



Paul & Sheila Wellstone
Muscular Dystrophy Center

UNIVERSITY OF MINNESOTA
Driven to DiscoverSM

PHYSICAL THERAPY FOR XP

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1

Physical therapy

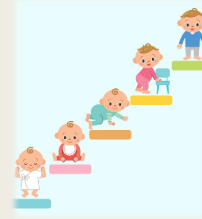
- Limited evidence
- Physical therapists treat impairments, not diseases
 - Ataxia
 - Weakness
 - Contractures
- Assess function
 - Developmental assessments
 - Motor and strength assessments
 - Gait and balance assessments



2

Early years

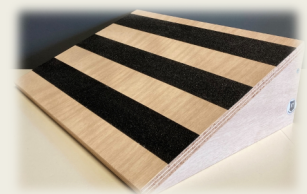
- Purpose
 - *Alter peak of neurological development with early rehabilitation*
- Activities
 - *Developmental motor milestones*
 - *Whole body exercise and gross motor skills*
 - *Stretching and massage*
 - *Parent and child swimming*



3

School-age

- Delay progression of motor impairment
- Fall prevention
 - *Functional balance exercises*
 - *Fall proof home*
 - *Safe fall recovery*
- Contracture management
 - *Stretching*
 - *Slant board*
 - *Foot orthotics or ankle-foot-orthoses (AFO)*
- Mobility
 - *Orthoses*
 - *Mobility devices*



4

Adolescence

- Adaptive equipment to facilitate prolonged independence
- Seating and wheeled mobility devices
- Increased assistive technology



5



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QUESTIONS?

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References

- Kraemer K, DiGiovanna J, Tamura D. Xeroderma Pigmentosum. Gene Reviews. Seattle, WA: University of Washington, Seattle; 1993-2022.
- Moriwaki S, et al. Xeroderma pigmentosum clinical practice guidelines. J Dermatol. 2017;44:1087-1096.
- Nishigori C, et al. Characteristics of Xeroderma Pigmentosum in Japan: Lessons From Two Clinical Surveys and Measures for Patient Care. Photochem. Photobiol. 2019;95:140-153.
- Nishigori C, Sugawara K. DNA Repair Disorders. Kobe, Japan: Spring Nature Singapore Pte. Ltd; 2019.