Activity assessment of adults with meningomyecele (MMC):Comparison of Occupational Therapy assessment instruments and neuro-psychological testing A pilot study

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Introduction

The majority of persons with MMC have various degrees of cognitive impairments, such as lack of initiative, concentration, memory, simultaneous capacity, planning and strategic thinking.

During adolescence expectations on the person regarding living on their own, higher education, work and interpersonal relationships accentuate cognitive impairments.

While some persons with MMC are neuro-psychologically tested before school or during school age, there are currently no routine cognitive assessments for this group in Sweden. Furthermore, test results not always show a person's practical difficulties in everyday life. In order to choose adequate intervention an individual's cognitive difficulties and the degree of disability awareness need to be assessed.

Objectives

The aim of the present study is

- to compare the results of neuro-psychological tests with the results of activity related Occupational Therapy assessments
- to identify suitable clinical assessment methods relevant for this group to be able to plan adequate interventions

Methods

Test group: all young adults with MMC referred to our clinic during Spring 2009 were invited to join the project.

The following assessment instruments are used in the study:

- ADL-taxonomy (an interview-based ADL-assessment)
- Cognitive Screening Battery (KSB)
- Assessment of Motor and Process Skills (AMPS)
- Assessment of Disability Awareness (AAD)
- Neuro-psychological assessment according to common practice

The study's procedure

- Occupational Therapist sees the person at the clinic for ADL-taxonomy, AMPS-interview and KSB
- 2. Telephone interview with parents for comparison with the person's self-assessment (Occupational Therapist)
- 3. AMPS/AAD at the person's home (Occupational Therapist)
- 4. Neuro-psychological assessment (psychologist)

Expected results and contributions to the practice/evidence base of OT include

• identifying suitable assessment tools for educating the person's environment and for planning appropriate intervention

Work in progress report to be finished in 2009