


BOOK REVIEWS

PHYSICAL REHABILITATION OUTCOME MEASURES

 Cole B, Finch E, Gowland C, Mayo N (1994), Toronto, Canadian Physiotherapy Association (ISBN 0-9698122-0-5)


This manual was produced by a working group convened by the Canadian Physiotherapy Association and Health Canada. Lack of suitable, objective outcome measures has frequently been cited as a reason for the dearth of research into the outcome of physiotherapy intervention in patients with hemiplegia and other central nervous system impairments. In view of this, the manual is a valuable contribution to promoting research into the effects of physiotherapy in stroke and related conditions.

In the survey which promoted the compiling of the manual it was found that current practice involved only limited use of standardised outcome measures, one of the major barriers being lack of knowledge of the available instruments. The survey also showed that physiotherapists who held a degree (as opposed to a diploma) and who worked in departments with more than 12 therapists were most likely to use specific outcome measures. In order to encourage physiotherapists to measure outcome objectively and to select the most suitable instruments to do so, the manual investigates 60 outcome measures in the field of adult motor and functional activity measures, back and/or pain measures, cardiopulmonary measures and developmental measures. General standards for the use of measures are given, and each outcome measure is then reviewed under the headings of population, time required, cost, training required, clarity of instructions, scales utilized, reliability and validity. Guidelines are also given for the selection of systems for group or single-case evaluation. Source references are given in full.

The manual will prove invaluable for physiotherapists who are willing to take on the challenge of proving that their treatment works. It comes in ring-binder format and is available from the Canadian Physiotherapy Association, 890 Yonge Street, 9th Floor, Toronto, Ontario M4W 3P4, Canada, Fax (416) 924-7335.

■ *Sheena Irwin-Carruthers*

STARTING AGAIN - EARLY REHABILITATION AFTER TRAUMATIC BRAIN INJURY OR OTHER SEVERE BRAIN LESION

 Davies PM (1994), Berlin, Springer-Verlag. (ISBN 3-540-55934-5 and ISBN 0-387-55934-5)

Although this book was announced previously in the SASP Journal, it was not reviewed. The author is well known for her previous two books on hemiplegia - "Steps to Follow" and "Right in the Middle" - and this third book should prove equally popular. Pat Davies takes the very complex subject of traumatic brain injury and develops a framework which enables the therapist to understand the many aspects which contribute to motor control. In particular she discusses problems related to disturbed tactile/kinaesthetic input - and important aspect which to date has received very little attention from physiotherapists.

The book enables us to understand the confused world of the brain-injured patient and to analyse the many different factors which may contribute to functional problems or inappropriate behaviour. It assists the physiotherapist in predicting and solving problems and takes us step-by-step through aspects of early positioning, moving and being moved in lying and sitting, regaining functional upper extremity use, early standing and attaining

independent walking.


Physiotherapists confronted with the short- and long-term complications of severe brain injury will find practical advice on preventing and overcoming contractures and deformities, avoiding the development of pressure sores, improving respiratory function, preventing pain of cervical origin, avoiding heterotopic ossification and maintaining or regaining spinal mobility. The section on the face and mouth, covering facial expression, oral hygiene, feeding and speaking, will encourage therapists to tackle these all too frequently ignored problems.

The role of abnormal neurodynamics and the possibilities for mobilising the nervous system are covered in some depth and give a new dimension which therapists can explore and utilise.

As with the previous two books, ample photographs and clinical examples not only show the physiotherapist how to do it, but also prove that it can be done. Above all, the dignity of the patient as an individual remains a first consideration. In his forward David Butler concludes: "This eloquent but simple text cuts across medical boundaries, it enhances teamwork, it demystifies the effects of head injury, and it gives new hope for all." The book is an essential resource for all therapists who encounter brain-injured patients and will be of value to experienced clinicians as well as newly qualifieds. It is highly recommended.

■ *Sheena Irwin-Carruthers*

PHYSIOTHERAPY IN STROKE MANAGEMENT

 Harrison MA (ED) (1995), Edinburgh, Churchill Livingstone. (ISBN 0-443-05228-X)

This book is, in fact, the proceedings of the 1st Congress of WCPT-Europe, held in Copenhagen in June 1994. As such, the quality of the content varies but there are a sufficient number of excellent presentations to make the purchase of the volume worthwhile for all those interested in rehabilitation following stroke.

The book is divided into four sections - the current state of stroke management, aspects of clinical practice, measurement and research, and psychological aspects and management of change. Most papers from keynote and plenary sessions are of excellent quality, including inter alia a review of current physiotherapy in stroke management by Ann Ashburn, the epidemiology of stroke by Gudrun Boysen, research on stroke rehabilitation by Nadina Lincoln and the role of the physiotherapist in research by Birgitta Bergmann. Aspects of clinical practice cover most of the current approaches to rehabilitation, including the Bobath concept, motor retraining, PNF, Affolter, PNF, orthotics and FES, and mobilisation of the nervous system. Disappointingly, the research section only covers studies on measurement and one study on outcome which is not related to physiotherapy intervention. There is, however, an interesting paper by Ravensberg, Halfens and Oostendorp on a stroke protocol for physiotherapy in primary health care.

The advantage of appointing an editor to publish the proceedings in book form is seen in the quality of the written language and the attractive layout of the book, and Marilyn Harrison is to be congratulated on her skill in bringing this information together to produce a worthwhile publication on the current state of the art and science of stroke management.

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