



**DYNAMICS OF THE RESTORATION OF SENSORY-MOTOR AND
COGNITIVE FUNCTIONS IN THE OUTPATIENT STAGE, WHICH IS
OBSERVED IN PATIENTS AFTER A STROKE.**

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The purpose of the study. Implementation of measures to rehabilitate neurological complications in patients who have had a stroke in an outpatient clinic.

In the rehabilitation of patients who have had a stroke in the outpatient stage, the method of external rhythmic stimulation is based on the theory of functional analysis of sensomotor processes. This theory was founded on the investigation of the cyclical actions of man [Prokopenko S.V., 2000; Rudnev V.A., 2001].

The leprosy of TRS is isolation, quantitative assessment of leading sensory methods and determination of their optimal range in the event of a violation of senso-motor processes, the use of light, sound and light-voice stimulation in a comprehensive rehabilitation program for patients with ischemic insular complications. The object of the study is reproductive tapping (clapping, clapping with hands).

The effectiveness of the method of external rhythmic stimulation in patients with complications of ischemic stroke of the brain is associated with exposure to the central joints of the functional system of voluntary movements.

The use of external rhythmic stimulation leads to the correction of temporal parameters of movement by stabilizing and expanding temporal motor ranges. As a result, it helps to activate the processes of integration in the brain.

When the results of the clinical neurological examination were analyzed on the Ashworth modified scale (Table 1), the rehabilitation measures carried out showed different indications before starting in patients in both groups. The study found that patients experience moderate impairment and imbalance of active movements, joint movements and mobility, with a lesser degree of pain sensation. In patients who had suffered a stroke in the main group, a rehabilitation process was carried out using the method of external rhythmic stimulation (TRS). Standard rehabilitation in patients with a comparative group was carried out without TRS.

Before the start of rehabilitation activities, the best results of rehabilitation in basic Group patients on an outpatient basis were found, using an external rhythmic stimulation method, with both Group patients having the same indicators. In addition to sensory-motor functions, measures have been taken to improve the dynamics of cognitive functions in the patient in the research group.





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The relevance of neuropsychological studies is primarily due to the need to clarify the localization of the cranial foci; secondly, to predict the possibility of restoring or compensating for the identified disorders; thirdly, to carry out correction by choosing a specific rehabilitation program. The study was followed by a neuropsychological study after careful examination of disease history and neurological examination data. Directions on the functions of time, place, personality, perception analysis, concentration and calculation, memory and speech were analyzed.

The main criterion for assessing the effectiveness of social rehabilitation of patients with complications of cerebral ischemic stroke is the degree of independence of patients in everyday life, their ability to provide self-service.

The survey was conducted in 140 patients with complications of a cerebral ischemic stroke before and after rehabilitation measures, the results of the assessment were carried out using the Bartel scale. The sum of the points was calculated for a functional assessment of the degree of extensibility to everyday life. Total independence in everyday life was 100 points. With the help of the external rhythmic stimulation method, patients in the main group with complications of cerebral ischemic stroke who undergo rehabilitation treatment on an outpatient basis have a better recovery of their level of tolerance to daily life. Also, the positive effects of Group rehabilitation measures using the TRS method remain, while the comparative group without using the TRS method has seen an increase in the number of patients with moderate disabilities.

In conclusion, the treatment of patients in the outpatient phase using the TRS method and accompanied by standard treatment rehabilitation measures have shown their effectiveness.

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