Introduction to Cognitive Rehabilitation: Theory and Practice
McKay Moore Schiberg, MS, CCC, and Catherine A. Mateer, PhD (1989).
384 pp, $39.95.

The authors state that the general goal of this text is to develop a discipline of cognitive rehabilitation. Although the publication of this book will not be the cause for the creation of a new discipline, it certainly will aid in the much-needed development of cognitive rehabilitation as a specialization area. The authors note that the current educational process does not adequately prepare any single discipline to assess and treat in the area of cognitive rehabilitation. Many disciplines have become involved in cognitive rehabilitation and are beginning to work together in the much-needed process of developing increased understanding and treatment skills in this area.

This text was developed through the authors’ current exposure to working with head-injured clients in a postacute setting. An understanding of normal cognitive functioning and a basic background in the neurological sciences are prerequisites to a full understanding of the information shared in this text.

The authors have organized the information into three major parts: (a) general issues related to cognitive rehabilitation, (b) remediation of specific cognitive dysfunctions, and (c) special issues related to cognitive rehabilitation. Documentation, covered in the first part of the text, is an important issue that is well developed by the authors. A major portion of the remediation discussion is aimed at development of the process-specific approach to cognitive rehabilitation. This approach targets the remediation of specific cognitive areas with ultimate measures of success related to increased independence in activities of daily living skills. Although the authors’ biases are apparent, as an introductory text, this book will assist professionals entering the field of cognitive rehabilitation to develop foundation skills.

The table of contents is comprehensive, although a bit hard to use because individual topics are not assigned separate lines for easy scanning. Each chapter is concluded with a summary, study questions, and excellent referencing. The text is well indexed.

Because there is a paucity of publications in this topic area, comparison with similar texts is not possible. This book is a well-written primer for persons interested in developing their skills in cognitive rehabilitation, including occupational therapists; maybe it will serve as a stimulus for further publications to assist in the development of this specialization area.

Theodore I. King, II, PhD, OTR

Briefly Noted

Home Rehabilitation Exercises: Shoulder, Elbow, Forearm, Wrist
The American Occupational Therapy Association, Inc., PO Box 1725, Rockville, MD 20849-1725.
16 pp, $3 each or 10 for $25 (members), $4.20 each or 10 for $35 (nonmembers).

Home Rehabilitation Exercises: Hand
The American Occupational Therapy Association, Inc., PO Box 1725, Rockville, MD 20849-1725.
16 pp, $3 each or 10 for $25 (members), $4.20 each or 10 for $35 (nonmembers).

A rehabilitation team is like a three-legged stool. The doctor and therapist make up two of the legs; the patient, the third. Without correct patient follow-through of home programs, optimal recovery is not possible. Combined with this are the legal issues we face concerning the proper instruction of home programs. With this in mind, I applaud the American Occupational Therapy Association’s efforts in publishing these two books concerning home care programs for the upper extremity.

The pictures are clear and the instructions concise. I appreciated the picture on the front that explained the parts of the hand. The booklet on the hand covered not only all motions but also the often-omitted movements of intrinsic releasing and tendon glides. There was room enough on the pages to add further instructions along with a blank page in the front on which to write.

These booklets could be used in either a general or a hand therapy setting and would make a good addition to one’s file on upper extremity home programs.

Cynthia D. Alexander-Garrett, MS, OTR/L

Test of Sensory Functions in Infants (TSFI): Manual
Georgia A. DiGangi, PhD, OTR, and Stanley I. Greenspan, MD (1989).
Western Psychological Services, 12031 Wilshire Boulevard, Los Angeles, CA 90025.
40 pp., $85.

This short manual accompanies the Test of Sensory Functions in Infants (TSFI). It clearly describes the theoretical background and uses of the test, the rationales for test development and specific test items, specific administration and scoring procedures, and the psychometric properties of the test. The authors have closely adhered to the work of A. J. Ayres and others in the field of sensory integration.

The TSFI is a significant contribution to the test and measurement choices available to occupational therapists and other professionals working with infants. The test is designed as both a research and clinical tool that can be used in the assessment of infants with regulatory disorders (e.g., difficult temperament), developmental delays, and those at risk for learning and sensory processing disorders (e.g., high-risk premature infants)." (p. 1). It is intended for infants aged 4 to 18 months, but there are significant psychometric limitations for use with the youngest children in this range. The 24-item test is intended to be administered in 20 min and is divided into five subtests: Reactivity to Tactile...
Deep Pressure, Adaptive Motor Functions, Visual Tactile Integration, Ocular-Motor Control, and Reactivity to Vestibular Stimulation.

Therese Sullivan, MS, OTR

The Myofascial Release Manual

This spiral-bound, 126-page manual, written by two physical therapists, provides one of the first illustrated references on myofascial release techniques. The introduction provides a brief philosophical base and general assumptions for therapists using this technique. The introduction also includes a statement regarding the purpose of the book, which is "to teach the technique of myofascial stretching as a mechanical skill.

I warn readers against trying to teach themselves this technique through the use of the manual. The usefulness of this manual is as a review and reference book for therapists who have already instructed and guided in this technique.

The stretching techniques are pictured and described for various muscle groups and regions throughout the body. The manual is not very well organized, and it is difficult to see how the therapists would be positioned in several of the photographs. The manual does discuss one-, two-, and three-person stretching techniques, which is much-needed information to supplement many myofascial courses that concentrate on one-man stretching techniques.

The manual concludes with a brief discussion of initial assessment, an appendix that contains a sample evaluation form, and a helpful reference list for further information. The manual is easy to read and, despite several shortcomings, offers needed information on myofascial release technique. Therapists who have undergone training in this technique can use this manual as a review guide.

Nancy Finkelstein, MS, OTR

Self-Injurious Behavior: A Somatosensory Treatment Approach

This book represents a unique, well-organized, and succinct summary of an occupational therapist's clinical experience, which was gained over many years of practice and a focused doctoral dissertation. The author aptly notes both the strengths and limitations of her study and clinical protocol, which are built on a solid review of current literature. The text acknowledges the complexity involved in the treatment of persons with self-injurious behaviors and incidence rates as well as plausible etiologies and frames of reference for treatment.

The author describes the effect of tactile stimulation on the reduction of self-injurious behaviors of persons in a large institution for persons with developmental disabilities. The study and treatments are successfully executed within the confines of available staff and resources. The treatment program outlined is pragmatic and lends itself to easy replication for both clinical and research purposes.

I highly recommend this text for practicing clinicians and researchers who wish to enhance the quality of life of persons with self-injurious behaviors.

Dianne C. Schwarz, MS, Ed. OTR

Work Hardening: State of the Art

The subject of work hardening is no easy matter: The name itself implies complexities and unknowns. The authors, however, address themselves well to the problems of and solutions to work hardening.

Although program models and history are described simply, this book's most useful aspect is its multitude of practical examples. More than half of the entire book is devoted to specific programs, which are divided into philosophy, evaluation and treatment methods, education, marketing, and a case study.

The successes and failures of marketing text are mentioned throughout this book. This is an important divergence from traditional program analysis, but it is now as important as reimbursement mechanisms and significant referral bases.

My only criticism of this book lies in the thought that work-hardening programs are complex and difficult to operate successfully. They require, by definition and by plan, an extensive rehabilitation team. This book is almost completely written for the occupational therapist. Although a discussion of team involvement would have increased the number of pages, it would also have given a more complete picture of work hardening's complexities. Nevertheless, this is an excellent book and I highly recommend it not only for those occupational therapists considering embarking into the work-hardening arena but also for seasoned practitioners.

Bety Wild Frazier, OTR/L, CVE, FAOTA