

# Early Mobilization Reduces Risk of Adverse Events and Improves Function: Research on Value of Physical Therapy



Early mobilization provides numerous benefits for patients of all ages. Research demonstrates that early mobilization, including after surgery, reduces complications and has the potential to improve physical functioning.

## Research on Early Mobilization

### **Are Process Performance Measures Associated With Clinical Outcomes Among Patients With Hip Fractures? A Population-Based Cohort Study. [Int J Qual Health Care. 2016;28(6):698-708]**

Conclusion: High-quality in-hospital care and, in particular, early mobilization was associated with a better clinical outcome, including lower 30-day mortality, among patients with hip fracture.

### **Early Mobilization Decreases Length of Hospital Stay, Perioperative Complications and Improves Functional Outcomes in Elderly Patients Undergoing Surgery for Correction of Adult Degenerative Scoliosis [Spine. 2017;42(18):1420-1425]**

Conclusion: The research indicates that early mobilization after surgery significantly reduces the incidence of perioperative complications, shortens duration of inpatient hospital stay, and contributes to improved perioperative functional status in elderly patients.

### **Adverse Events and Their Risk Factors 90 Days After Cervical Spine Surgery: Analysis From the Michigan Spine Surgery Improvement Collaborative [J Neurosurg Spine. 2019;Feb 15:1-13]**

Conclusion: The research indicates that early mobilization after cervical spine surgery has the potential to significantly decrease adverse events.

### **Effectiveness and Feasibility of Early Physical Rehabilitation Programs for Geriatric Hospitalized Patients: A Systematic Review [BMC Geriatr. 2013;13:107]**

Conclusion: Early physical rehabilitation programs for acutely hospitalized older adults were found to have the potential to improve physical functioning. Interventions including a follow-up program after hospital discharge increase the chance of maintaining positive effects on functionality for longer periods of time.

### **Assisted Early Mobility for Hospitalized Older Veterans: Preliminary Data From the STRIDE Program [J Am Geriatr Soc. 2014;62(11):2180-2184]**

Conclusion: STRIDE, a supervised walking program for hospitalized older adults, was found to be feasible and safe, and program participants were less likely to be discharged to a skilled nursing facility than were a demographically similar comparison group. STRIDE is a promising interdisciplinary approach to promoting mobility and improving outcomes in hospitalized older adults.

### **Complications of Hip Fractures: A Review [World J Orthop. 2014;5(4):402-411]**

Conclusion: Advancement of early mobilization to improve functional recovery and falls prevention are among basic recommendations for optimal maintenance of patients who have had a hip fracture. Other recommendations from the review included early surgical fixation, the role of anti-thromboembolic and anti-infective prophylaxis, good pain control at the perioperative, detection and management of delirium, correct urinary tract management, avoidance of malnutrition, vitamin D supplementation, and osteoporosis treatment.

**Physical Activity in the Acute Ward Following Hip Fracture Surgery Is Associated With Less Fear of Falling [J Aging Phys Act. 2016;24(4):525-532]**

Conclusion: Early mobilization following hip fracture surgery reduces medical complications and mortality, but it may increase the risk of falling. More upright time at discharge was associated with less fear of falling, which also was associated with faster gait speed and Timed Up and Go test time.

**The Effect of Early Mobilization in Critically Ill Patients: A Meta-Analysis [Nurs Crit Care. 2019;June 20]**

Conclusion: Early mobilization was found to be effective in preventing intensive care unit-acquired weakness, shortening the length of the ICU and hospital stay, and improving functional mobility.

**Effect of Exercise Intervention on Functional Decline in Very Elderly Patients During Acute Hospitalization: A Randomized Clinical Trial [JAMA Intern Med. 2018;Nov 12]**

Conclusion: The exercise intervention proved to be safe and effective in reversing the functional decline associated with acute hospitalization in very elderly patients.

**Effect of Early Mobilizations and Rehabilitation on Complications in Aneurysmal Subarachnoid Hemorrhage [J Neurosurg. 2017;126(2):518-526]**

Conclusion: Early rehabilitation of patients after aneurysmal subarachnoid hemorrhage was found to be safe and feasible.

**Early Mobilization in Ischemic Stroke: A Pilot Randomized Trial of Safety and Feasibility in a Public Hospital in Brazil [Cerebrovasc Dis Extra. 2015;5(1):31-40]**

Conclusion: This pilot trial suggests that early mobilization after acute ischemic stroke is safe and feasible.

**Early Mobilization After Total Knee Arthroplasty Prevents Patients With Osteoarthritis and Rheumatoid Arthritis From Developing Postoperative Higher Levels of D-dimer [J Med Invest. 2010;57(1-2):146-151]**

Conclusion: Postoperative early mobilization within a week after total knee arthroplasty kept levels of D-dimer from increasing in patients with osteoarthritis and rheumatoid arthritis.

**Recommendations for Hospital-Based Physical Therapists Managing Patients With COVID-19 [Phys Ther. 2020;100(9):1444-1457]**

Conclusion: Included are safety recommendations, treatment recommendations, discharge recommendations, and staffing recommendations. Recommendations toward active mobilization include bed mobility activities, active range-of-motion exercises, active (assisted) limb exercises, ADL training, transfer training, cycle ergometer, pre-gait exercises, and ambulation.

**Last Updated:** 10/20/2020

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