Mobility and ALS

Freedom of movement—walking, going up and down stairs, getting off the floor, completing daily activities, exercising—these are just a few of the activities that many of us take for granted and are able to perform without limitation. For an individual with ALS, these often become difficult or even impossible to do. As weakness develops in the legs, trunk muscles or diaphragm, active movement can become limited. Working with a physical therapist to learn range of motion and stretching is essential to maintain muscle length, joint mobility, and decrease spasticity. It is recommended that a family member, friend, or caregiver be instructed on how to safely perform these exercises as part of a home exercise program. As the need arises, the physical therapist will also provide education and training in the proper fit and use of an appropriate assistive device to maximize safety and independence.

The use of a cane or walker may become necessary to provide assistance with walking due to changes in balance and/or strength. Weakness in the muscles of the neck or trunk cause postural changes resulting in forward trunk lean and potentially increasing the risk of falls. A walker can provide assistance in these situations to support the body and decrease the effort of maintaining upright posture. Orthotic devices, such as an ankle foot orthosis (AFO), can aide in foot clearance when lower leg weakness prevents safe foot clearance and foot drop is present. A certified orthotist will fabricate a custom brace to meet the specific needs of the individual.

As walking becomes more limited due to increased weakness, decline in balance, or changes in respiratory status, a transport chair or scooter can be used for mobility, especially when going longer distances or in the community. When use of an assistive device is no longer safe or appropriate, a physical therapist or occupational therapist can provide recommendations and assessment for a custom power wheelchair. An Assistive Technology Professional (ATP) works with the therapist to complete the evaluation, perform a home assessment and order the necessary components for a customized power wheelchair designed specifically for the individual. The power wheelchair becomes a vital tool in promoting greater independence and functional mobility.

When transfers become more difficult, using equipment such as a Get-U-Up lift or Hoyer lift can provide a safe means for a caregiver to assist with mobility. Both devices can be used for surface-to-surface transfers, while the Hoyer can be used to lift a person off the floor. Training for either device can be performed by a therapist, ATP, or home health care agency. A hospital bed is often recommended for positioning due to changes in respiratory status or to aide in bed mobility. Comfort and prevention of secondary complications is of utmost importance.
Ongoing assessments by a physical and/or occupational therapist are essential to maintain functional independence to the fullest extent possible. This is achieved by monitoring changes in physical function, providing recommendations for a home program, educating about the prevention of secondary complications, and assisting in obtaining the proper adaptive equipment to promote energy conservation and improved quality of life. These activities should be part of every person’s care plan, both short term and longer term.

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