

## **Ugotavljanje razumljivosti in ocena skladnosti med ocenjevalci za slovenski prevod lestvice za oceno funkcionalne hoje (FGA) pri pacientih po možganski kapi**

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**Uvod:** Pri osebah po preboleli možganski kapi so zelo pogosto prisotne motnje ravnotežja, ki pomembno vplivajo tudi na sposobnost hoje in tveganje za padce (1). Ocena funkcionalne hoje (angl. Functional gait assessment – FGA) je ena redkih ocenjevalnih lestvic, ki omogoča ocenjevanje ravnotežja med hojo. Vsebuje deset nalog, ki vključujejo hojo po ravnem, spremembo hitrosti hoje, hojo z obračanjem glave horizontalno, hojo z nagibi glave vertikalno, hojo in obrat na mestu, prestopanje ovire, hojo na zmanjšani podporni ploskvi, hojo z zaprtimi očmi, hojo nazaj in hojo po stopnicah (5). Namen predstavljene študije je bilo ugotoviti skladnost med ocenjevalci, ki so uporabljali slovenski prevod FGA pri pacientih po možganski kapi. **Metode:** Pet ocenjevalcev (4 fizioterapevti z 10- do 20-letnimi delovnimi izkušnjami na področju rehabilitacije po možganski kapi ter 1 študentka fizioterapije) je pol ure pred predvidenim začetkom ocenjevanja dobilo ocenjevalne protokole z navodili za ocenjevanje. Sledilo je samostojno preučevanje testa brez možnosti diskusije. Nato so se ocenjevalci razporedili na statična mesta za opazovanje vzdolž poligona. Dva ocenjevalca in fizioterapevt, ki je preiskovancem demonstriral naloge, dajal ustna navodila in spremljal preiskovance med hojo, so imeli štoparice. Ocenjevalci so po lestvici FGA hkrati ocenili vsakega izmed desetih pacientov po možganski kapi, ki so bili sposobni brez pomoči in čezmerne utrujanja prehoditi vsaj 6 metrov. Demonstraciji posamezne naloge je sledil testni poizkus in nato poizkus, ki je bil vrednoten s točkami od 0 do 3 glede na hitrost in kakovost izvedbe ter obseg motenj ravnotežja. Dobljeni podatki so bili obdelani s programom SPSS, razlike med ocenjevalci glede povprečne ocene smo preizkusili z enosmerno analizo variance za ponovljene meritve. Skladnost med ocenjevalci smo ocenili z intraklasnim korelacijskim koeficientom (dvosmerni naključni model za posamezno meritev – ICC (2,1), oblika za absolutno skladnost (2) in prikazali s črtnim diagramom (3, 4). **Rezultati:** ICC je znašal 0,984. Med ocenjevalci ni bilo statistično značilne razlike v povprečni oceni (analiza variance za ponovljene meritve:  $p = 0,190$ ). **Zaključki:** V primerjavi z drugimi podobnimi študijami (5, 6) smo pri slovenskem prevodu lestvice FGA ugotovili odlično skladnost ocenjevalcev, zato ga bomo na oddelku po možganski kapi uporabljali kot eno izmed metod ocenjevanja funkcionalnosti hoje in dinamičnega ravnotežja. Z nadaljnjim delom bomo poskušali natančneje opredeliti vrsto dejavnikov in stopnjo njihovega vpliva na nepravilnosti pri hoji.

**Ključne besede:** ocenjevanje hoje, ravnotežje, rehabilitacija, veljavnost in zanesljivost, možganska kap.

## Evaluation of comprehensibility of Slovenian translation of Functional Gait Assessment (FGA) and conformity among raters in patients after stroke

**Background:** Balance impairments are a frequent consequence of cerebral stroke which can impair the patient's walking abilities and increase the risk of falls (1). The Functional gait assessment (FGA) scale is one of the few measuring scales that enable the assessment of balance during gait. It consists of 10 tasks including gait on level surface, change in gait speed, gait with horizontal head turns, gait with vertical head turns, gait and pivot turn, stepping over obstacle, gait with narrow base of support, gait with eyes closed, ambulating backwards and gait on steps (5). The aim of the study was to determine internal consistency among raters using Slovenian translation of FGA in patients after stroke. **Methods:** Five raters (4 licensed physical therapists with 10-20 years of experience in rehabilitation of patients after stroke, and 1 physiotherapy student), received instructions for the assessment half an hour before the testing and studied the instructions independently without questions or discussion. Then they positioned themselves at equal interval along both sides of the walkway and simultaneously used the FGA to evaluate each of the ten persons after stroke that were able to walk at least 6 m without assistance or fatigue. Individual tasks were demonstrated and then performed by the subjects firstly as a test trial and secondly as a trial evaluated on a scale from 0 to 3 in relation to the speed and quality of activity and the severity of balance deficit. The collected data were analyzed with SPSS, the differences among the raters in relation to the average score were tested with one-way analysis of variance for repeated measures. The conformity among the evaluators was assessed with intraclass correlation coefficient - Two-way random single measure ICC (2, 1) – Consistency/Absolute Agreement (2) and illustrated on a line diagram (3, 4). **Results:** Similarly to other comparable studies (5, 6) the consistency among raters using the Slovenian translation of FGA was found to be excellent. **Conclusions:** The Slovenian translation of FGA will therefore be used at the department for rehabilitation after stroke as one of the methods for assessment of gait functionality and dynamic balance. In our further activities we intend to define the type of factors and the level of their effect on gait anomalies.

**Keywords:** gait assessment, balance, rehabilitation, validity and reliability, stroke.

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