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Didier Musso

Encyclopedia of Associations ,2005

The Australian Journal of Physiotherapy ,1992

Physical Therapy Perspectives in the 21st Century Josette Bettany-Saltikov,Berta Paz-Lourido,2012-04-05 This book contains new information on physical therapy research and clinical approaches that are being undertaken into numerous medical conditions; biomechanical and musculoskeletal conditions as well as the effects of psychological factors, body awareness and relaxation techniques; specific and specialist exercises for the treatment of scoliosis and spinal deformities in infants and adolescents; new thermal agents are being introduced and different types of physical therapy interventions are being introduced for the elderly both in the home and clinical setting. Additionally research into physical therapy interventions for patients with respiratory, cardiovascular disorders and stroke is being undertaken and new concepts of wheelchair design are being implemented.

The Medical Journal of Australia ,1993

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Pelvic Pain, An Issue of Physical Medicine and Rehabilitation Clinics of North America, E-Book Kelly Scott,2017-07-14

This issue focuses on Pelvic Pain. Article topics include: Pelvic Pain-an overview; Anatomy and Physiology of the Pelvic Floor; Office Examination of Neuromuscular Pelvic Pain; Diagnostic Studies for Neuromuscular Pelvic Pain; Pelvic Floor Myofascial Pain and Associated Disorders; Bony and Ligamentous Causes of Pelvic Pain; Coccydynia;Neurogenic Pelvic Pain; Urologic and Gynecologic Sources of Pelvic Pain; Physical Therapy for the Treatment of Pelvic Pain; and more!

Medical Journal of Australia ,1988

International Congress Calendar ,2002

Courses of Training, Scholarships and Bursaries in Countries Represented in the World Confederation for Physical Therapy World Confederation for Physical Therapy,1961

Receptive Methods in Music Therapy Denise Erdonmez Grocke,Denise Grocke,Tony Wigram,2007 This practical book describes the specific use of receptive (listening) methods and techniques in music therapy clinical practice and research, including relaxation with music for children and adults, the use of visualisation and imagery, music and collage, song-lyric discussion, vibroacoustic applications, music and movement techniques, and other forms of aesthetic listening to music. The authors explain these receptive methods of intervention using a format that enables practitioners to apply them in practice and make informed choices about music suitable for each of the different techniques. Protocols are described step-by-step, with reference to the necessary environment, conditions, skills and appropriate musical material. Receptive Methods in Music Therapy will prove indispensable to music therapy students, practitioners, educators and researchers.

Physiotherapy for Respiratory and Cardiac Problems Jennifer A. Pryor,Ammani S Prasad,2008-03-06 Now in it's fourth edition, Physiotherapy for Respiratory and Cardiac Problems continues to be an essential textbook and reference source for undergraduate and postgraduate students, and for the clinician working with patients with cardiac and respiratory problems. It strengths lie in integrating the evidence with clinical practice and in covering the whole patient lifespan - infants, children, adolescents and adults. new chapters on: critical care, surgery, and psychological aspects of care expanded evidence for clinical practice case studies multi-contributed chapters written by internationally recognised experts extensively revised text with new illustrations and photographs comprehensive reference lists which directs the reader to further sources of information Part of the Physiotherapy Essentials series - core textbooks for both students and lecturers Online image bank now available! Log on to <http://evolve.elsevier.com/Pryor/physiotherapy> and type in your unique pincode for access to over 300 downloadable images

Animal Physiotherapy Catherine McGowan,Lesley Goff,2016-05-02 A thoroughly updated edition of this essential reference guide for physiotherapists and physical therapists, looking to apply the proven benefits of physiotherapy to the treatment of companion and performance animals. Seven new chapters provide greatly expanded coverage of practical treatment and rehabilitation Includes reviews of different physiotherapy techniques, drawing on both human and animal literature Discusses approaches in small animal medicine as well as for elite equine athletes Provides applied evidence-based clinical reasoning model, with case examples Now in full colour with many more illustrations

Sports and Soft Tissue Injuries Christopher M. Norris,2018-09-03 The fifth edition of the retitled Sports and Soft Tissue Injuries sharpens its focus on the treatment of sports injuries, providing the most complete evidence-based guide for physiotherapists, sports therapists and medical practitioners working with athletes. Opening with chapters that examine the underlying science of tissue healing and principles of rehabilitation, the book employs a systematic approach, with chapters covering each area of the body, from facial through to ankle and foot injuries. Every chapter includes in-depth discussion and guidance on the treatment of common sports injuries through physiotherapeutic modalities, drawing on the author's wealth of personal experience and the latest peer-reviewed research. A complete pedagogical resource, Sports and Soft Tissue Injuries is highly illustrated in full colour, and is an important text for students of sports therapy, physiotherapy, sport medicine and athletic training, interesting further reading for sport and exercise science or kinesiology students with an interest in sports injury, and a crucial reference for practicing physiotherapists and athletic trainers and the related disciplines.

Cumulated Index Medicus ,1999

Sports Rehabilitation and Injury Prevention Paul Comfort,Earle Abrahamson,2010-12-01 This text provides a comprehensive, practical, evidence-based guide to the field. It covers each stage of the rehabilitation process from initial assessment, diagnosis and treatment, to return to pre-injury fitness and injury prevention. Presenting a holistic approach, this text also addresses the nutritional and psychological aspects of the rehabilitation process for the amateur sports enthusiast as well as elite athletes. Divided into five parts, Parts I, II and III cover screening and assessment, the pathophysiology of sports injuries and healing and the various stages of training during the rehabilitation process. Part IV covers effective clinical decision making, and Part V covers joint specific injuries and pathologies in the shoulder, elbow wrist and hand, groin and knee. Key features: Comprehensive. Covers the complete process from diagnosis and treatment to rehabilitation and prevention of injuries. Practical and relevant. Explores numerous real world case studies and sample rehabilitation programmes to show how to apply the theory in practice. Cutting Edge. Presents the latest research findings in each area to provide an authoritative guide to the field.

Patients with subacromial pain in primary care Jenny Nordqvist,2021-01-08 Background: Shoulder pain is a common musculoskeletal disorder and 40-74% of the patients attending primary healthcare with a shoulder disorder are diagnosed with subacromial pain. Subacromial pain is characterized by restricted and painful movement of the arm that leads to difficulties in performing arm-related activities and often affects the quality of life profoundly, with respect to everyday function, work capacity, sleep quality and mental health. It is crucial that the measurements used to evaluate shoulder function and treatment response have acceptable psychometric properties and also that they are patients-specific and time-efficient to administer. For patients with subacromial pain, exercises are recommended as first-line treatment but consensus about which exercises and dosage to recommend has not been reached. The lack of evidence for one specific exercise model may be partly due to heterogeneity among this group of

patients. The overall aim of this thesis were to evaluate the efficacy of a previously tested exercise strategy for patients with subacromial pain in a primary care setting, to describe the heterogeneity with possible subcategories among patients with subacromial pain, and finally to validate and adjust the Disabilities of the Arm, Shoulder and Hand (DASH) questionnaire for more diagnosis-specific clinical assessment. Methods: The four papers in this thesis are based on two clinical studies, one randomized controlled trial (RCT) and one clinical cohort. The participants in both studies were patients with subacromial pain attending physiotherapist (PT) in a primary care setting. Two of the papers are based on psychometric analyses, with evaluation of construct validity and responsiveness for the DASH when used to evaluate shoulder function in patients with subacromial pain, and also calculation of minimal important change (MIC) for a diagnosis-specific short version of DASH (DASH 7). A third paper describe clinical presentation in patients with subacromial pain, based on the components active range of motion (AROM), rotator cuff function and scapular kinematics and the fourth paper evaluated the efficacy of a 3-month specific exercise strategy in comparison to an active control strategy. Results: Seven items from the original DASH were identified as being the most important in evaluating patients with subacromial pain (resulting in the DASH 7 questionnaire). The DASH 7 shows good responsiveness, can discriminate between patients who perceive themselves as improved and those who do not, and maintain a high level of internal consistency for the assessment of shoulder function in patients with subacromial pain, using only a quarter of the items of the original DASH. Based on clinical presentation, patients with subacromial pain in the primary care setting comprise a heterogeneous group. Rotator cuff dysfunction, defined as pain during resisted isometric muscle-testing, is very frequently present while limitation in active range of motion and scapular dyskinesia are less common. After three months of exercise, both groups in the RCT had significantly improved with no between group difference as measured with the primary CM-score. However, as measured with the DASH and the DASH 7, the patients in the specific exercise group was significantly more improved compared to those in the active control group. Conclusions: The DASH 7 questionnaire is a short patient-reported outcome measurement (PROM) with good responsiveness, specific for patients with subacromial pain. Heterogeneity was confirmed with identified variability in AROM, rotator cuff function and scapular kinematics in clinical presentation which confirms that these components are important in the clinical examination of patients with subacromial pain. Shoulder function evaluated with the CM score did not improve to a significantly different degree between the two groups studied. The specific exercises might not be necessary for all patients in the primary care setting to achieve a clinically relevant improvement. However, the specific exercise strategy was significantly better when improvement was assessed by DASH and DASH 7, and this leads us to recommend this strategy, with its progressive loading of the rotator cuff muscles and scapula stabilizers, as first choice, provided that it is tolerated by the patient. Bakgrund: Axelsmärta är ett vanligt problem i befolkningen och bland de som söker hjälp för sin axelsmärta inom primärvården är subacromial smärta den vanligaste diagnosen. Subacromial smärta karaktäriseras av smärta vid armaktivitet, främst vid aktivitet i och över axelhöjd samt bakom ryggen. Det är vanligt att denna smärta ger störd sömn och svårighet att utföra fritidsaktiviteter och dagligt arbete vilket kan bidra till försämrade psykisk hälsa och livskvalitet. Det är viktigt att kunna mäta och utvärdera skulderfunktion samt effekt av behandling på ett tillförlitligt sätt och att de instrument som används känns relevanta för patienten samt är tids-effektiva att administrera. Träning är den behandling som i första hand rekommenderas för patienter med subacromial smärta men det saknas fortfarande tydliga riktlinjer gällande vilka övningar och vilken dosering som är den bästa. En diskuterad anledning till att det är svårt att påvisa sådana riktlinjer kan vara att patientgruppen är heterogen. Det övergripande syftet med den här avhandlingen var att utvärdera effekten av en specifik träningsstrategi för patienter med subacromial smärta i primärvård, att identifiera och beskriva variationen i klinisk presentation hos patienter med subacromial smärta samt att validera och justera självskattningsformuläret DASH för dignosspecifik bedömning. Metoder: De fyra delarbeten som ingår i den här avhandlingen baseras på två kliniska studier. Samtliga studiedeltagare var patienter med subacromial smärta som sökte vård hos fysioterapeut inom primärvården i Östergötland. I två delarbeten analyseras mätgenskaper för självskattningsformulär, gällande validitet och responsiveness (förmåga att mäta förändring över tid) hos DASH för patienter med subacromial smärta samt gällande kliniskt relevant förändring hos den diagnosspecifika kortversionen, DASH 7. Ett tredje delarbete beskriver klinisk presentation hos patienterna utifrån komponenterna aktiv rörlighet, muskelfunktion i rotatorkuff samt skulderbladets rörelsemönster och det fjärde delarbetet utvärderar effekten av en specifik träningsstrategi jämfört med en aktiv kontrollstrategi för patienter med subacromial smärta i primärvård. Resultat: Sju av de ursprungliga 30 frågorna i DASH identifierades som de viktigaste för att utvärdera skulderfunktion hos patienter med subacromial smärta (vilket resulterade i ett nytt självskattningsformulär, DASH 7). DASH 7 uppvisar god responsiveness och kan skilja mellan de patienter som upplever sig förbättrade och de som inte gör det, samt bibehåller hög intern konsistens för bedömning av skulderfunktion hos patienter med subacromial smärta, med endast en fjärdedel av frågorna från DASH. Baserat på klinisk presentation, konstateras att patienter med subacromial smärta i primärvård är en heterogen grupp. Störd funktion i rotatorcuffens muskulatur, definierat som smärta vid isometriska muskeltester, är vanligt förekommande medan inskränkt aktiv rörlighet och stort rörelsemönster i skulderbladet förekommer mer sällan. Efter tre månaders träning uppvisar patienterna i båda träningsgrupperna en signifikant förbättring i skulderfunktion. Gällande funktion mätt med utvärderingsinstrumentet CM ses ingen skillnad i effekt mellan träningsgrupperna. Däremot, när skulderfunktion utvärderas med DASH och DASH 7, ses att patienterna i den specifika träningsgruppen förbättrats signifikant mer jämfört med patienterna i den aktiva kontrollgruppen. Konklusioner: DASH 7 är ett kort självskattningsformulär med god förmåga att mäta förändring över tid, specifikt utformat för patienter med subacromial smärta. Heterogenitet konstateras baserat på variationen i klinisk presentation gällande de tre komponenterna: aktiv rörlighet, muskelfunktion i rotatorkuff samt skulderbladets rörelsemönster, vilket visar på att dessa komponenter är viktiga i bedömningen av patienter med subacromial smärta. Förändrad skulderfunktion, utvärderat med CM, visar ingen skillnad i effekt mellan de två träningsgrupperna som testats. Den specifika träningen verkar därmed inte behövas för alla patienter med subacromial smärta i primärvård för att uppnå en kliniskt relevant förbättring. Utvärdering av skulderfunktion med DASH och DASH 7 däremot visar att patienterna i den specifika träningsgruppen blivit signifikant bättre jämfört med de i den aktiva kontrollgruppen. Baserat på dessa resultat rekommenderar vi den specifika träningsstrategin som förstahandsval vid behandling av subacromial smärta, förutsatt att patienten tolererar den belastade träningen för rotatorkuff- och skulderbladsmuskulatur.

The Path to Professionalism Philip Geoffrey Bentley,David Dunstan,2006
Occupational Therapy ,1968

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