EFFICACY OF ASSISTIVE DEVICES IN TERMS OF BALANCE AND GAIT EFFICIENCY IN GERIATRIC PATIENTS WITH LOCOMOTOR IMPAIRMENTS :- A LITERATURE REVIEW

Abstract
Assistive devices are commonly used by elderly people and help to slow the functional decline and compensate for the impairments and locomotive disabilities. These devices help them to improve their quality of life. This article review the effectiveness of assistive devices available for the elderly people. Data was identified from PUBMED and MEDLINE and it has been concluded that assistive devices improve balance and mobility in elderly population.

Keywords
Assistive devices; rehabilitation; Balance; gait; elderly population; aging

Introduction
Mobility and disability problems increases with age. Assistive devices such as canes, crutches, walkers, prosthesis, orthosis, can be used to compensate for the locomotor impairments by increasing patient’s Base of support, improve balance and increase activity and independence. More than 4 million people use canes and more than 1.5 million use walkers in overseas. These devices also help in reducing lower limb loading and alleviate joint pain or compensate for locomotor impairment. The purpose of this review was to examine effectiveness of assistive devices in terms of balance and gait efficiency in geriatric population with locomotor impairments.

Methods
English language articles were identified by searching MEDLINE and PUBMED for the keywords assistive devices, rehabilitation, balance, gait, elderly population and aging. Various articles have been reviewed out of which articles which includes robotics technology and people with sensory deficits had been excluded.

Data extraction
The methodology of each selected article relevant to effectiveness of assistive devices in terms of stability
and balance and gait in elderly population were summarized.

**Conclusion**

It has been concluded after review of article that these devices improve balance and gait and stability has been increased in the elderly population with locomotor impairment.

**References**


