Handbook of Neurological Rehabilitation

This book is not a handbook in the Oxford pocket style, but a comprehensive reference book of 730 pages. The first edition, from a different publisher and under a slightly different name, became the standard British general neurorehabilitation text. The new edition retains the main sections on principles of practice, assessment and treatment of functional deficits, and then management of specific disorders. The 70 authors are almost all from the UK, so the treatments recommended may be more practical here than some in North American books.

There is a good description of how a multidisciplinary team can work together effectively: this process does not happen without considerable effort and commitment. The section on mechanisms of recovery discusses cellular damage and repair, plasticity, tissue transplantation and learning. The section on mobility deficits includes descriptions of physical consequences of neurological disablement, biomechanics, rehabilitation engineering, assistive technology and functional neurostimulation, which clearly shows the difference of emphasis in neurology and rehabilitation text books. The management of bladder, sexual, respiratory, swallowing, pain, visual complications of neurological disablement, chronic fatigue and dysarthria are explained, and the treatment, rather than just identification and measurement, of cognitive impairments is described. The management of disabled school leavers, and the transition to adult services is discussed, in the context of cerebral palsy, spina bifida and hydrocephalus.

The text is easy to read and up to date, with some references from as recently as 2000, and the index is much more comprehensive than in the last edition. However, there is no discussion of how to identify patients who will respond well to shunting following following intracranial bleeding and decompressive craniectomy, which is a common problem in acute rehabilitation units.

Pictures are rather sparse and some look very dated, particularly those of pieces of equipment: the Lightwriter looks more like an early prototype than the "executive toy" described in the text. The next edition would benefit from many new photographs and website addresses of manufacturers, patient support groups and local contacts for provision of environmental control units.

All doctors actively managing chronic disabling neurological disease should become familiar with this book. In many cases, it will also be a more useful first reference for therapists and nurses than a neurology or neurosurgery textbook.

Stephen GB Kirker, Cambridge

Women with epilepsy. A handbook of Health and Treatment Issues.

The authors describe this book as being for patients, their families, friends and clinicians. It tries to straddle the divide between being educational for clinicians and informative for patients but it is really a book for lay people, even though there are references with each chapter. They will find it a good source of information on many aspects of epilepsy and there are some very interesting chapters. There are clearly biological and social issues that affect women and not men and vice-versa, but in a world of women presidents and chief executives and house-husbands, a gender specific text feels frankly retrogressive in parts. Lisa Lindahl, a successful business woman presents an insightful case as a vociferous advocate for epilepsy services for women. However, I felt that although she is airing her concerns, the tone and presentation is well presented but for the clinician, the meat of the specific clinical issues in relation to epilepsy is often a little thin. For example the key question of teratogenicity is covered in only 7 pages and the view expressed, that many abnormalities occur with similar frequency whichever of the older antiepileptic drugs is used is not one that I share. Similarly, the following chapter on neurocognitive outcome of children born to mothers with epilepsy does not mention the deleterious effect claimed for valproate in a couple of recent studies.

So if you want an entrée into women’s issues in epilepsy, this book does it very well, and the highlights are the personal insights. If you need to solve any more detailed clinical problems, you will be left wanting.

Mark Manford, Cambridge

Neurological rehabilitation of Parkinson’s disease

This book is the first in a new series from Queen Square, aiming to “deliver the essentials of neurological rehabilitation in a concise and user-friendly fashion”. It is a neat volume of 130 pages which would fit into a large pocket. Use of tables, key points in shaded boxes, and indexing is good, and each chapter includes helpful references.

Reading this book from cover to cover would take you through pharmacological management; psychosocial impact, mainly depression and its treatment; a comprehensive, critical review of non-pharmacological therapy; service delivery; outcome measures; and future directions, like neural grafts. I suspect clinicians seeing a lot of people with Parkinson’s disease would need more detail but this book offers a good introduction to rehabilitation in Parkinson’s disease.

CA Young, WCNN, Liverpool
Handbook of Neurological Rehabilitation. What is Neural Plasticity? â€œthe ability of the brain to form and reorganize synaptic connections, especially in response to learning or experience or following injury. Leonardo G. Cohen, Mark Hallett, 2003. Handbook of Neurological Rehabilitation. Neuroplasticity. â€œNeuroplasticity in the human brain can be highlighted by techniques such as PET, functional MRI (highlighting the activation and recruitment of brain regions involved in different functions).â€Clinical neurology in a rehabilitation setting. â€œNeuroplasticity, often makes a decisive contribution to assessing rehabilitation by identifying deficiencies that cause disabilities (Where? / What? / How?) Neurological rehabilitation is in many ways different from the other branches of neurology. Rehabilitation is a process of education of the disabled person with the ultimate aim of assisting that individual to cope with family, friends, work, and leisure as independently as possible. It is a process that centrally involves the disabled person in making plans and setting goals that are important and relevant to their own particular circumstances.â€Handbook of neurological rehabilitation, 2nd ed. Hove, Sussex: Psychology Press, 2002. â€œA comprehensive reference to the whole subject. Google Scholar. Changes in the focus of neurological practice worldwide have led to the need for new standard texts that reflect the current state of this expanding area of clinical expertise. The second edition of the Handbook of Neurological Rehabilitation is a major reference source that fulfils this need, providing an invaluable resource for all professions that work with patients suffering from neurological disorders. It brings restorative neurology to the bedside and shows how a reiterative, goal-oriented, problem-solving training programme can benefit patients, sometimes on a scale not achieved by pharmacological means.â€Handbook of Neurological Rehabilitation Second Edition. Edited by. Richard J. Greenwood Consultant Neurologist, National Hospital for Neurology & Neurosurgery, London, UK and Homerton Regional Neurological Rehabilitation Unit, Homerton Hospital, London, UK. Michael P. Barnes Professor of Neurological Rehabilitation, Hunters Moor Regional Rehabilitation Centre, Newcastle upon Tyne, UK, Clinical Director of Neurorehabilitation Services for Northgate and Prudhoe NHS Trust, UK. Thomas M. McMillan Professor of Clinical Neuropsychology, Department of Psychological Medicine, University of Glasgow, Neurological Rehabilitation is the latest volume in the definitive Handbook of Clinical Neurology series. It is the first time that this increasingly important subject has been included in the series, and this reflects the growing interest and quality of scientific data on topics around neural recovery and the practical applications of new research. The volume will appeal to clinicians from neurological and rehabilitation backgrounds and contains topics of interest to all members of the multidisciplinary clinical team as well as the neuroscience community. The volume is divided into five key sections.