

MIRROR THERAPY

What is mirror therapy ?



In mirror therapy, a mirror is placed in the client's sagittal plane so the client cannot see the affected upper limb. The client watches in the mirror the movements made with the healthy limb and simultaneously tries to move the affected limb on the other side of the mirror. Mirror therapy would have positive effects on motor function and accomplishment of daily activities and would also contribute to reduce unilateral spatial neglect.

Who can receive mirror therapy ?

Anyone able to understand and follow simple instructions can receive mirror therapy. Motivation is essential. It can be offered by an occupational therapist, a physical therapist or another health professional. Self-administration or supervision by a family member is possible if offered at home. It is important to provide written instructions, pictures or videos of movements to realise in front of the mirror and weekly follow ups.

- The person who administers the mirror therapy can stand in front of the client on the other side of the table. This person supervises the movements made on each side of the mirror and ensures that the client is really looking at the reflection of his/her healthy limb in the mirror.

How?

The movements in front of the mirror must be done simultaneously on the affected and the non-affected side. The client can choose the speed of the movements. The desired movement may be demonstrated. Assistance can be offered to make the movements with the affected upper limb passively.

All jewelry and watches must be removed so that the illusion of the reflection is as credible as possible.

What can be done in the mirror ?

Examples of movements

- Flexion and extension of the shoulder, elbow, wrist and fingers
- Abduction and adduction of the shoulder and fingers
- Internal and external rotation of the shoulder
- Pronation and supination of the forearm
- Ulnar and radial deviation of the wrist
- Circumduction of the wrist

Examples of actions

- Squeeze and release the fist
- Open and close the hand
- Tap the fingers on the table
- Oppose (touch) each finger to the thumb, one by one
- With the hand closed, try to lift each finger, including the thumb

Examples of tasks

- Handle objects using different types of grips
- Grasp and release objects with different textures
- Pick up and move various objects
- Handle utensils
- Color, connect the dots or copy shapes
- Wipe, clean and dust the table with cloths with different textures

Intensity

- Minimum of 30 minutes/day
- Minimum of 5 days/week
- For an average of 4 weeks

Contra-indications

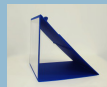
There are no contra-indications in using mirror therapy simultaneously to other interventions. Some studies combined mirror therapy with task specific training, bilateral training of upper extremities and functional electrical stimulation.

Characteristics of the mirror

- Different materials can be used to build the structure of the mirror (wood, corrugated cardboard, plastic, etc.).
- The size of the mirror can vary between 12 in x 12 in and 28 in x 48 in. Its size depends on the types of movements to be done in front of the mirror.



- To ensure that the client cannot see it behind the mirror, the affected upper limb can be inserted into an enclosed box or the affected hand can be covered by a screen.
- A folding mirror may be easier to carry.



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