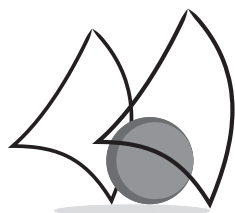


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**MULTIDISCIPLINARY (NURSING, PSYCHOLOGY, PHYSICAL THERAPY, OCCUPATIONAL THERAPY, PHARMACY, ORAL MEDICINE, SOCIAL SERVICES)
Experience report: patient health education in physical therapy care
in Hematopoietic Stem Cells Transplantation (HSCT)**

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INTRODUCTION: The hematopoietic stem cell transplantation (HSCT) is a procedure with a high degree of mortality and comorbidity that requires the attention of a multidisciplinary team. Chemotherapy, radiation therapy and HSCT can lead to some limitations such as bone pain, muscle retraction, shortening and weakness, decreased range of motion (ROM), respiratory disorders and physical deconditioning. In this context, physical therapy monitoring aims to preserve and restore patient functional integrity and to prevent disorders caused by the disease treatment. Health education directed to patients and family members performed during the course of physical therapy care aims at helping to promote health and quality of life during treatment. **OBJECTIVES:** To describe the importance of patient health education in physical therapy activities for better evolution and prevention of respiratory and motor complications, favoring patient recovery during HSCT. **METHODS:** A retrospective review of medical records of a public hospital. **RESULTS:** A 34-year-old patient, diagnosed with ALL, was submitted to syngeneic HSCT. At the late postoperative period, he had left (L) patellar tendon injury with decreased muscle strength, ROM and proprioceptive deficit. He reported frequent falls due to L knee instability and required the use of Canadian crutches. During hospitalization for HSCT, proprioception and balance training were performed, with progression from bilateral to unilateral support, global active, isometrics and self-stretching exercises and gait training. Pulmonary re-expansion breathing exercises, associated with active elevation of the upper limbs were performed. The patient was instructed to perform these exercises daily, to be continued after discharge. The patient showed good adherence to the exercises proposed by the physical therapist. 45 days after the HSCT, the patient was walking 40 minutes, 3 times a week. He had L quadriceps atrophy and L knee flexion limitation; however, without the help of Canadian crutches and no history of falls. **DISCUSSION and CONCLUSION:** Although the physical therapy goal during HSCT is not the recovery of an orthopedic injury, we believe that in the case of an individual who will undergo a period of severe thrombocytopenia and risk of falls due to joint instability, education becomes essential. We can observe in clinical practice that the patient who becomes the protagonist of his treatment has a better performance and recovery. Monitoring by a physical therapist can provide improvement or even the cure of problems, through light physical exercises, stretching and respiratory exercises and other techniques.

Keywords: physical therapy, education, HSCT