



# FES in action

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## Examples of FES services in the UK

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Experts in MS

# FES and MS Walking Clinic, National Hospital for Neurology and Neuro- surgery, London

Information provided by Coralie Seary, Team Lead and Clinical Specialist, Physiotherapist in FES and MS Walking Clinic, University College Hospitals London NHS Trust.

## Background

The Functional Electrical Stimulation Service (FES) is based in Therapy Outpatients and is part of the Rehabilitation Department at the National Hospital for Neurology and Neurosurgery (NHNN). We are part of the University College Hospitals London NHS Trust.

## Service description

We provide FES to people with walking difficulties as a result of neurological impairment. We primarily see patients with drop-foot but consider stimulation of other muscle groups in the lower limbs. We use both single and dual channel stimulators. We also consider FES use in conjunction with orthotic devices.

We have provided FES treatment to over 1900 patients and currently support around 1000 FES users. Approximately 70% of our caseload have Multiple Sclerosis but we see people with many other neurological conditions such as stroke, cerebral palsy, brain tumours, spinal injuries and hereditary spastic paraparesis.

Our team consists of a consultant neurologist, clinical specialist physiotherapist and a number of specialist neurological physiotherapists, some of which are rotational. We have strong links with the spasticity, orthotics, MS services and therapies. This is key in ensuring that the patients have access the right treatments, at the right time with a co-ordinated specialist approach. It is important that FES is viewed as an adjunct and should be used in conjunction with a holistic management plan.

We are a tertiary referral centre and accept referrals via GPs and consultants. Patients are reviewed at regular intervals to optimise the use of FES. We offer advice on exercise and other adjuncts; treatment is a mixture of face-to-face and video appointments as appropriate.

FES is provided for patients that walk as their main form of mobility (ie. not indoor wheelchair users) and that use it for walking on a regular basis (most days). We do not provide FES for exercise purposes only. If a patient's mobility changes and FES is no longer effective we are able to support with assessments for orthotics and onwards referrals to appropriate services such as wheelchair and community teams.

## Patient experience and outcomes

We complete several outcome measures as part of the clinic and see improvements in:

- Walking speed
- Satisfaction with walking
- Goal Attainment scores
- QOL as measured by EQ-5D-5L

In our MS population, mobility and MSW12 scores remain stable for longer compared to non-FES user data.

Patients report increased confidence in walking, reduced tripping and falls, ability to walk further and faster with less effort. Many of our patients are completely reliant on the FES and are unable walk without it.

## Costs and savings

Cost savings reference:

Juckes FM, Marceniuk G, Seary C, Stevenson VL A cohort study of functional electrical stimulation in people with multiple sclerosis demonstrating improvements in quality of life and cost-effectiveness. Clin Rehabil. 2019 Apr 10:269215519837326.

## Do you agree that FES should be widely available for all people with MS who could benefit?

Yes. It is recommended as a treatment that is safe and effective by NICE, there is a huge amount of literature on benefits from activity and QOL perspectives. Access should be equitable across the NHS: patients should have choice over their treatments and where they receive them. It is relatively simple to train clinicians and access equipment.



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Our community is here for you through the highs, lows and everything in between. We understand what life's like with MS.

Together, we are strong enough to stop MS.

## Contact us

### MS National Centre

020 8438 0700

[info@mssociety.org.uk](mailto:info@mssociety.org.uk)

### MS Society Scotland

0131 335 4050

[enquiries-scotland@mssociety.org.uk](mailto:enquiries-scotland@mssociety.org.uk)

### MS Helpline Freephone

0808 800 8000

(weekdays 9am-9pm)

[helpline@mssociety.org.uk](mailto:helpline@mssociety.org.uk)

### MS Society Northern Ireland

028 9080 2802

[nireception@mssociety.org.uk](mailto:nireception@mssociety.org.uk)

### Online

[mssociety.org.uk](http://mssociety.org.uk)

[facebook.com/mssociety](https://facebook.com/mssociety)

[twitter.com/mssocietyuk](https://twitter.com/mssocietyuk)

### MS Society Cymru

[mscymru@mssociety.org.uk](mailto:mscymru@mssociety.org.uk)

 **Let's stop MS together**