

Of Rehabilitation Medicine and the Rehabilitation Physician

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Rehabilitation Medicine or Physiatry (as is known in North America) is the medical specialty dealing with “restoration of function in people affected by physical disabilities”. The disease categories with which the specialty is mainly concerned are neurological conditions like stroke and brain injury, spinal injury, musculoskeletal disorders and limb amputation. The rehabilitation paradigm differs from the curative one in many ways. It is an individualised, patient-oriented activity focused on disability rather than disease. Rehabilitation moves from impairment towards helping the patient find “ability” in the presence of obvious disability.

Specialists practising Rehabilitation Medicine are known as Rehabilitation Physicians or Physiatrists. How does a Rehabilitation Physician go about restoring function? He does it through the prescription of therapeutic exercises, use of physical modalities, teaching of new and/or compensatory skills, proper advice on use of orthotics and assistive devices, and judicious use of medications. To do so effectively, he needs to have good grasp of the underlying disease process and impairments arising, the complex relationship between impairment and disability, and the patient’s desired functioning in society. He is also expected to have sound knowledge of functional anatomy, biomechanics, gait analysis and pain, given that many patients with disabilities will have mobility-related problems and associated pain.

Other skills that a Rehabilitation Physician may acquire include nerve blocks and botulinum toxin injection for the treatment of spasticity, interventional procedures for low back pain like facet joint injection, trigger point injection and acupuncture in the management of various musculoskeletal and myofascial pain syndromes, and strong knowledge of rehabilitation pharmacology, especially in the area of neuro-rehabilitation (Interestingly, amongst the handful of Western physicians who are also practising acupuncturists locally, 4 are rehabilitation physicians).

The Rehabilitation Physician usually works with an interdisciplinary team of allied health care professionals, including therapists, nurses, psychologists and medical

social workers. He must be able to guide the team to set clear, specific and realistic rehabilitation goals for the patient, and to monitor and evaluate the effectiveness of the rehabilitation intervention. In addition to leadership qualities, he also needs to have good communication and motivation skills.

In this issue of the *Annals*, which has been devoted to Rehabilitation Medicine, the focus is on review articles of common conditions treated by the Rehabilitation Physician.¹⁻⁹ These include traumatic brain injury rehabilitation in paediatric and adult patients, evidence on use of Botulinum toxin in treatment of spasticity, recovery and regeneration treatment after spinal cord injury, new therapies in stroke rehabilitation and myofascial pain.

With this issue, it is hoped that the general reader will have a better understanding of the specialty of Rehabilitation Medicine and the role of the Rehabilitation Physician.

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