UNILATERAL SPATIAL NEGLECT ASSESSMENT

USN Definition: inability to orient to stimuli on the contralateral side of the brain lesion

Prevalence: >40% have post-stroke USN-more common following a right-sided stroke

Does a middle cerebral artery stroke lead to USN? Yes, because the right inferior parietal lobe is affected

Other affected brain areas leading to USN:
- right parieto-temporal junction
- angular gyrus
- parahippocampal region
- right superior temporal cortex

There are 3 types of USN:
1. Personal neglect: Neglect of one side of body
2. Near extrapersonal neglect: Neglect of environment within reaching distance
3. Far extrapersonal neglect: Neglect of environment beyond reaching distance

Best practices:
- Patient should be screened for USN within 48 hours of admission using a recommended validated tool (indicated by a *)

References:
2. www.strokengine.ca

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Recommended Screening Tools:

Personal space:
- *Comb and Razor Test

Near extrapersonal space:
- Albert’s Test
- *Line Bisection Test
- Single Letter Cancellation Test

Personal and near extrapersonal space:
- Hemispheric Stroke Scale
- National Institutes of Health Stroke Scale

Near and far extrapersonal space:
- Semi-structured Scale for the Functional Evaluation of Hemi-inattention

Recommended Assessment Tools:

Near extrapersonal space:
- *Motor-free Visual Perception Test (MVPT)
- *Ontario Society of Occupational Therapists (OSOT) Perceptual Evaluation
- *Rivermead Perceptual Assessment Battery

Near and far extrapersonal space:
- Behavioral Inattention Test

Personal, near and far extrapersonal space:
- Catherine Bergego Scale

To obtain a copy of this pocket card, please contact us at: strokengine@gmail.com
**Prisms**: Prisms deviate the visual field 10º to the right. Patient must repetitively point to two targets located at either side.

- **Treatment schedule**: 30 to 100 repetitions per treatment (10 mins) for 5 sessions/week over 2 weeks

**Eye patching**: Apply right half patches to both lenses of the patient’s glasses or on goggles.

- **Treatment schedule**: To be worn during all waking hours anywhere from 1 week to 3 months with improved results according to the length of time worn

**Trunk rotation**: A thoracolumbosacral orthosis is worn with a bar projected forward above patient’s head. Patient rotates their body to touch targets on either side with the bar.

- **Treatment schedule**: 1 hour/day for 1 month.

**Limb activation**: Patient actively moves their upper extremity on the neglected side.

- **Treatment schedule**: 1 hour/day, for 10 days over a 2-week period

**Visual-motor imagery**: Patient is guided to mentally visualize scenes and/or sequences of movements that encourage scanning of the neglected side.

- **Treatment schedule**: Three 30-minute sessions per week for 3 weeks

**Neck/hand vibration**: Vibration or stimulation is applied to the side of the neck or hand affected by USN to encourage scanning of the neglected side.

- **Treatment schedule**: Not provided

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**Reference**:
1. [www.strokengine.ca](http://www.strokengine.ca)

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