

IBIA2016 Symposium: Holistic neurorehabilitation – theoretical and clinical perspectives

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Symposium description:

The main elements of the holistic neurorehabilitation programs include promotion of a therapeutic milieu, psychotherapy and cognitive remediation, supported work trials, family guidance, and follow-up procedures. The psychotherapeutic process is vital for helping patients to achieve a sense of identity, to learn to behave in their own best self-interests, to cope with the demands of the situations he or she is confronted with, and to construct life after brain injury. Due to disabling cognitive, behavioural, and emotional changes after TBI, patients cannot be adequately treated with conventional psychotherapy, therefore neuropsychotherapy is needed. The key features of the program development and neuropsychotherapeutic elements as an integrative part of holistic rehabilitation programs are discussed.

Changes in identity are a common phenomenon after brain injury. In clinical practice, helping people to deal with these changes is a challenge, as discrepancy between the current and pre-injury self-image is found to be related to psychological distress. In the holistic milieu group approach, the group offers a social environment in which the building of a new, realistic self-image can take place. A case report will be presented as an illustration of this process of growing from emotional distress to emotional reintegration. Also data from an evaluation study concerning emotional well-being will be presented.

Participation in work life is one of the major goals for many clients after TBI. This goal is associated with self-esteem, social integration and autonomy. Methods for including work trials into holistic programs and for evaluating their impact on the rehabilitation outcome, as well as data on patients' satisfaction with the work trials will be discussed.

There is evidence that a holistic neuropsychologically oriented rehabilitation has an effect on overcoming the consequences after stroke and traumatic brain injury. Research findings of a recently concluded RCT-study whether the principles of holistic rehabilitation can be applied to the

treatment of patients with post-concussional syndrome will be provided, and the outcome regarding work life integration and quality of life will be discussed.

I Abstract:

Neuropsychotherapeutic elements as an integrative part of holistic rehabilitation programs

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Sanna Koskinen, Helsinki University, Finland

Traumatic brain injury (TBI) is a disorder of major public health concern because of its high incidence, prevalence, and economic aftereffects. Patients and their families are faced with long-lasting changes and suffering while attempting to manage with the diverse consequences of the injury. TBI is a heterogeneous disorder, and different forms of rehabilitation are needed for different subgroups of patients and at different phases over the course of recovery to optimize outcomes. According to the evidence-based studies, persons with TBI are best served by a holistic, multidisciplinary, and neuropsychologically oriented rehabilitation. The main elements of the holistic programs include promotion of a therapeutic milieu, psychotherapy and cognitive remediation, supported work trials, family guidance, and follow-up procedures. Due to disabling cognitive, behavioural, and emotional changes after TBI, patients cannot be adequately treated with conventional psychotherapy, therefore neuropsychotherapy is needed. The prerequisite for the neuropsychotherapeutic process to arise is to establish a therapeutic alliance between the therapist and the patient. Only if the patient is sufficiently knowledgeable about the injury, personal reactions, and prognostics, can he or she understand what is happening and distinguish between self-related, injury-related, and reactive phenomena. In the holistic programs besides individual format, neuropsychotherapy is also carried out in group settings which aim to help patients to break down their sense of social isolation, provide approval and a sense of belonging, and to identify their present emotional and motivational difficulties. A case study will be presented to demonstrate how neuropsychotherapy in a holistic setting may enhance the rehabilitation process.

II Abstract

Dealing with changes in identity after brain injury

Vink Martie & Pel Arwen, READE, Amsterdam, the Netherlands

Changes in identity are a common phenomenon after brain injury, because of the multi-faceted consequences of brain injury, in the cognitive, emotional, behavioral and social field (Tyerman and Humphrey, 1984). In clinical practice, helping people to deal with these changes is a challenge, as discrepancy between the current and pre-injury self-image is found to be related to psychological distress (Cantor et al, 2005). Emotional reintegration and adaptation are important goals of neuropsychological rehabilitation. In this process, direct as well as indirect consequences of the brain injury have to be dealt with. In the holistic milieu group approach, the group offers a social environment in which the building of a new, realistic self-image can take place. A case report, including video, will be presented as an illustration of this process of growing from emotional distress to emotional reintegration. Data from our evaluation study concerning emotional well-being will be presented.

III Abstract

Post-concussional syndrome (PCS) and the effect of holistic rehabilitation

Humle Frank, Center for Hjernesgade, Copenhagen University, Denmark

There is evidence that a holistic therapeutic milieu has an effect on overcoming the consequences after stroke and traumatic brain injury (TBI). The Center for Rehabilitation of Brain Injury has recently concluded an RCT-study of whether the principles of holistic rehabilitation can be applied to the treatment of patients with PCS. The study included 89 participants suffering from PCS, 45 in the intervention group and 44 in the control group. The intervention consisted of a 22-week programme based on neuropsychological consultations both individually and as group consultations. Furthermore, the participants received physical training adapted to the specific needs of the individual. The last part of the programme was directed towards support in returning to work

and overcoming the obstacles within this area. We will present the promising results of this controlled study regarding work life integration and quality of life.

IV Abstract

Vocational training and work trials adapted for patients with brain injury

Kuehne, Wolfgang, Asklepios Rehabilitation Center, Schaufling, Germany

Participation in work life is one of the major goals for many clients after TBI. This goal is associated with self-esteem, social integration and autonomy. Interventions to assess the vocational potential of the clients and to facilitate their return to work life have been an integral part of holistic programs (Koskinen and Sarajuuri 2010). We present methods for including work trials into holistic programs and for evaluating their impact on the rehabilitation outcome. The principles, the implementation and the therapeutic approach of these „real world vocational experiences“ will be illustrated and discussed. In addition we will present data on clients satisfaction with the work trials and their main progress gained from these steps into the vocational field.