

MOVING AROUND IS BETTER!

Immobilization Syndrome is reversible if a patient begins to move around as soon as possible. After checking with your nurse or therapist, return to your regular activities, as your tolerance level allows.

- Sit in a chair for meals and rest periods.
- Do your grooming at the sink or take a bath or shower.
- Shave or put on makeup as you would at home.
- Get dressed if you don't have a test scheduled.
- Get up to go to the bathroom.
- Walk according to your capacity. Don't hesitate to ask to be accompanied or to leave your room.

AVOID

- Staying in bed all day.
- Prolonging naps unnecessarily.
- Going to bed for the night too early.

One week of immobilization may require three weeks of recovery, particularly in an older person.



ADVICE FOR LOVED ONES

Bring the following personal effects to the hospital and identify them, if appropriate:

- Corrective lenses (glasses)
- Hearing aid with batteries
- Dentures, partial plates, bridges
- Socks and closed-back, slip-resistant shoes or slippers comfortable for walking
- Bathrobe and grooming articles: comb, soap, toothbrush
- Cane or walker usually used at home

We encourage you to accompany your loved one as he/she moves around, according to the staff's instructions. ***It's important to his/her health.***



FondationCHUS

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References:

Kergoat et Dupras, 1999; Lacombe, 2001; Morin et Leduc, 2004; Arcand et Hébert, 2009.

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Québec 

This emergency room is recognized for ***excellence in senior care.***



Immobilization syndrome

HOW TO COUNTER THE HARMFUL EFFECTS OF BED REST AND INACTIVITY

Québec 



Immobilization Syndrome

- Immobilization Syndrome is one of the unfortunate consequences of prolonged bed rest and inactivity.
- The lack of activity that may accompany aging reduces one's endurance to physical effort and may lead to a loss of autonomy.

The myth of the benefits of bed rest is still ever-present. On the contrary, immobilization is a potential time bomb that delays the return of autonomy among fragile patients.

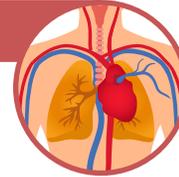
- Older people are more prone to developing Immobilization Syndrome.
- They tend to move around less due to pain and chronic disease (diabetes, pulmonary disease, arthritis), and the fear of experiencing aches and pains or falling.

For a good number of older people, Immobilization Syndrome results in a longer hospital stay, rehospitalization, a change in living environment, and greater risk of mortality.

MAIN COMPLICATIONS

Interrupting or cutting back **normal daily activities** such as getting out of bed, walking, sitting, eating seated in a chair, and using the bathroom can cause an imbalance in the body's systems.

HEART AND BREATHING



- Fatigue and shortness of breath
- Palpitations when resting or with mild exertion
- Dizziness
- Risk of embolism or blood clot in a vein (thrombophlebitis)
- Increased risk of pneumonia

MUSCLES AND BONES



- Osteoporosis with risk of fracture
- Reduced muscular strength, which can lead to falls and the fear of falling
- Change in upright posture linked to difficulty walking
- Stiffness, aches, and pain

NERVOUS SYSTEM



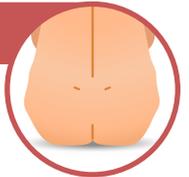
- Disorientation: not knowing the day of the week or where one is, not recognizing people
- Periods of wakefulness during the night and sleepiness during the day
- Isolation or anxiety, which may lead to depression
- Loss of balance
- Confusion, delirium

URINARY SYSTEM AND DIGESTION



- Dehydration, malnutrition
- Urinary and bowel incontinence
- Urinary retention and infection
- Constipation, fecal impaction

SKIN



- Risk of sores mainly on the buttocks



It is rare that moving around is contraindicated, even in the Emergency Department. It should only be limited for very specific medical reasons.