

Neuroplasticity in context of motor rehabilitation in brain tumor

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Abstract

Motor deficits can occur at any time throughout a brain tumor illness. More than 70% of patients with malignant glioma report motor dysfunction as a problem at some time during the disease, also malignant brain tumors have a very high likelihood of producing disabling effects on a patient's quality of life, impaired mobility, the risk for complications of immobility, falls, pain, and loss of functional independence. Then rehabilitation is meaningful and necessary if the survival rate is low and the recurrence rate is high in addition rehabilitation on motor function outcomes and recovery of neurological impairment in patients with brain tumors lead to neuroplasticity in the brain, neuroplasticity is the potential of the nervous system to reshape itself during ontogeny, learning or following brain tumors, both physiological and pathological has flexibility interactions between tumor growth and brain reshaping. In particular, rehabilitation programs could optimize functional recovery following resection of a brain tumor and it will be understood in neuroplastic changes will contribute to an understanding that the expanding of cortical. The neuroplastic changes is one of the most important neurophysiologic characteristics that correspond with the level of motor functional improvement and more effective recovery from neurological damage in brain tumor.

Biography:

Minoo Sharbafshaaer is an experienced Statistical Analyst with a demonstrated history of working in the mental health care industry. She is skilled in research, psychology, psychotherapy, SPSS, and mental health. She has strong research professional with a Bachelor's degree focused in Psychology from Sistan and Baluchistan University.

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