

عنوان مقاله:

Ambulatory and Social Performance Status After Transfemoral Prosthetic Rehabilitation Regarding Age, Gender, and Marital Status

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خلاصه مقاله:

Objectives: This study aims to determine the association of ambulatory and social performance status of transfemoral prosthetic users with their age, gender, and marital status. **Methods:** A cross-sectional study was conducted on ۴۰۰ transfemoral prosthesis users. A sample was recruited from both genders aged ۱۰-۶۰ years using the prosthesis for at least one year. They were selected using the non-probability convenience sampling method from the Pakistan Institute of Prosthetic and Orthotic Sciences from July ۲۰۱۹ to December ۲۰۱۹. Lower extremity functional scale and short form-۳۶ health survey questionnaire (SF-۳۶) were used for data collection, followed by statistical analysis. **Results:** Ambulatory status (as measured by the total lower extremity functional scale) revealed significant association ($P < ۰.۰۰۱$) with age. The highest score belonged to the ۱۰-۳۰ years age group. Also, there was a significant association ($P = ۰.۰۰۳$) with marital status with the highest scores for unmarried ones. However, no significant ($P = ۰.۷۰۵$) gender association was noted though scores were higher for the male gender. As regards, the social performance was measured by SF-۳۶. The findings revealed a significant association ($P < ۰.۰۰۵$) of most domains of SF-۳۶ with age groups, with the highest scores for the age group of ۱۰-۳۰ years. Also, a significant association with the gender with higher scores in females was noted in most domains. In contrast, no significant association with marital status was reported in most domains. **Discussion:** Ambulatory status has a significant association with age and marital status with no significant gender association. While social performance has a significant association with gender, most domains had significant associations with age groups. However, no association with marital status was present

کلمات کلیدی:

Amputation, Functional status, Lower extremity, Mobility, Prosthesis, Quality of Life

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