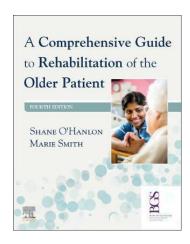


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Book Review by O. Hannigan

A Comprehensive Guide to Rehabilitation of the Older Patient, Fourth Edition By Shane O'Hanlon and Marie Smith

Rehabilitation is one of the foundational cornerstones of medicine for the older person, and it is a complex process requiring input from multiple healthcare professionals with expertise in various disciplines. The fourth edition of a what was previously a textbook largely dedicated to physical therapy has undergone an overhaul itself under the stewardship of Dr Shane O'Hanlon, a consultant Geriatrician in St. Vincent's and St. Columcille's Hospital, and Marie Smith, a Nursing Quality Manager from the Royal College of Surgeons in Ireland. A hugely collaborative approach was taken to all aspects of this book.



The chapter titles were crowd sourced through the British Geriatrics Society website, and chapter authors represent a huge cross spectrum of medical specialities, with a significant international presence, with Ireland very well represented. Medicine, nursing, physiotherapy, occupational therapy, speech and language therapy and social work are all represented, aligning with the core principles of the multi-disciplinary approach to rehabilitation espoused in the book. The end result is a fantastic, modern, truly comprehensive guide to an area which even since the last edition of this book in 2014 has changed and advanced significantly.

The book is structured in such a way as to allow it to be easily read from start to finish, or to read singular chapters without having to reference heavily from what comes before and after. The book is divided into six distinct units, with thematically linked chapters. The first unit covers the basics of rehabilitation in the elderly, and the core concepts underpinning it, such as frailty and the comprehensive geriatric assessment. The units then mirror the patients journey through the rehabilitation process. The next two units introduces the multidisciplinary team and their role in the rehabilitation process, with each chapter written by a relevant expert from each speciality.

The fourth unit progresses onto specific issues encountered during the rehab process and their relevant treatments. Common issues such as falls, pain and cognition are covered, but also covered are less often considered but still extremely important topics such as sexuality, oral health and sleep and fatigue.

The fifth unit covers specialty and organ specific rehab processes, like stroke and cardiac rehab, whiles the final unit covers the discharge process. Each individual chapter then has a uniform structure; they begin with a case study, then talk through the individual theme of the chapter in a progressive manner, with intermittent references to the case study, and finish with a summary of the key findings, often with a resolution of the case from the beginning, and some mcqs related to the chapter content. This structure allows chapters to be skimmed as needed, or else studied more closely as is needed. Each chapter references up to date material, so all of the chapters provide best practice evidence-based medicine, but in language that is easily understood and accessible.

To give an example of the type of content covered in the book in the chapter dedicated to trauma in the older person, we are given an example of an 83 year old woman who has fallen down 10 flights of stairs and has suffered many major traumatic injuries including but not limited to rib fractures, a pneumothorax, a liver laceration and a subdural haematoma . We are then brought back to the basic principles of trauma in the older person, the idea of the Injury Severity Score (ISS) and its use in quantifying injuries and their outcomes. Management of trauma is then covered, with multiple easy to follow diagrams and illustrations providing context and statistics. In this chapter rib fractures, pneumothorax and pulmonary contusions are covered, and how we rehabilitate the patient from these. We then revert back to our case, where we find our patient has needed a huge amount of input from multiple services, including a chest drain in the emergency department, an epidural from anaesthetics, and non-surgical management of her fractures, but careful multi-disciplinary input, allowing her to progress from transferring to a chair on her second day on the ward leads to her being discharged ten days after admission with supportive therapy from a community based physiotherapist.

The book is an extremely modern and up to the minute take on the rehabilitation process, with each chapter written by an expert from across the medical spectrum. The collaborative nature of the book allows all facets of rehabilitation, from the basics like setting treatment goals to extremely detailed and illness specific treatment. This book is as at home on the shelf of a physiotherapist as it is a geriatrician. Aside from the people providing rehab, this book is also extremely relevant and recommended reading for the most important people, the patients themselves. This book is a must have for anyone working with older persons, and even for those engaging in rehab themselves.

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