

## Preface



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*Guest Editor*

It has been seven years since the editors of the *Physical Medicine and Rehabilitation Clinics of North America* have discussed brain injury. Changes have occurred in the clarity and diagnostic abilities of radiographic studies, especially the functional MRI. Knowledge has also advanced in neuroplasticity, neuroprotection, and neural regeneration, along with numerous studies on a variety of compounds.

As the stay in the acute setting has shortened, additional sites of treatment have taken root, including day rehabilitation centers, skilled nursing settings, and residential facilities. The pressures from external resources have also risen. Numerous issues have come into focus more than in past decades because medicine's abilities to preserve have outdistanced the ethical nature of treatments and treatment options. The payments for such events have also come sharply into question. These problems have included not only the more "traditional" treatments but also those considered "complementary" or "alternative." More patients and families are looking into these options because the patient's progress may have plateaued or they have been exposed to the internet or other sources of information.

In this issue, ethical and insurance issues are discussed. These issues are not formally presented early in the treatment unless the situation is dire. Visual perception problems are also examined. These conditions may be less than optimally appreciated and are difficult to properly diagnose. Neuropsychologic evaluations involving how to focus one's examination for traumatic brain injury and identifying conditions incongruous with the diagnosis are presented. Additional appreciation of the pediatric brain injury is described

by Dr. Ylvisaker, which is especially important because the education of school officials appears to be more problematic than ever. Finally, articles on pain and functional MRI are included.

A review can never be complete because our knowledge is expanding so rapidly. The information and topics discussed in this issue are not commonly seen elsewhere and are written by practitioners who specialize in the daily treatment of those who have brain injury.

I want to thank the authors for their time and patience and, most important, for their keen insights to this most difficult and timely problem.

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