

Industry profile: Working with Amputees



Lara Kimmel and Melissa Dixon have worked as trauma physiotherapists at The Alfred (which includes Australasia's largest Trauma Centre) for nearly 10 years.

How would you describe your current role?

Mel and I work as Trauma Physiotherapists at The Alfred. We treat patients who have suffered a variety of injuries from all sorts of 'accidents', such as motor vehicle, falls and workplace injuries. We manage our patients from admission to discharge, and we are involved in providing exercise and education in an effort to get people moving again after major injuries. Because we work in an acute hospital, our role involves lots of different aspects – from treating a patient's respiratory function in ICU to fine-tuning their balance or going through their exercise regime to strengthen muscles that they never knew they had!

What is your involvement with patients who have had amputations?

In the early stages, we are involved in getting people used to their amputation. We do this by trying to make them as active as possible, despite their injury. We devise exercise programs for them, trying to help reduce complications and make their remaining limb suitable for a prosthesis. We try to reduce their fear and apprehension about their amputation, helping to reassure them that this is not the worst possible outcome. We aim to get most people as mobile as their injuries allow, and we work with the rest of the multidisciplinary team to try to begin the adjustments that must occur as a result of their amputation.

What are the rewarding aspects of your job?

- *Seeing people do little things like sitting out of bed or walking a few steps for the first time, and*

knowing that they may not have achieved that without our help.

- *Watching people progress from being acutely ill in ICU to talking and walking within a short space of time.*
- *Having people come back to see us after their discharge – to say thank you.*
- *The times when you meet a patient who inspires you and sees their accident as the start of something new, not the end of life as they know it.*

Is there a particular memory or event in your career that stands out?

Well, there was an amazing patient once - let's call her Mel.....!

What is the most common piece of information you give to patients who have recently suffered an amputation?

We have had many, many patients who have suffered devastating leg injuries in accidents. We have seen many patients receive amputations very early and do very well. Others spend months and years in hospital trying to salvage a limb that will never be functional and will always be painful. I remember a number of patients who had amputations years after their initial injury and have had excellent results getting back to a pain-free life (even climbing ladders again!). It is important to remember that amputation is sometimes a good treatment option after severe accidents, rather than a failure of surgery.