

### Physical Medicine and Rehabilitation

An Introduction



### The Basics



Physical Medicine and Rehabilitation (PM&R)

- Related terminology
  - Physiatry/physiatrist
  - Rehabilitation Medicine



### What is PM&R



### "Branch of medicine emphasizing prevention, diagnosis, and treatment of disorders – particularly related to nerves, muscles, and bones – that may produce temporary or permanent impairment."

--American Academy of PM&R

### A Physiatrist...



- Specializes in clinical and diagnostic use of physical agents and exercises to provide physiotherapy for physical, mental, and occupational rehabilitation of patient.
- Examines patient, utilizing electrodiagnosis and other diagnostic procedures to determine need for and extent of therapy. --Webster's Online Dictionary 2009

### Another Laymen's Definition



"A branch of medicine which aims to enhance and restore function ability and quality of life to those with physical impairments or disabilities."

--Wikipedia.org

Physiatrists are sometimes referred to as

Muscle Doctors

## **Quick Clarification**



### IMPAIRMENT

Anatomical or physiological dysfunction

**DISABILITIY** Unable to perform a human activity

HANDICAP Unable to meet a societal role International Classification of Functioning, Disability, and Health (ICF)



### ICF Terms in the context of health:

**Body functions** are the physiological functions of body systems (including psychological functions).

**Impairments** are problems in body function or structure such as a significant deviation or loss.

**Activity** is the execution of a task or action by an individual.

**Participation** is involvement in a life situation.

**Activity limitations** are difficulties an individual may have in executing activities.

Timeline

#### ORIGIN

As early as heat/cold modalities used for health benefits (time of Hippocrates)

#### DEFINED

Principles formulated during post WWI

#### **CONSOLIDATED & EXPANDED**

Post-WWII

#### **ESTABLISHED**

Approved as medical specialty in 1947

#### **EVOLVED**

In 1955 more than 21,200 cases of polio are reported. The polio epidemic dominated the attention of PM&R physicians and rehabilitation institutions expanded from institutions dedicated to the treatment of polio





### **Common Conditions**



- Spasticity and Movement Disorders
- Stroke
- Traumatic Brain Injury (TBI)
- Spinal Cord Injury (SCI)
- Multiple Sclerosis (MS) and other Neurological Conditions
- Pain
- Amputation
- Osteoarthritis
- Sports Injuries

### Evaluation



History (include focus on function), physical exam, imaging

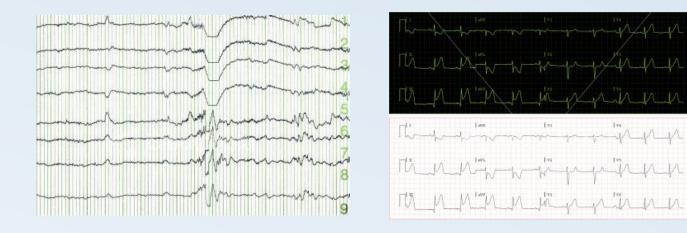


### Evaluation

Electromyography



Nerve Conduction Study





### Problems



Amputation Aphasia Cognitive Impairment Depression Dysphagia Gait Dysfunction Heterotopic Ossification Hypoventilation Malnutrition Neurogenic Bladder Pain Paralysis and Paresis Radiculopathy Skin Breakdown Spasticity Weak Muscles

## Problems Solutions



Amputation Aphasia Cognitive Impairment Depression Dysphagia Gait Dysfunction Heterotopic Ossification Hypoventilation Malnutrition Neurogenic Bladder Pain Paralysis and Paresis Radiculopathy Skin Breakdown Spasticity Weak Muscles

#### Orthoses





Malnutrition Neurogenic Bladder Pain Paralysis and Paresis Radiculopathy **Skin Breakdown** Spasticity

Weak Muscles



Amputation Aphasia Cognitive Impairment Depression Dysphagia Gait Dysfunction Heterotopic Ossification Hypoventilation

#### **Electrical Stimulation**



#### **Thickening Mix**



Association of Academic Physiatrists

Association of Academic Physiatrists

#### Amputation Aphasia Cognitive Impairment Depression Dysphagia Gait Dysfunction Heterotopic Ossification Hypoventilation

#### Gait Training





#### Manual Therapy



**Botox Baclofen Pump** 



Medication



Malnutrition Neurogenic Bladder Pain Paralysis and Paresis Radiculopathy Skin Breakdown Spasticity Weak Muscles



#### Water Therapy

#### Heat/Cold

#### Transcutaneous Electrical Nerve Stimulation

**Medication Control** 

#### Malnutrition Neurogenic Bladder Pain

Paralysis and Paresis Radiculopathy Skin Breakdown Spasticity Weak Muscles

Association *of* Academic Physiatrists

#### Amputation

Aphasia Cognitive Impairment Depression Dysphagia Gait Dysfunction Heterotopic Ossification Hypoventilation Prostheses







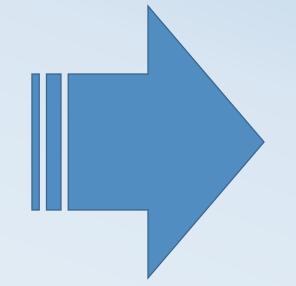
Association of Academic Physiatrists

MENTOR. DISCOVER. LEAD

### **Goal** Overall Functional Enhancement

### MAXIMIZE

- Independence
- Dignity
- Quality of Life



Physical Psychological Social Vocational Educational



Association of Academic Physiatrists

## Task at Hand



- 1. Optimize Function
- 2. Relieve Pain
- 3. Prevent and Manage Complications
- 4. Coordinate Care

## 5. Educate and Empower Patients

## **Practice Settings**



#### INPATIENT

- Acute Care Hospitals
- Long Term Acute Care Hospitals
- Inpatient Rehabilitation Units of Acute Care Hospitals
- Skills Nursing Home with Subacute Rehabilitation Programs
- Nursing Homes

### OUTPATIENT

- Hospital Clinic
- Acute Rehab Clinic
- Private Office

## Sample Inpatient Experience



Brain Injury Burn Cancer Cardiac Neurologic Disorder Orthopedic Pediatric Polytrauma Pulmonary Spinal Cord Injury Stroke Transplant

## Sample Outpatient Experience



Amputee Arthritis Cerebral Palsy Fibromyalgia EMG & NCS Musculoskeletal Ortho-Rehab Pain Pediatric Spasticity Spina Bifida Spine Stroke Wound Care

### Interdisciplinary Teams Medical Professionals



Critical Care General Surgery Geriatrics Internal Medicine Orthopedics Oncology Neurology Neurosurgery Pediatrics Psychiatry Rheumatology Urology

### Interdisciplinary Teams Allied Health Professionals

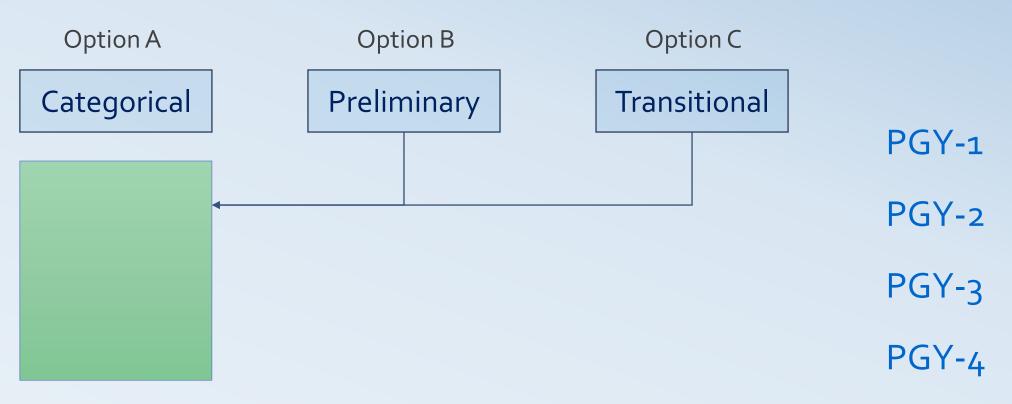


Recreational Therapist Rehabilitation Nurse Respiratory Therapist Speech & Language Social Worker Vocational Counselor



## **PM&R** Residency









## Fellowships

Electrodiagnostic Medicine Hospice and Palliative Medicine\* Interventional Spine Neuromuscular Medicine\* Pain Medicine\* Rheumatology Pediatric Rehabilitation Medicine\* Spinal Cord Injury Medicine\* Sports Medicine\* Stroke Brain Injury Medicine\*



Association of Academic Physiatrists

## Lots of Work Ahead

- Aging Population
- Decreasing Injury Mortality
- High Healthcare Costs
- New Applications
- Innovative Technology
- Regeneration/Stem Cell Advances
- Artificial Intelligence
- Robotics & Computer Science



### Additional Resources Associations



Association of Academic Physiatrists www.physiatry.org

## American Academy of Physical Medicine & Rehabilitation

American Congress of Rehabilitation Medicine

American Board of Physical Medicine & Rehabilitation www.abpmr.org

# Additional Resources



#### American Journal of Physical Medicine & Rehabilitation www.ajpmr.org

#### **Archives of Physical Medicine and Rehabilitation**

www.archives-omr.org

PM&R www.pmrjournal.org



## Thank You!

These slides were adapted from a presentation by Jiaxin Tran, MD, New Jersey Medical School -UMDNJ