUSCULOSKELETAL
 INFLUENCE OF THUMB PARALYSIS ON OUTCOMES AFTER INTRA-ARTICULAR INJECTION OF BOTULINUM NEUROTOXIN-A : A SECONDARY ANALYSIS OF THE RHIBOT TRIAL
- ID : 99**
THURSDAY 6/11/2025 - SCREEN 5
 CHRISTELLE NGUYEN , (FRANCE)
 EDUCATION & TRAINING
 STANDARDIZED OPERATING PROCEDURES FOR RECOMMENDATIONS IN THE FIELD OF PHYSICAL MEDICINE AND REHABILITATION
- ID : 100**
TUESDAY 4/11/2025 - SCREEN 1
 TOMOKO SUGIYAMA , (JAPAN)
 SPORT
 AGE-RELATED IMPROVEMENT IN STANDING BALANCE AMONG NEW WALKERS: A LOADING TRAJECTORY ANALYSIS
- ID : 101**
FRIDAY 7/11/2025 - SCREEN 4
 JOON SHIK YOON , (SOUTH KOREA)
 DIAGNOSTICS & PRACTICES
 DIAGNOSIS OF CARPAL TUNNEL SYNDROME USING DEEP LEARNING WITH COMPARATIVE GUIDANCE
- ID : 103**
TUESDAY 4/11/2025 - SCREEN 2
 MUHAMMAD FAUZI FATUROHMAN SONJAYA , (INDONESIA)
 MUSCULOSKELETAL
 THE OCCURRENCE OF INAPPROPRIATE PROSTHESIS PROCEDURS BY A NON-PROFIT PROVIDER FOR PATIENT WITH RIGHT ABOVE KNEE AMPUTATION: A FOCUS ON UNFIT PROSTHETIC PROBLEM
- ID : 105**
TUESDAY 4/11/2025 - SCREEN 2
 RODICA TRAISTARU , (ROMANIA)
 ELDERLY
 COMPLETE MANAGEMENT IN ROMANIAN PATIENTS WITH LOCOMOTIVE SYNDROME
- ID : 106**
FRIDAY 7/11/2025 - SCREEN 1
 VLADUT PICIOREA , (ROMANIA)
 CARDIO PULMONARY
 REHABILITATION PROGRAM IN PATIENTS WITH POST-TUBERCULOSIS LUNG DISEASE
- ID : 107**
TUESDAY 4/11/2025 - SCREEN 4
 ISABEL PATRICIA SERRANO , (PHILIPPINES)
 DIAGNOSTICS & PRACTICES
 THE SWEETEST SMILE: EFFECT OF DEXTROSE-BASED LYFTOGT PERINEURAL INJECTION TREATMENT IN INCREASING FACIAL MUSCLE STRENGTH IN A PATIENT WITH BELL'S Palsy - A CASE REPORT
- ID : 108**
FRIDAY 7/11/2025 - SCREEN 4
 ROCCO SALVATORE CALABRÒ , (ITALY)
 TECHNOLOGY AND ROBOTICS
 THE IMPACT OF SENSOR-BASED VR TELEREHABILITATION ON LOWER LIMB FUNCTION IN CHRONIC STROKE PATIENTS: A RETROSPECTIVE CASE-CONTROL STUDY
- ID : 110**
TUESDAY 4/11/2025 - SCREEN 3
 EMANUELA ELENA MIHAI , (ROMANIA)
 MUSCULOSKELETAL
 POST-OPERATIVE REHABILITATION PROGRAM AND HOME REHABILITATION FOR A PATIENT WITH SIMULTANEOUS BILATERAL QUADRICEPS TENDON RUPTURE
- ID : 111**
TUESDAY 4/11/2025 - SCREEN 2
 MARCOS MATHEUS DA SILVA FONSECA , (BRAZIL)
 NEUROREHABILITATION
 CLINICAL AND DEMOGRAPHIC PROFILE OF PATIENTS WITH SPINAL INJURY FOLLOWED IN A PUBLIC REHABILITATION SERVICE
- ID : 112**
TUESDAY 4/11/2025 - SCREEN 1
 SIDDHARTH RAI , (INDIA)
 DIAGNOSTICS & PRACTICES
 EFFECT OF FOCUSED EXTRACORPOREAL SHOCKWAVE THERAPY IN PRIMARY ADHESIVE CAPSULITIS PATIENTS WITH TYPE 2 DIABETES MELLITUS: A PROSPECTIVE RANDOMISED CLINICAL TRIAL COMPARING TWO DIFFERENT ENERGY LEVELS.
- ID : 114**
FRIDAY 7/11/2025 - SCREEN 3
 SUN GUN CHUNG , (SOUTH KOREA)
 TECHNOLOGY AND ROBOTICS
 FEASIBILITY AND EFFECTIVENESS OF REAL-TIME BIOFEEDBACK FOR MAINTAINING LUMBAR LORDOTIC CURVATURE USING INERTIAL MEASUREMENT SYSTEM
- ID : 116**
THURSDAY 6/11/2025 - SCREEN 1
 SLAVKO ROGAN , (SWITZERLAND)
 DIAGNOSTICS & PRACTICES
 BALANCE – COORDINATIVE ABILITY OR MOTORIC SKILL? A MIXED METHODS APPROACH

- ID : 117**
TUESDAY 4/11/2025 - SCREEN 5
MOHIT KATARUKA , (INDIA)
 MUSCULOSKELETAL
REHABILITATION OF RARE CHILDHOOD DISEASES- CASE SERIES
- ID : 120**
WEDNESDAY 5/11/2025 - SCREEN 1
CINDRY RAMIREZ FUENTES , (SPAIN)
 DIAGNOSTICS & PRACTICES
USE OF THE DIGEST SCALE AS A GLOBAL OUTCOME MEASURE FOR OROPHARYNGEAL DYSPHAGIA IN STROKE PATIENTS
- ID : 121**
TUESDAY 4/11/2025 - SCREEN 2
EMMELINE MONTANE , (FRANCE)
 NEUROREHABILITATION
A CUSTOM-MADE SHOULDER ORTHOSIS REDUCES COMPLICATIONS AND IMPROVES FUNCTIONAL OUTCOMES AMONG HEMIPLEGIC STROKE PATIENTS
- ID : 122**
WEDNESDAY 5/11/2025 - SCREEN 1
CINDRY RAMIREZ FUENTES , (SPAIN)
 SPASTICITY
SOLUTION STUDY: A NEW APPROACH FOR LOWER LIMB SPASTICITY POST-STROKE USING SHOCK WAVE THERAPY AND BOTULINUM TOXIN – A PILOT RANDOMIZED CLINICAL TRIAL
- ID : 123**
WEDNESDAY 5/11/2025 - SCREEN 1
CINDRY RAMIREZ FUENTES , (SPAIN)
 CARDIO PULMONARY
BODY WEIGHT CHANGES DURING PHASE II OF AN EXERCISE-BASED CARDIAC REHABILITATION PROGRAM IN PATIENTS WITH ISCHEMIC HEART DISEASE: INSIGHTS FROM A 2022-2023 COHORT
- ID : 128**
TUESDAY 4/11/2025 - SCREEN 4
MOHAMMED GARTIT , (MOROCCO)
 MUSCULOSKELETAL
US-GUIDED PERINEURAL AMNIOTIC MEMBRANE/UMBILICAL CORD (AM/UC) PARTICULATE INJECTIONS FOR THE IATROGENIC RADIAL NERVE PALS: A CASE REPORT
- ID : 129**
TUESDAY 4/11/2025 - SCREEN 2
ABDELILAH RHOUL , (MOROCCO)
 PAIN
MESOTHERAPY FOR CHRONIC LOW BACK PAIN
- ID : 130**
TUESDAY 4/11/2025 - SCREEN 2
MOHAMMED GARTIT , (MOROCCO)
 MUSCULOSKELETAL
PLATELET-RICH PLASMA FOR KNEE OSTEOARTHRITIS: CLINICAL AND FUNCTIONAL BENEFITS IN A RETROSPECTIVE ANALYSIS
- ID : 131**
TUESDAY 4/11/2025 - SCREEN 3
ABDELILAH RHOUL , (MOROCCO)
 PAIN
MESOTHERAPY FOR COMPLEX REGIONAL PAIN SYNDROME : A RETROSPECTIVE CASE SERIES
- ID : 134**
TUESDAY 4/11/2025 - SCREEN 3
IRRUM ANEELA , (UNITED KINGDOM)
 ELDERLY
AGE IS NO BARRIER.
- ID : 135**
THURSDAY 6/11/2025 - SCREEN 1
MARY ELIZABETH NELSON , (UNITED STATES)
 EDUCATION & TRAINING
DEVELOPMENT OF INTERDISCIPLINARY REHABILITATION TEAMS: FIRST SEMINAR IN REHABILITATION NURSING IN GHANA
- ID : 136**
TUESDAY 4/11/2025 - SCREEN 2
CYNTHIA UDENSI , (UNITED KINGDOM)
 SPASTICITY
"OPTIMIZING FUNCTIONAL OUTCOMES IN ADVANCED LOWER LIMB SPASTICITY IN MULTIPLE SCLEROSIS USING COMBINATION OF BOTULINUM TOXIN THERAPY AND PHYSIOTHERAPY"- A CASE REPORT
- ID : 137**
TUESDAY 4/11/2025 - SCREEN 3
CYNTHIA UDENSI , (UNITED KINGDOM)
 SPASTICITY
"EVALUATION OF THE REFERRAL PATHWAY FOR ADULT SPASTICITY THERAPY: A REVIEW OF PATHWAYS BETWEEN ACUTE SPECIALIST AND COMMUNITY NEUROREHABILITATION SERVICES"
- ID : 141**
FRIDAY 7/11/2025 - SCREEN 5
HASNAA BOUTALJA , (MOROCCO)
 MUSCULOSKELETAL
MEDIUM TERM OUTCOMES OF TOTAL HIP ARTHROPLASTY IN PATIENTS WITH POST-POLIO RESIDUAL PARALYSIS
- ID : 142**
TUESDAY 4/11/2025 - SCREEN 3
HASNAA BOUTALJA , (MOROCCO)
 SPECIFIC CONDITIONS & DISABILITIES
FOLLOWING HEALTH AND QUALITY OF LIFE IN BURN SURVIVORS : A LONG-TERM STUDY

- ID : 143**
THURSDAY 6/11/2025 - SCREEN 5
 HASNAA BOUTALJA , (MOROCCO)
 SPORT
 MANAGING RETURN TO PLAY FOR PROFESSIONAL HANDBALL PLAYERS AFTER TREATMENT FOR SUPERIOR LABRAL TEARS
- ID : 144**
WEDNESDAY 5/11/2025 - SCREEN 5
 MARY ELIZABETH NELSON , (UNITED STATES)
 EDUCATION & TRAINING
 INCREASES IN IN-COUNTRY TRAINING IN PRM. WORKFORCE DEVELOPMENT THROUGH IN-COUNTRY FELLOWSHIP
- ID : 149**
WEDNESDAY 5/11/2025 - SCREEN 1
 IKRAME AICHA BEHNAS , (ALGERIA)
 SPECIFIC CONDITIONS & DISABILITIES
 OSTEOARTICULAR MANIFESTATIONS IN SILVER-RUSSELL SYNDROME : A CASE REPORT
- ID : 151**
THURSDAY 6/11/2025 - SCREEN 2
 NISRINE MOUNSIF , (MOROCCO)
 NEUROREHABILITATION
 MOROCCO, IS THERE HOPE AFTER A SPINAL CORD INJURY ? RETURN TO WORK OF SPINAL CORD INJURY PATIENTS ADMITTED TO THE PMR UNIT OF IBN ROCHD UNIVERSITY HOSPITAL, CASABLANCA
- ID : 152**
TUESDAY 4/11/2025 - SCREEN 5
 IKRAME AICHA BEHNAS , (ALGERIA)
 DIAGNOSTICS & PRACTICES
 THE IMPORTANCE OF EARLY DIAGNOSIS IN WILSON DISEASE
- ID : 153**
FRIDAY 7/11/2025 - SCREEN 3
 EL BELOUI RYME , (MOROCCO)
 PELVIC FLOOR - BLADDER & BOWEL
 ASSESSMENT OF POSTERIOR TIBIAL NERVE STIMULATION EFFECTIVENESS IN PEDIATRIC OVERACTIVE BLADDER: A MOROCCAN STUDY
- ID : 154**
FRIDAY 7/11/2025 - SCREEN 2
 EL BELOUI RYME , (MOROCCO)
 PEDIATRIC
 EFFICACY OF ANKLE-FOOT ORTHOSES ON GAIT IN CHILDREN WITH CEREBRAL PALSY
- ID : 155**
FRIDAY 7/11/2025 - SCREEN 5
 SU-ANÉ ZWIEGELAAR , (SOUTH AFRICA)
 COMMUNITY
 CHILDREN'S LIVED EXPERIENCES IN PHYSICAL PARTICIPATION AT HOME, SCHOOL, AND IMMEDIATE COMMUNITY COMBINED WITH CLINICIANS INPUT ON ASSESSING THESE PHYSICAL PARTICIPATIONS
- ID : 156**
FRIDAY 7/11/2025 - SCREEN 3
 EL BELOUI RYME , (MOROCCO)
 PELVIC FLOOR - BLADDER & BOWEL
 SEXUAL DYSFUNCTION IN MULTIPLE SCLEROSIS: A SILENT STRUGGLE FOR MOROCCAN PATIENTS
- ID : 157**
FRIDAY 7/11/2025 - SCREEN 3
 EL BELOUI RYME , (MOROCCO)
 MUSCULOSKELETAL
 EVALUATION OF POSTURAL BALANCE IN PATIENTS UNDERGOING TOTAL HIP ARTHROPLASTY USING THE TIMED UP AND GO TEST (TUG)
- ID : 158**
FRIDAY 7/11/2025 - SCREEN 4
 EL BELOUI RYME , (MOROCCO)
 MUSCULOSKELETAL
 ISOKINETIC EVALUATION OF SHOULDER MUSCLE DEFICITS IN REPETITIVE STRAIN INJURY AND ITS IMPACT ON QUALITY OF LIFE AND FUNCTIONAL PERFORMANCE
- ID : 160**
FRIDAY 7/11/2025 - SCREEN 2
 KUMIKO OKAMURA , (UNITED KINGDOM)
 TECHNOLOGY AND ROBOTICS
 CONNECTING CARE: A PILOT OF A VIRTUAL OUTREACH SERVICE TO ENHANCE REHABILITATION ACCESS FOR INDIVIDUALS WITH TRAUMATIC BRAIN INJURY IN THE UK
- ID : 161**
TUESDAY 4/11/2025 - SCREEN 5
 CHIARA BUSO , (ITALY)
 MUSCULOSKELETAL
 EFFICACY AND SAFETY OF LATERAL FEMORAL CIRCUMFLEX ARTERY EMBOLIZATION FOR GREATER TROCHANTERIC PAIN SYNDROME: PROTOCOL FOR A PROSPECTIVE OBSERVATIONAL COHORT STUDY
- ID : 164**
TUESDAY 4/11/2025 - SCREEN 3
 NAN XIA , (CHINA)
 NEUROREHABILITATION
 ACOUSTIC-MAGNETIC PAS FOR MODULATING CORTICAL RETICULAR SPINAL TRACT FUNCTION: A STEP TOWARDS CLINICAL APPLICATIONS IN STROKE RECOVERY
- ID : 165**
TUESDAY 4/11/2025 - SCREEN 4
 SOUMAYA ELAREM , (TUNISIA)
 PAIN
 COMPLEMENTARY AND ALTERNATIVE MEDICINE IN DEGENERATIVE DISEASES: IMPACT ON PAIN AND FUNCTIONAL OUTCOMES

- ID : 166**
TUESDAY 4/11/2025 - SCREEN 4
YONG CHEN , (CHINA)
 NEUROREHABILITATION
ELECTROACUPUNCTURE FOR MOTOR RECOVERY IN SUBACUTE STROKE
- ID : 167**
WEDNESDAY 5/11/2025 - SCREEN 1
SOUMAYA ELAREM , (TUNISIA)
 PAIN
EPIDEMIOLOGY AND THERAPEUTIC APPROACHES OF DEGENERATIVE LUMBAR SPINAL STENOSIS IN THE ELDERLY IN PHYSICAL AND REHABILITATION MEDICINE
- ID : 168**
WEDNESDAY 5/11/2025 - SCREEN 1
SOUMAYA ELAREM , (TUNISIA)
 DIAGNOSTICS & PRACTICES
COMPARISON OF THE EFFECTIVENESS OF MANUAL THERAPY AND NEURODYNAMIC TECHNIQUES IN THE MANAGEMENT OF IDIOPATHIC CARPAL TUNNEL SYNDROME
- ID : 169**
WEDNESDAY 5/11/2025 - SCREEN 2
SOUMAYA ELAREM , (TUNISIA)
 SPECIFIC CONDITIONS & DISABILITIES
IMPACT OF OBESITY ON FEMALE SEXUAL FUNCTION: ASSESSMENT AND ASSOCIATED FACTORS
- ID : 170**
FRIDAY 7/11/2025 - SCREEN 1
SOUMAYA ELAREM , (TUNISIA)
 EDUCATION & TRAINING
PREVALENCE OF SMARTPHONE ADDICTION AMONG MEDICAL STUDENTS AND ITS IMPACT ON SLEEP DISORDERS
- ID : 171**
WEDNESDAY 5/11/2025 - SCREEN 2
SOUMAYA ELAREM , (TUNISIA)
 PAIN
THE CONTRIBUTION OF THE STRAIN COUNTER-STRAIN TECHNIQUE IN CHRONIC NECK PAIN REHABILITATION
- ID : 172**
WEDNESDAY 5/11/2025 - SCREEN 1
NAGLAA HUSSEIN , (UNITED STATES)
 MUSCULOSKELETAL
DOES THE DOSE OF GARLIC THERAPY AFFECT ITS CHONDROPROTECTIVE PROPERTIES IN KNEE OSTEOARTHRITIS?
- ID : 173**
WEDNESDAY 5/11/2025 - SCREEN 2
NAGLAA HUSSEIN , (UNITED STATES)
 MUSCULOSKELETAL
INCIDENCE OF ULNAR NERVE ENTRAPMENT AMONG CARPAL TUNNEL SYNDROME PATIENTS AND FACTORS MODIFYING IT; EPIDEMIOLOGIC STUDY STUDY
- ID : 174**
TUESDAY 4/11/2025 - SCREEN 3
RAQUEL LAMAS , (BRAZIL)
 DIAGNOSTICS & PRACTICES
CASE REPORT: REMISSION OF CHRONIC OSTEOMYELITIS FISTULA USING SHOCK WAVES
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MARIEM GADDOUR , (TUNISIA)

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KATARZYNA HOJAN , (POLAND)
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ETIENNE OJARDIAS , (FRANCE)
ELDERLY

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ANUBHAV RAKSHIT , (AUSTRIA)
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DIAGNOSTICS & PRACTICES

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MOUNA LAKHDAR , (MOROCCO)
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SRIKUMAR VENKATARAMAN , (INDIA)
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HUGO BESSAGUET , (FRANCE)
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DAISUKE NISHIDA , (JAPAN)
TECHNOLOGY AND ROBOTICS
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PAPE MADY THIAO , (SENEGAL)
COMMUNITY

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HUGO BESSAGUET , (FRANCE)
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NABIL BENTISSE , (MOROCCO)
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NABIL BENTISSE , (MOROCCO)
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DIAGNOSTICS & PRACTICES

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DANIEL ROZENKWIT , (BRAZIL)
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KAUNG ZAW HEIN , (UNITED KINGDOM)
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CLÁUDIA SOFIA CORREIA , (PORTUGAL)
CARDIO PULMONARY

CARDIAC REHABILITATION IN FRAIL PATIENTS: A MULTIDISCIPLINARY APPROACH TO IMPROVING OUTCOMES AND REDUCING HEALTHCARE BURDEN

ID : 510

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HARTWIG MOUNGUENGUI , (MOROCCO)
RESEARCH

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ID : 516

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PEDIATRIC

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KAOUTAR KABBADJ , (MOROCCO)
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JAN GEERTZEN , (NETHERLANDS)
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SHANI HALFON , (ISRAEL)
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EMNA BAHLOULI , (TUNISIA)
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ID : 554

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HUGO BESSAGUET , (FRANCE)
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EMNA BAHLOULI , (TUNISIA)
PELVIC FLOOR - BLADDER & BOWEL

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AILBHE RAFTERY , (IRELAND)
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RADIA SELLAMI , (MOROCCO)
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JUAN MARTINA , (NETHERLANDS)
DIAGNOSTICS & PRACTICES

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MANUEL COUTINHO FERNANDES , (PORTUGAL)
DIAGNOSTICS & PRACTICES

BOTULINUM TOXIN INJECTION IN CROCODILE TEARS SYNDROME: A REVIEW SERVING AS CLINICAL GUIDE

ID : 562

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MANUEL COUTINHO FERNANDES , (PORTUGAL)
SPECIFIC CONDITIONS & DISABILITIES

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HUGO BESSAGUET , (FRANCE)
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N'DEYE AMELIE MAKAREME SY , (SENEGAL)
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SANA SALAH , (TUNISIA)

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BOURHARBAL MERIEM , (MOROCCO)

DIAGNOSTICS & PRACTICES

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BARBARA DOBIES-KRZEŚNIAK , (POLAND)

MUSCULOSKELETAL

HYPERKYPHOSIS AND JOINT HYPERMOBILITY IN ADOLESCENTS- CASE CONTROL STUDY

ID : 571

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LINA LAHBABI , (MOROCCO)

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POSTURAL PROFILE ASSESSMENT OF PATIENTS WITH LOW BACK PAIN

ID : 577

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YI-SHIUNG HORNG , (TAIWAN ROC)

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EMILIO JAVIER FRUTOS REOYO , (SPAIN)

PEDIATRIC

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ID : 579

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ADELE AGOSTINI , (ITALY)

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ID : 586

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AHLAM NACIRI , (MOROCCO)

SPECIFIC CONDITIONS & DISABILITIES

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ID : 588

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AHLAM NACIRI , (MOROCCO)

NEUROREHABILITATION

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ID : 590

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ATHANASIOS TSIVGOULIS , (GREECE)

SPASTICITY

SPASTICITY PREDICTIVE FACTORS OF INPATIENTS WITH STROKE DIAGNOSIS DURING THEIR HOSPITALIZATION IN A REHABILITATION CLINIC.

ID : 591

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AHLAM NACIRI , (MOROCCO)

PEDIATRIC

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ID : 592

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ABHISHEK SRIVASTAVA , (INDIA)

DIAGNOSTICS & PRACTICES

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ATHANASIOS TSIVGOULIS , (GREECE)

SPASTICITY

SPASTICITY AND CLONUS MANAGEMENT OF OUTPATIENT MULTIPLE SCLEROSIS PATIENTS WITH BOTULINUM TOXIN A REHABILITATION CENTER

ID : 596

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RAFAELA BATISTA SOUZA , (BRAZIL)

NEUROREHABILITATION

INFLUENCE OF PHYSICAL ACTIVITY LEVEL ON THE GAIT FUNCTION OF INDIVIDUALS WITH POST-STROKE SPASTIC HEMIPARESIA

ID : 597

WEDNESDAY 5/11/2025 - SCREEN 3

MANEL SOUISSI , (TUNISIA)

COMMUNITY

BALLISTIC TRAUMA AND AMPUTATION IN MILITARY PERSONNEL : ASSESSMENT OF FUNCTIONAL AND PSYCHOSOCIAL CONSEQUENCES.

- ID : 599**
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MANEL SOUISSI , (TUNISIA)
 PAIN
 FUNCTIONAL AND SOCIO-PROFESSIONAL IMPACT OF AN EXERCISE REHABILITATION PROGRAM IN PATIENTS WITH CHRONIC LOW BACK PAIN
- ID : 602**
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SHIPRA CHAUDHARY , (INDIA)
 NEUROREHABILITATION
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- ID : 603**
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MATTHIAS BETHGE , (GERMANY)
 GLOBAL REHABILITATION APPROACH
 EFFECTIVENESS OF A MULTIMODAL STRATEGY TO ENHANCE REHABILITATION UTILIZATION IN INDIVIDUALS AT RISK OF RECEIVING A DISABILITY PENSION: RESULTS FROM A RANDOMIZED CONTROLLED TRIAL
- ID : 604**
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MARCO GIANGRANDE , (ITALY)
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FATIMA-EZZAHRA KHADIM , (MOROCCO)
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- ID : 609**
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MANEL SOUISSI , (TUNISIA)
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- ID : 610**
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FATIMA AZZAHRA ANAJJAR , (MOROCCO)
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- ID : 611**
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HOUSSAM EL KHALET , (MOROCCO)
 MUSCULOSKELETAL
 ISOKINETIC PROFILE OF PATIENTS WITH PATELLOFEMORAL SYNDROME
- ID : 612**
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KAOUTAR EL AABEDY , (MOROCCO)
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- ID : 613**
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- ID : 614**
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- ID : 615**
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FATIMA AZZAHRA ANAJJAR , (MOROCCO)
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- ID : 617**
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FATIMA-EZZAHRA KHADIM , (MOROCCO)
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- ID : 619**
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FATIMA AZZAHRA ANAJJAR , (MOROCCO)
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- ID : 620**
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MARINE DEVIS , (BELGIUM)
 SPASTICITY
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ID : 622

FRIDAY 7/11/2025 - SCREEN 2

MARZENA PEŁCZYŃSKA , (POLAND)
RESEARCH

THE INFLUENCE INTERFERENTIAL CURRENT OVER PROLIFERATION OF CANCER CELLS IN "IN VITRO" ASSAY

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GERARD FRANCISCO , (UNITED STATES)
NEUROREHABILITATION

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MARIEM GADDOUR , (TUNISIA)
COMMUNITY

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ID : 626

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ETIENNE OJARDIAS , (FRANCE)
SPASTICITY

BOTULINUM TOXIN UNDERUSE IN OLDER STROKE SURVIVORS WITH SPASTICITY: A NATIONWIDE POPULATION-BASED COHORT STUDY

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PATRIK GÖRANSSON , (SWEDEN)
TECHNOLOGY AND ROBOTICS

DIGI-CARE: DEVELOPING DIGITAL REHABILITATION PROCESSES AND DIGI-CLINICAL WORKFLOWS TO ENHANCE CANCER REHABILITATION

ID : 633

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RIHAB MONCER , (TUNISIA)
NEUROREHABILITATION

COMPLICATIONS IN ACUTE NEUROLOGICAL REHABILITATION: A DESCRIPTIVE STUDY

ID : 634

WEDNESDAY 5/11/2025 - SCREEN 4

RIHAB MONCER , (TUNISIA)
NEUROREHABILITATION

FUNCTIONAL OUTCOMES FOLLOWING ACUTE NEUROLOGICAL REHABILITATION: A DETAILED DESCRIPTIVE STUDY

ID : 635

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MARIA JOAO SOUSA , (PORTUGAL)
ONCOLOGY

HAND MYXOFIBROSSARCOMA AND THE IMPORTANCE OF THUMB OPPOSITION

ID : 637

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MAROUANE DAIMI , (MOROCCO)
SPECIFIC CONDITIONS & DISABILITIES

PRISE EN CHARGE EN MÉDECINE PHYSIQUE ET DE RÉADAPTATION DE LA SCLÉRODERMIE SYSTÉMIQUE : À PROPOS D'UN CAS

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WEDNESDAY 5/11/2025 - SCREEN 2

MAROUANE DAIMI , (MOROCCO)
CARDIO PULMONARY

THÉRAPIES INSPIRÉES DES SPORTS D'ENDURANCE POUR AMÉLIORER LA CAPACITÉ RESPIRATOIRE : UNE APPROCHE INNOVANTE EN RÉHABILITATION

ID : 641

WEDNESDAY 5/11/2025 - SCREEN 5

IKRAME AICHA BEHNAS , (ALGERIA)
NEUROREHABILITATION

WERNICKE'S ENCEPHALOPATHY IN PREGNANCY: A CASE REPORT OF SEVERE NEUROLOGICAL COMPLICATIONS

ID : 643

TUESDAY 4/11/2025 - SCREEN 5

NÚRIA ROSELL ROMERO , (SPAIN)
SPECIFIC CONDITIONS & DISABILITIES

REHABILITATION IN REANIMATION SURGERY OF PERIPHERAL FACIAL PALSY AFTER FACIAL SCHWANNOMA RESECTION

ID : 645

TUESDAY 4/11/2025 - SCREEN 3

HIROFUMI MAEDA , (JAPAN)
ONCOLOGY

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ID : 646

THURSDAY 6/11/2025 - SCREEN 3

MOHAMED MEHDI KOUADSSI , (MOROCCO)
PEDIATRIC

COMPARISON OF SPATOTEMPORAL GAIT PARAMETERS IN CHILDREN OPERATED FOR DEVELOPMENTAL DYSPLASIA OF THE HIP (DDH) AND HEALTHY CONTROLS

ID : 647

THURSDAY 6/11/2025 - SCREEN 3

JELKA JANSKA , (SLOVENIA)
SPASTICITY

MAPPING THE JOURNEY AND EXPERIENCE OF PEOPLE LIVING WITH POST-STROKE SPASTICITY

ID : 648
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AYMEN HADJ SALAH , (TUNISIA)
MUSCULOSKELETAL

LOW BACK PAIN IN THE WORKPLACE: EPIDEMIOLOGICAL INSIGHTS AND REHABILITATION STRATEGIES

ID : 649
WEDNESDAY 5/11/2025 - SCREEN 4

AYMEN HADJ SALAH , (TUNISIA)
MUSCULOSKELETAL

"SPINE DISORDERS AMONG PHYSIOTHERAPISTS: PREVALENCE, RISK FACTORS, AND WORKPLACE IMPACT"

ID : 650
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MOHAMED MEHDI KOUADSSI , (MOROCCO)
NEUROREHABILITATION

MANAGEMENT OF SPINAL CORD TRAUMA IN PHYSICAL MEDICINE AND REHABILITATION

ID : 651
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MOHAMED MEHDI KOUADSSI , (MOROCCO)
SPECIFIC CONDITIONS & DISABILITIES

THE ROLE OF PHYSICAL MEDICINE IN THE MANAGEMENT OF A PATIENT WITH ANTICOAGULANT-RELATED HEMORRHAGIC COMPLICATIONS

ID : 653
TUESDAY 4/11/2025 - SCREEN 4

AYDA BELMLIH , (MOROCCO)
MUSCULOSKELETAL

EFFECTS OF KINESIOTAPING ON DISABILITY AND PAIN IN PATIENTS WITH ROTATOR CUFF TENDINOPATHY: DOUBLE-BLIND RANDOMIZED CLINICAL TRIAL

ID : 654
THURSDAY 6/11/2025 - SCREEN 2

ASMAA MAHMOUD MOUSTAFA , (ITALY)
NEUROREHABILITATION

ART THERAPY IN STROKE PATIENTS: GOING BACK TO BASICS – A SCOPING REVIEW

ID : 664
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SANA SALAH , (TUNISIA)
SPECIFIC CONDITIONS & DISABILITIES

CHRONIC NECK PAIN AND TEMPOROMANDIBULAR DYSFUNCTION : POSTURAL IMPACT AND EFFECTIVENESS OF A SPECIFIC REHABILITATION PROTOCOL.

ID : 667
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SANA SALAH , (TUNISIA)
MUSCULOSKELETAL

IMPACT OF COMBINED TECAR THERAPY AND CONVENTIONAL TREATMENT ON PATIENTS WITH ILIOTIBIAL BAND SYNDROME: A PROSPECTIVE COMPARATIVE STUDY

ID : 668
FRIDAY 7/11/2025 - SCREEN 3

JOE NOCERA , (UNITED STATES)
RESEARCH

THE EFFECTS OF 12-WEEK EXERCISE INTERVENTIONS ON CARDIOVASCULAR FITNESS AND FMRI-ASSESSED CEREBROVASCULAR REACTIVITY (CVR) IN HEALTHY OLDER ADULTS

ID : 672
WEDNESDAY 5/11/2025 - SCREEN 3

ASMA ELHANAFI , (MOROCCO)
COMMUNITY

LOW BACK PAIN AMONG TEXTILE FACTORIES WORKERS IN MARRAKESH: RISK FACTORS AND PREVENTIVE MEASURES.

ID : 674
WEDNESDAY 5/11/2025 - SCREEN 3

LAURENT BALLAZ , (CANADA)
TECHNOLOGY AND ROBOTICS

ACCEPTABILITY OF AN OVERGROUND GAIT TRAINER WITH PARTIAL BODY WEIGHT SUPPORT IN A CLINICAL ENVIRONMENT

ID : 682
THURSDAY 6/11/2025 - SCREEN 3

IULIANA TEOHAR , (ROMANIA)
TECHNOLOGY AND ROBOTICS

THE ROLE OF TELEREHABILITATION IN PAIN AND MENTAL HEALTH MANAGEMENT FOR KNEE OSTEOARTHRITIS: A META-ANALYSIS OF RANDOMIZED CONTROLLED TRIALS

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SANA SALAH , (TUNISIA)
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THE ROLE OF EARLY URODYNAMIC ASSESSMENT IN MANAGING NEUROGENIC BLADDER AFTER POST-INFECTIOUS PARAPLEGIA : A CASE REPORT
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OKSANA SAYKO , (UNITED STATES)
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- ID : 728**
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 MARIYA SADEK , (UNITED STATES)
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ID : 799

FRIDAY 7/11/2025 - SCREEN 3

SIDI MOHAMMED BOUCHENTOUF , (MOROCCO)
TECHNOLOGY AND ROBOTICS

CONTRIBUTION OF ROBOTIC SURGERY TO SURGEON ERGONOMICS: A REVIEW OF CURRENT DATA AND PERSPECTIVES

ID : 801

WEDNESDAY 5/11/2025 - SCREEN 2

TZU-TING LIN , (TAIWAN ROC)
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FRIDAY 7/11/2025 - SCREEN 1

JAN MIKOŁAJCZYK , (POLAND)
MUSCULOSKELETAL

EVALUATION OF DISABILITY LEVELS IN PATIENTS AFTER TOTAL KNEE AND HIP ARTHROPLASTY UNDERGOING INPATIENT REHABILITATION BASED ON THE 36-ITEM VERSION OF THE WHODAS 2.0 QUESTIONNAIRE

ID : 809

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ELZBIETA MILLER , (POLAND)
RESEARCH

CIRCULATING SERUM VEGF, IGF¹ AND MMP⁹ AND EXPRESSION OF THEIR GENES AS POTENTIAL PROGNOSTIC MARKERS OF RECOVERY IN POST-STROKE REHABILITATION - A PROSPECTIVE OBSERVATIONAL STUDY

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IFFAT KHAN , (BANGLADESH)
SPECIFIC CONDITIONS & DISABILITIES

PREVALENCE OF POST-TRAUMATIC STRESS DISORDER AND ITS CORRELATION WITH INJURY SEVERITY AMONG PATIENTS WITH SPINAL CORD INJURY FOLLOWING THE 2024 BANGLADESH REVOLUTION

ID : 811

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YIROZOUNLOMIAN TIAHO , (BURKINA FASO)
COMMUNITY

ANALYSIS OF THE BURDEN OF CAREGIVERS OF CEREBRAL PALSY CHILDREN IN THE CITY OF OUAGADOUGOU

ID : 812

TUESDAY 4/11/2025 - SCREEN 5

YIROZOUNLOMIAN TIAHO , (BURKINA FASO)
COMMUNITY

ASSESSMENT OF EXERCISE RE-TRAINING IN CHRONIC LOW BACK PAIN PATIENTS IN SUB-SAHARAN AFRICA : A CASE SERIES STUDY USING INDIRECT MEASUREMENT OF VO₂MAX

ID : 817

THURSDAY 6/11/2025 - SCREEN 2

THOMAS HAIG , (UNITED STATES)
SPECIFIC CONDITIONS & DISABILITIES

PROJECT: KOLLYWOOD STUDIOS - RAPID DEPLOYMENT OF EDUCATIONAL VIDEOS BY AND FOR PEOPLE WITH DISABILITIES AFTER THE NEPAL EARTHQUAKE.

ID : 818

THURSDAY 6/11/2025 - SCREEN 4

THOMAS HAIG , (UNITED STATES)
COMMUNITY

CINEMA DAKAR - EMPOWERING SENEGALESE DISABILITY SCHOOL AND LEPROSY COMMUNITY WITH VIDEO PRODUCTION SKILLS.

ID : 819

THURSDAY 6/11/2025 - SCREEN 1

THOMAS HAIG , (UNITED STATES)
EDUCATION & TRAINING

IRF FILMS - DOCUMENTARY AND PROMOTIONAL VIDEOS TO SUPPORT PRM TRAINING IN LOW AND MIDDLE INCOME COUNTRIES.

ID : 820

THURSDAY 6/11/2025 - SCREEN 4

SIMRA JAVAID , (UNITED STATES)
PEDIATRIC

PEDIATRIC REHABILITATION INTEGRATION IN ACUTE CARE: NAVIGATING STORMS, TONES, AND BEYOND – A COMPREHENSIVE APPROACH TO EARLY REHAB MANAGEMENT, COUNSELING, EDUCATION, AND PROGNOSTICATION BY PEDIATRIC PHYSIATRISTS

ID : 832

FRIDAY 7/11/2025 - SCREEN 2

ANNA BOADA-PLADELLORENS , (ANDORRA)
NEUROREHABILITATION

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ID : 833

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DOINIȚA OPREA , (ROMANIA)
MUSCULOSKELETAL

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FRIDAY 7/11/2025 - SCREEN 3

YOUNES EL ANBARI , (MOROCCO)
MUSCULOSKELETAL

ROLE OF ULTRASOUND IN THE MANAGEMENT OF POPLITEAL SYNOVIAL CYST : A CASE REPORT

ID : 836

THURSDAY 6/11/2025 - SCREEN 5

MÓNICA JORGE , (PORTUGAL)
NEUROREHABILITATION

DELAYED ISCHEMIC STROKE AS A RARE BUT SEVERE COMPLICATION AFTER GAMMA-KNIFE RADIOSURGERY FOR ARTERIOVENOUS MALFORMATION: A CASE REPORT AND LITERATURE REVIEW

ID : 839

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MARWA GHANMI , (TUNISIA)
DIAGNOSTICS & PRACTICES

THE ROLE OF ACUPUNCTURE IN MANAGING SEQUELAE OF PERIPHERAL FACIAL PARALYSIS

ID : 840

FRIDAY 7/11/2025 - SCREEN 5

NUNUNG NUGROHO , (INDONESIA)

PAIN

TRANSFORMING THE MANAGEMENT OF SERRATUS ANTERIOR MUSCLE PAIN SYNDROME: ULTRASOUND-GUIDED HYDRODISSECTION OF THE LONG THORACIC NERVE WITH 5% DEXTROSE – A CASE REPORT

ID : 842

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IRRUM ANEELA , (UNITED KINGDOM)

DIAGNOSTICS & PRACTICES

BRIDGING IMPAIRMENT TO INDEPENDENCE.

ID : 844

THURSDAY 6/11/2025 - SCREEN 5

RONALD TOLCHIN , (UNITED STATES)

PAIN

AN INTEGRATIVE MEDICINE AND WELLNESS APPROACH TO MANAGEMENT OF LOW BACK PAIN

ID : 845

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ALEJANDRO PLAZA MERCHÁN , (SPAIN)

PAIN

IMPROVEMENT OF NOTALGIA PARESTHETICA IN PATIENTS TREATED WITH INTERVENTIONAL TECHNIQUES ASSOCIATED WITH TOPICAL CAPSAICIN.

ID : 848

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SALAHEDDINE MASFAR , (MOROCCO)

SPECIFIC CONDITIONS & DISABILITIES

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INÊS FIGUEIREDO , (PORTUGAL)

NEUROREHABILITATION

CLINICAL CASE: ADVANCED NEUROMOTOR REHABILITATION IN MACHADO-JOSEPH DISEASE WITH PROXIMAL TETRAPARESIS

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SATOSHI TANAKA , (JAPAN)

NEUROREHABILITATION

EFFECTS OF GOAL-SETTING BEFORE AN UNSUPERVISED REACHING TASK ON BEHAVIORAL PERFORMANCE AND MOTIVATION IN PATIENTS WITH SUBACUTE STROKE

ID : 854

FRIDAY 7/11/2025 - SCREEN 5

NICOLÒ BALDINI , (ITALY)

NEUROREHABILITATION

HOW CAN BIG DATA HELP DEFINE THE CLINICAL AND FUNCTIONAL PROGNOSIS? THE PREPARE PROJECT AND THE CASE FOR PARKINSON'S DISEASE.

ID : 857

FRIDAY 7/11/2025 - SCREEN 4

MARIA GABRIELLA CERAVOLO , (ITALY)

GLOBAL REHABILITATION APPROACH

KNOWLEDGE AND USE OF THE ICF FOR HEALTH NEEDS ASSESSMENT AND REHABILITATION: THE CASE OF PAKISTAN

ID : 858

WEDNESDAY 5/11/2025 - SCREEN 3

FATEMA NEWAZ , (BANGLADESH)

EDUCATION & TRAINING

ANALYSIS PERCEPTION OF PHYSIATRIST REGARDING KNOWLEDGE, ALTITUDE AND PRACTICE IN REFORMING THE SPECIALITY IN BANGLADESH: A STEP TOWARD WHO 2030 GOAL

ID : 859

WEDNESDAY 5/11/2025 - SCREEN 2

TANYA VERGHESE , (UNITED STATES)

ELDERLY

ASSESSING SUBJECTIVE HEARING LOSS SCREENING IN OLDER ADULTS: COMPARING SELF-REPORT QUESTIONS AND HHIE-S WITH WHO AUDIOMETRIC CRITERIA IN A BRONX-BASED STUDY

ID : 860

FRIDAY 7/11/2025 - SCREEN 5

FATEMA NEWAZ , (BANGLADESH)

NEUROREHABILITATION

REHABILITATION OF OBSTETRIC CASES ALONG WITH COMPLICATION FOLLOWING SPINAL ANESTHESIA AT RURAL TERTIARY CARE HOSPITAL: CASE SERIES

ID : 861

THURSDAY 6/11/2025 - SCREEN 2

ANDREEA-IULIA VLADULESCU-TRANDAFIR , (ROMANIA)

SPECIFIC CONDITIONS & DISABILITIES

MULTISYSTEM POST-VACCINE SYNDROME AND NEUROINFLAMMATION: THE CENTRAL ROLE OF REHABILITATION IN RESTORING COGNITIVE AND FUNCTIONAL HEALTH

ID : 863

FRIDAY 7/11/2025 - SCREEN 2

ROMINA OLMOS DE AGUILERA AEDO , (CHILE)

MUSCULOSKELETAL

IMPACT OF EARLY VS. TRADITIONAL PROSTHETIC FITTING ON WORK RETURN IN TRANSTIBIAL AMPUTEE PATIENTS: A NON-CONCURRENT COHORT STUDY AT HOSPITAL DEL TRABAJADOR – ACHS

ID : 868 THURSDAY 6/11/2025 - SCREEN 3 DANA SVIKE , (LATVIA) SPECIFIC CONDITIONS & DISABILITIES	PATIENT EXPERIENCE OF PREDICTIVE FACTORS FOR WORK DISABILITY AFTER LUMBAR MICRODISCECTOMY
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