

After a median follow up of 40 months, only 34% of the children were following normal curriculum without adaptations or delay and 28% were attending special education programs. School outcome was highly correlated to language and IQ ($p < 0.0001$).

Discussion/conclusion Childhood stroke leads to severe language and cognitive impairments, with negative and long lasting consequences on academic achievement.

Keywords Childhood stroke; Child; Long-term outcome; Neuropsychological; Cognitive; Language; Academic

Disclosure of interest The authors have not supplied their declaration of competing interest.

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Transcultural adaptation and validation of the Pediatric Stroke Outcome Measure - summary of impressions (PSOM-SOI) into French



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Objective To translate and validate a French version of the Pediatric Stroke Outcome Measure - summary of impressions (PSOM-SOI), for application in a population of French children after neonatal arterial ischemic stroke (NAIS). The PSOM measures deficiency of body functions and structures. On completion of this examination, the PSOM-SOI was developed containing and scoring 5 subscales: right sensorimotor, left sensorimotor (each with subcategories), language production, language comprehension and cognitive/behavioral.

Materials/patients and methods The PSOM-SOI was translated into French and then, interobserver agreement of the tool was measured using weighted kappa in a multicenter cohort study of children 7 years after neonatal arterial ischemic stroke (NAIS). 2 raters scored retrospective PSOM-SOI from medical records and validated scales for each subscales.

Results 69 children (mean age = 7.0 years) were recruited. Interobserver agreement was substantial for items B and C, i.e. production and comprehension language deficits [$k = 0.71$ (95% CI = 0.57 to 0.83); $k = 0.70$ (95% CI = 0.55 to 0.82) respectively]; moderate for items A and D, i.e. sensorimotor and cognitive/behavioural deficits [$k = 0.47$ (95% CI = 0.34 to 0.60); $k = 0.52$ (95% CI = 0.36 to

0.67) respectively] and slight for the total score [$k = 0.19$ (95% CI = 0.08 to 0.30)].

Discussion/conclusion The PSOM-SOI can be used to reliably grade neurological examination for children following a stroke, besides raters with different level of clinical experience. However, additional development and validation work is required using a clinical exam to improve the prospective validation of the complete PSOM.

Keywords Validation study; PSOM; Outcome measures; Pediatric stroke; Transcultural validation

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Posters

PO0125

Voiding dysfunction and cerebellum stroke in a child: Case report



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Objective We present a case of voiding symptoms after an isolated hemorrhagic cerebellum stroke of the right cerebellum hemisphere and the vermis in a 15 year-old boy with no medical history. The aim of this case is to show existence of a link between cerebellum and micturition.

Observations Following the stroke, the patient described dysuria, confirmed by uroflowmetry, with significant post-voiding residuals. Cystometry showed no detrusor contraction and urethral profilometry showed an increase in sphincter tone.

Discussion/conclusion The role of the cerebellum in the storage and control of the voiding phases was suggested in literature. Lower urinary tract dysfunctions were shown in several studies after cerebellum injuries. Activation of the cerebellum during voiding phase was proved by functional imaging studies. Connections exist between the cerebellum and cortical and sub-cortical centers that control micturition. This case report underlines the role of the cerebellum in voiding control and the importance of screening for lower urinary tract symptoms in patients with a cerebellum lesion in order to prevent complications.

Keywords Cerebellum; Stroke; Dysuria; Micturition; Voiding symptom; Child

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