

Oxford Handbook of Rehabilitation Medicine, 3rd edition. M. Sivan, M. Phillips, I Baguley, M Nott, pp. 688, 2019. Price £34.99. ISBN: 9780198785477. Oxford University Press, Oxford, UK.

This book is simply excellent. It covers most, if not all, areas of rehabilitation medicine, except for paediatric rehabilitation/habilitation and sports medicine. The text provides aetiological insights into the various dysfunctions in impairment, activity and participation levels. It describes the general rehabilitation methodologies, the principles of service delivery (although expressions such as the “Prince of Wales advisory group” have a strong provincial touch for an international reader), assessment and goal-setting within the framework of the International Classification of Functioning, Disability and Health (ICF). An idiosyncrasy is the use of acronyms without initial explanation; fortunately, the book starts with an explanatory list of most of these. There is a chapter on the critical evaluation of assessment instruments, but no real suggestion about which instrument is preferred or how to collect data to improve quality of care at the local level. The accreditation of rehabilitation programmes is not mentioned, although it exists in both Europe and the USA.

In the chapter on history and examination, I would have liked to see a description of a more detailed sensory examination, especially regarding thin afferent nerve fibres, mediating temperature and nociception. The chapter on cognition and behaviour is commendable; such information is highly relevant, but is often lacking in texts on rehabilitation. In the chapter on pain, pain-relieving drugs outside the classical analgesics are wrongly denoted as “adjuvants”; rather they are analgesics in their own right, given specifically, usually for neuropathic pain, but not as an addendum to ordinary analgesics. The content of the multidisciplinary pain rehabilitation programme is well described, but its main indication, (somatoform) pain disorder or

“pain behaviours”, is not explicitly mentioned, nor is the usual time-frame needed for such programmes (3 weeks). In fact, most “musculoskeletal problems” and “spinal problems” with chronic pain cannot be given a specific aetiological diagnosis, but are symptom-classified, and this is not clearly described in the second, condition-specific section of the book.

Furthermore, in the condition-specific sections on traumatic brain injury and stroke, one would like to see a more detailed description of cognitive rehabilitation, stressing the neuro-psychologist’s role in assessment and therapy, as well as the role of the vocational therapist and that of computer-based training programmes. For spinal cord injury, the need for lifelong support and follow-up should be stated more clearly. The chapter on rehabilitation of elderly patients is comprehensive, underlining the roles of frailty and sarcopaenia, and provides clear advice on nutritional matters. Similarly, the chapter on amputee rehabilitation gives clear and concrete advice on handling these often difficult clinical situations.

What else can be said about this powerful little book? It is pocket-sized and printed in very small font on thin, hymnbook-like paper. It would be improved by changing the layout: the font size could easily be increased so as to also be readable in dim light, by skipping the many half-used pages and compressing the text, still using clear headings. Furthermore, many of the figures are either meaningless or unreadable, especially the greytone ones, and these could be omitted.

In summary, even with these minor criticisms, this is probably the best clinical handbook on rehabilitation medicine available today. It has been a pleasure to read (albeit with some font-related difficulties), and the authors/editors are to be congratulated.

*Bengt H. Sjölund, Emeritus Professor;
Emeritus Editor in Chief, JRM, Lund, Sweden.
E-mail: bengthsjolund@gmail.com*