

Summary

Sixty three years old retired government laborer presented with left side hemiplegia for six months after right side ischaemic stroke, who had defaulted clinic follow-up, has dense upper limb weakness with mild spastic deformity, lower limb weakness with difficulty in walking and dependence in activities of daily living (ADLs). Secondly he has hemiplegic shoulder pain which hinders his rehabilitation program. After the MDT discussion he was started on physiotherapy and occupational therapy to improve muscle power, prevent spasticity and independence in ADLs. Secondary prophylaxis of stroke and management of diabetes mellitus, hypertension and moderate depression continued with active management of shoulder pain.