

Awareness Of Deficit After Brain Injury

This volume provides comprehensive international coverage of neuropsychological rehabilitation. It contains scientific discussions of dynamic brain changes (genetics, structure, physiology and hormones) plasticity of the central nervous system, functional reorganization and brain repair in response to treatment in all stages, and emphasizes acute care of early and precise diagnostics. It is intended for clinicians, professionals and students in neuropsychology, health psychology, rehabilitation, behavioral neurology, occupational and physical therapy.

Traumatic brain injury (TBI) remains a significant source of death and permanent disability, contributing to nearly one-third of all injury related deaths in the United States and exacting a profound personal and economic toll. Despite the increased resources that have recently been brought to bear to improve our understanding of TBI, the development of new diagnostic and therapeutic approaches has been disappointingly slow. Translational Research in Traumatic Brain Injury attempts to integrate expertise from across specialties to address knowledge gaps in the field of TBI. Its chapters cover a wide scope of TBI research in five broad areas: Epidemiology Pathophysiology Diagnosis Current treatment strategies and sequelae Future therapies Specific topics discussed include the societal impact of TBI in both the civilian and military populations, neurobiology and molecular mechanisms of axonal and neuronal injury, biomarkers of traumatic brain injury and their relationship to pathology, neuroplasticity after TBI, neuroprotective and neurorestorative therapy, advanced neuroimaging of mild TBI, neurocognitive and psychiatric symptoms following mild TBI, sports-related TBI, epilepsy and PTSD following TBI, and more. The book integrates the perspectives of experts across disciplines to assist in the translation of new ideas to clinical practice and ultimately to improve the care of the brain injured patient.

This book offers an empowering approach to working with people with an acquired brain injury (ABI) based upon the views and perspectives of people with ABI themselves. Drawing upon Christine Durham's own ABI experience and Paul Ramcharan's engagement in disability research over a quarter of a century, this volume gives voice to 36 participants with ABI, as well as carers and other professionals from both urban and rural areas. This unique perspective provides a long-needed, empathic alternative to the deficit-based model of ABI that dominates medical literature and existing rehabilitation models. In *Insight into Acquired Brain Injury*, the authors use educational and learning principles together with Durham's extensive archive of experiential data to offer a reframing of the nature and experience of ABI and relevant a set of practical, real-world tools for practitioners. These ready-to-adopt-and-adapt scripts, guided interviews, research checklists, thinking tools and other innovative techniques are designed to engage with people and colleagues about brain injury as a means of supporting them to feel and fare better. With compassion and first-hand awareness, *Insight into Acquired Brain Injury* provides a much-needed perspective that deepens current understanding and translates the complicated life-worlds of people living with ABI in order to motivate, empower and increase their participation.

The Effectiveness of Rehabilitation for Cognitive Deficits

To the Psychological Well Being, Marital Adjustment and Community Integration of the Individual : and the Psychological Well Being and Marital Adjustment of the Spouse

The Relationship of Awareness of Deficit Following Traumatic Brain Injury

Locus of Control, Awareness of Deficit, and Employment Outcomes Following Vocational Rehabilitation in Individuals with a Traumatic Brain Injury

The Brain Injury Workbook

Classic Cases in Neuropsychology

This outstanding new handbook offers unique coverage of all aspects of neuropsychological rehabilitation. Compiled by the world's leading clinician-researchers, and written by an exceptional team of international contributors, the book is vast in scope, including chapters on the many and varied components of neuropsychological rehabilitation across the life span within one volume. Divided into sections, the first part looks at general issues in neuropsychological rehabilitation including theories and models, assessment and goal setting. The book goes on to examine the different populations referred for neuropsychological rehabilitation and then focuses on the rehabilitation of first cognitive and then psychosocial disorders. New and emerging approaches such as brain training and social robotics are also considered, alongside an extensive section on rehabilitation around the world, particularly in under-resourced settings. The final section offers some general conclusions and an evaluation of the key issues in this important field. This is a landmark publication for neuropsychological rehabilitation. It is the standalone reference text for the field as well as essential reading for all researchers, students and practitioners in clinical neuropsychology, clinical psychology, occupational therapy, and speech and language therapy. It will also be of great value to those in related professions such as neurologists, rehabilitation physicians, rehabilitation psychologists and medics.

Alzheimer's disease (AD) is a devastating and dehumanizing illness affecting increasingly large numbers of elderly and even middle-aged persons in a worldwide epidemic. Alzheimer's Disease: A Physician's Guide to Practical Management was written by selected clinicians and scientists who represent some of the world's leading centers of excellence in AD research. The editors are proud and grateful for their profound contributions. This book is particularly designed to assist physicians and other health-care professionals in the evaluation, assessment, and treatment of individuals with AD. At the same time, by illuminating the basic scientific background, we hope to provide state-of-the-art information about the disease and possible future therapeutic strategies. The recent psychiatric treatment aspects of AD are also clearly presented. Because the early diagnosis of the dementia process is now considered of increasing importance, we focus particularly in several chapters on early changes and preclinical conditions, such as mild cognitive impairment and predementia AD.

This edited book summarizes advances that have occurred in the study of anosognosia. It is comprehensive in its scope, and includes the insights of several experienced clinicians and researchers actively engaged in this line of research.

Traumatic Brain Injury

Awareness Training

Emotion Recognition and Awareness of Deficit Following Traumatic Brain Injury

The Neuropsychology of Consciousness

The Emotional Stroop Test and Awareness of Deficit in Brain-injured Individuals

Self-assessment of Cognitive Deficits and Prediction of Performance on Impact Testing in College Athletes Following Concussion

Despite the increased public awareness of traumatic brain injury (TBI), the complexities of the neuropsychiatric, neuropsychological, neurological, and other physical consequences of TBI of all severities across the lifespan remain incompletely understood by patients, their families, healthcare providers, and the media. Keeping pace with advances in the diagnosis, treatment, and science of TBI, the Textbook of Traumatic Brain Injury, Third Edition, comprehensively fills this gap in knowledge. Nearly all 50 chapters feature new authors, all of them experts in their field. Chapters new to this edition include biomechanical forces, biomarkers, neurodegenerative dementias, suicide, endocrine disorders, chronic disease management, and social cognition. An entirely new section is devoted to the evaluation and treatment of mild TBI, including injuries in athletes, military service members and veterans, and children and adolescents. These chapters join newly updated sections on the assessment and treatment of the cognitive, emotional, behavioral, and other physical sequelae of TBI. The Textbook of Traumatic Brain Injury is a must-read for all of those working in any of the multitude of disciplines that contribute to the care and rehabilitation of persons with brain injury. This new volume is also a potentially useful reference for policymakers in both the public and private sectors.

Employment outcomes in persons with traumatic brain injury (TBI) are far from ideal and have serious implications for quality of life and financial well-being post-injury. Numerous potential correlates of return to work, including locus of control and awareness of deficit, have been examined in past studies with mixed findings. The current study investigated these issues in a relatively ignored segment of the TBI population—those who receive services through state-funded vocational rehabilitation programs. Thirty State of Alaska Division of Vocational Rehabilitation (DVR) clients with TBI completed comprehensive interviews, the Patient Competency Rating Scale (PCRS), the Internal Control Index (ICI), and several neuropsychological test measures. Overall time spent working decreased from 75% pre-injury to 39% post-injury. Participants with poor vocational outcomes underestimated their level of impairment on the PCRS relative to informant ratings, and generally fared worse post-injury than participants with more accurate awareness of their limitations. Locus of control and cognitive function measures did not predict vocational outcome. Given the need for DVR clients to be aware of their deficits in order to set realistic goals, vocational counselors should address awareness of deficit early in the rehabilitation process to optimize employment outcomes and allocation of resources.

From a contemporary perspective, *Classic Cases in Neuropsychology, Volume II* reviews important and significant cases described in historical and modern literature where brain damage has been sustained. The single case study has always been of central importance to the discipline of neuropsychology. Cognitive neuropsychology and cognitive neurolinguistics search for universal structures in thought processes, and single patients are an important means to that end. The role of the single case study in the historical development of the field and its increasing contribution to contemporary work is therefore recognised as crucial. This follow-up to the successful *Classic Cases in Neuropsychology* (1996) brings together more of the important case investigations which have shaped the way we think about the relationships between brain, behaviour and cognition. The book includes cases from the rich history of neuropsychology as well as important contemporary case studies in the fields of memory, language and perception. Some of the cases described are rare, some are seminal in the field, many were the first of their type to be described and gave rise to new theories, and some are still controversial. As in the first volume, each chapter highlights the relevance of the case to the development of neuropsychology and discusses the theoretical implication of the findings. *Classic Cases in Neuropsychology, Volume II* will be essential reading for students and researchers alike in the fields of neuropsychology and neuroscience. It will also be of interest to speech and language pathologists, therapists and clinicians in this area.

Management of Adults With Traumatic Brain Injury

Deficit Awareness and Intervention Following a Traumatic Brain Injury

Principles and Techniques

Brain Neurotrauma

The International Handbook

An Empirical Study

This dissertation examined injury-based and emotional adjustment factors that may influence an individual's self-awareness of neurobehavioral deficits following traumatic brain injury (TBI). Two studies were completed to examine these issues in acute and post-acute rehabilitation settings using the reports of TBI patients and their significant-others. In Study 1, the Patient Competency Rating Scale (PCRS) and Self-Awareness of Deficits Interview were used to assess the patients' awareness of deficit, while the Profile of Mood States and the Grief Experiences Inventory were used to assess emotional adjustment. Six patients and significant-others were followed weekly during the course of inpatient rehabilitation, and were seen approximately one month after their discharge from hospital. While individual variability was observed, most patients reported minor changes in their level of competence and limited emotional distress. The individual perceptions of patients and of significant-others were generally consistent over the course of inpatient care, and variations in patients' emotional adjustment appeared to be reasonable reactions to circumstantial factors. The emotional adjustment of significant-others varied considerably among the individuals assessed, and this variability likely influenced their ratings of the patient. Staff ratings of the patients were also collected, and identified improvements in functional abilities over time. These results suggest that patient awareness is not a prerequisite for rehabilitation success. A lack of applied or practical experiences may also influence patients' ability to accurately rate their self-competence during the acute phase following TBI. Study 2 examined 166 individuals referred for post-acute rehabilitation, using the PCRS and the Katz Adjustment Scale (KAS-R) to assess awareness and emotional adjustment. Patients with a history of moderate and severe TBI showed good awareness of their abilities, based on PCRS Discrepancy Scores, while patients with mild TBI were likely to report greater impairments than observed by significant-others. TBI patients showed significant emotional adjustment difficulties on the KAS-R, regardless of the severity of their injury, and there was a strong positive association between patients' acknowledgement of neurobehavioral problems and ratings of their emotional adjustment. General intellectual ability was also strongly related to patients' report of difficulties, such that low IQ and poor emotional adjustment were associated with low ratings of self-competence. On the other hand, the general location of cerebral trauma was not strongly associated with deficits in awareness. Thus, the nature and severity of TBI appeared to be less important than IQ and emotional adjustment in the post-acute rehabilitation patients, although mildly injured patients are more likely to report neurobehavioral deficits than moderate or severely injured patients. Strengths and weakness of the self-other discrepancy approach to measuring self-awareness were considered, and a robust approach to awareness assessment, based on multiple measures, is recommended. Available options include structured interviews, self-report, clinical observation, or objective testing. Furthermore, the emotional adjustment of the patient appeared to become increasingly salient in the assessment of awareness during the post-acute phase, compared to the acute phase of recovery from TBI, where significant-other adjustment may be quite relevant.

This study sought to examine how effectively concussed college athletes are able to predict the effects of their concussion on their neuropsychological testing performance. Performance prediction tasks are often used to assess an individual's level of self-awareness, an area of deficit that has commonly been noted following more severe forms of traumatic brain injury. Little research has been conducted on the effects of sports-related concussion on an athlete's self-awareness. Surveys were administered to athletes before and after neuropsychological testing to assess an athlete's awareness of any deficits since their concussion and whether the athlete expected their concussion to affect their testing performance. Results indicate that athlete report of symptoms is most likely not a good indicator of when an athlete can be safely returned to play following a concussion due to inconsistent report of symptoms and the possible presence of impaired self-awareness or denial.

Now available in paperback, this updated new edition summarizes the latest developments in cognitive neuroscience related to rehabilitation, reviews the principles of successful interventions and synthesizes new findings about the rehabilitation of cognitive changes in a variety of populations. With greatly expanded sections on treatment and the role of imaging, it provides a comprehensive reference for those interested in the science, as well as including the most up-to-date information for the practising clinician. It provides clear and practical guidance on why cognitive rehabilitation may or may not work.

How to use imaging methods to evaluate the efficacy of interventions. What personal and external factors impact rehabilitation success. How biological and psychopharmacological changes can be understood and treated. How to treat different disorders of language and memory, and where the field is going in research and clinical application.

An Intervention Prescribed to Address Deficit Awareness and Psychosocial Adjustment with Traumatic Brain-injured Adults

Principles of Neuropsychological Rehabilitation

Predicting Cognitive Performance from Awareness Measures in Individuals with Acquired Brain Injury

Molecular, Neuropsychological, and Rehabilitation Aspects

Neuropsychological Rehabilitation After Brain Injury

A Study of Proposed "reactionary" Emotional Changes

This volume provides, for the first time, multidisciplinary perspectives on the problem of awareness of deficits following brain injury. Such deficits may involve perception, attention, memory, language, or motor functions, and they can seriously disrupt an individual's ability to function. However, some brain-damaged patients are entirely unaware of the existence or severity of their deficits, even when they are easily noticed by others. In addressing these topics, contributors cover the entire range of neuropsychological syndromes in which problems with awareness of deficit are observed: hemiplegia and hemianopia, amnesia, aphasia, traumatic head injury, dementia, and others. On the clinical side, leading researchers delineate the implications of awareness of deficits for rehabilitation and patient management, and the role of defense mechanisms such as denial. Theoretical discussions focus on the importance of awareness disturbances for better understanding such cognitive processes as attention, consciousness, and monitoring.

Traumatic brain injury (TBI) is a public health issue of worldwide proportions, affecting motorists, victims of interpersonal violence, athletes, military service members, and Veterans, among others. Management of Adults with Traumatic Brain Injury provides evidence-informed guidance on the core topics in brain injury medicine, including the epidemiology and pathophysiology of TBI, the medical evaluation and neuropsychological assessment of persons with TBI, and the common cognitive, emotional, behavioral, and other neurological disturbances for which persons with TBI and their families seek clinical care. The volume offers many useful features to its readers, including: Chapters written by an internationally known group of editors and contributors offering cutting-edge, multidisciplinary perspectives in brain injury medicine. Guidance on the identification and management of early and late postinjury neuropsychiatric disturbances as well as their psychological and psychosocial consequences. Identification of special issues relevant to the evaluation and treatment of TBI and postconcussive symptoms among military service members, and Veterans. Discussion of the ethics and methods of forensic assessment of persons with TBI. Key Clinical Points that highlight concepts, assessment issues, and clinical management strategies in each chapter. A wealth of tables and figures to enhance the accessibility and clinical utility of the book, as well as appendices of additional readings and relevant websites for persons and families affected by TBI and the clinicians providing their care. Impressive breadth and depth of coverage, logical structure, clinically rich detail, and concise presentation make Management of Adults with Traumatic Brain Injury a must-read for every physician, nurse, and mental health practitioner working to improve the lives of persons with TBI.

Evolved from working with head injured groups at Headway and those attempting to return to work, this is a rich, comprehensive and photocopiable workbook for professionals, carers and clients. It contains over 140 cognitive rehabilitation exercises - tailored for memory, thinking skills, executive functions, awareness and insight, and emotional adjustment. It provides more than 40 information sheets on key problem areas, with questions for the reader, designed to educate and stimulate thinking and discussion. It is suitable for both individuals and groups. It includes questionnaires for clients to complete with or without help and quizzes to evaluate and encourage information retention. Primarily for professionals where exercises or handout sheets can be photocopied and used therapeutically, The Brain Injury Workbook can also be used by carers or family members to provide stimulating activities for a head-injured person. In addition, the head-injured person themselves can work through the book on their own.

Alzheimer's Disease

The Relationship Between Deficit Awareness and Levels of Depression and Anxiety Following Traumatic Brain Injury

The Brain Injury Rehabilitation Workbook

Assessment of Awareness of Deficit After Traumatic Brain Injury

An Empirical Investigation

Rehabilitation of Visual Disorders After Brain Injury

Traumatic brain injury (TBI) may affect 10 million people worldwide. It is considered the "signature wound" of the conflicts in Iraq and Afghanistan. These injuries result from a bump or blow to the head, or from external forces that cause the brain to move within the head, such as whiplash or exposure to blasts. TBI can cause an array of physical and mental health concerns and is a growing problem, particularly among soldiers and veterans because of repeated exposure to violent environments. One form of treatment for TBI is cognitive rehabilitation therapy (CRT), a patient-specific, goal-oriented approach to help patients increase their ability to process and interpret information. The Department of Defense asked the IOM to conduct a study to determine the effectiveness of CRT for treatment of TBI.

This thoroughly updated and extended edition covers the various cerebral visual disorders acquired after brain injury, as well as the rehabilitation techniques used to treat them. These are described within a brain plasticity framework, using data from single and group case studies along with follow up observation data. This original, tailor-made approach also includes the recording of eye movements for assessing scanning performance in scene perception and reading. The book gives a brief synopsis of the historical background on the subject, alongside an outline of intervention designs and methodological difficulties in the field, and goes on to discuss the mechanisms and processes that provide the foundations for recovery of function and successful adaptation in visually impaired patients. The author concludes by analyzing the importance of the procedures and outcomes of treatments to the reduction of patients' visual handicaps. The new edition also contains an appendix with recommendations on the case histories, diagnostics and treatments. It is ideal reading for students in clinical neuropsychology, as well as professionals in the fields of neurology, visual neuroscience and rehabilitation experts.

Whether caused by illness, accident, or incident, brain injury requires multi-tiered resources for the patient and considerable external care and support. When recovery is sidelined by depression, anger, grief, or turmoil, family members and the support network have critical roles to play and need their own guidance and compassionate therapeutic interventions. Psychotherapy for Families after Brain Injury offers theoretical frameworks and eclectic techniques for working effectively with adult patients and their families at the initial, active and post-treatment phases of rehabilitation. This practical reference clarifies roles and relationships of the support network in interfacing with the loved one and addresses the understandably devastating and sometimes derailing emotions and psychosocial adversities. The content promotes psychoeducation and guided exercises, delineates "helpful hints" and coping tools and proffers multimedia resources to overcome hurdles. Constructs of awareness, acceptance and realism for all parties are woven throughout, along with ideas to enhance the support network's commitment, adjustment, positivity, hope and longevity. Case excerpts, instructive quotes from caregivers and nuggets of clinical advice assist in analyzing these and other topics in salient detail: The impact of brain injury on different family members. Treatment themes in early family sessions. Family therapy for moderate to severe brain injury, concussion and postconcussion syndrome. Family therapy after organic brain injury: stroke, anoxia, tumor, seizure disorders. Family group treatment during active rehabilitation. End-of-life and existential considerations and positive aspects of care giving. Aftercare group therapy for long-term needs. The hands-on approach demonstrated in Psychotherapy for Families after Brain Injury will enhance the demanding work of a range of professionals, including neuropsychologists, clinical psychologists, rehabilitation psychologists, family therapists, marriage and family counselors, psychiatrists, behavioral/mental health counselors, clinical social workers, rehabilitation specialists such as speech-language pathologists, physical and occupational therapists, and graduate students in the helping professions.

Evaluation of the Disability Determination Process for Traumatic Brain Injury in Veterans

Traumatic Brain Injury and Deficit Awareness

A Physician's Guide to Practical Management

Psychotherapy after Brain Injury

Cognitive Neurorehabilitation

Psychotherapy for Families after Brain Injury

Anosognosia refers to lack of awareness of cognitive and executive deficits. It is a commonly reported problem after acquired brain injury (ABI) or stroke and often hinders an individual's ability to modify their behavior and to function in social situations or at work. This study concerned the question of whether the level of anosognosia after ABI predicts cognitive performance on standardized neuropsychological tests. It was hypothesized that lack awareness of cognitive deficits would be inversely related to performance on measures of cognitive performance. Archival data consisting of patient and observer ratings were derived from the Cognitive Complaints Survey (CCS), a 36-item survey providing both patient self report and an observer assessment of awareness. The scoring procedure for this test provided two discrepancy scores that assessed: deficit with awareness (DWA) and deficit without awareness (DWOA). The discrepancy scores were correlated with IQ scores measured from the Wechsler Adult Intelligence Scale, the Wechsler Memory Scale, and a measure of finger tapping speed. Results indicated that the DWOA measure did correlate significantly with finger tapping speed and a measure of non verbal working memory. The DWA measure did not correlate with any of the performance measures.

The Veterans Benefits Administration (VBA) provides disability compensation to veterans with a service-connected injury, and to receive disability compensation from the Department of Veterans Affairs (VA), a veteran must submit a claim or have a claim submitted on his or her behalf. Evaluation of the Disability Determination Process for Traumatic Brain Injury in Veterans reviews the process by which the VA assesses impairments resulting from traumatic brain injury for purposes of awarding disability compensation. This report also provides recommendations for legislative or administrative action for improving the adjudication of veterans' claims seeking entitlement to compensation for all impairments arising from a traumatic brain injury.

Without guiding principles, clinicians can easily get lost in the maze of problems that a brain-damaged patient presents. This book underlines the importance of patients' subjective experience of brain disease or injury, and the frustration and confusion they undergo. It shows that the symptom picture is a mixture of premorbid cognitive and personal characteristics with the neuropsychological changes directly associated with brain pathology. By closely observing the patient's behavior, the clinician can teach him or her about the direct and indirect effects of brain damage. The book provides guidelines both for the remediation of higher cerebral disturbances and the management of patients interpersonal problems. It presents a new perspective on disorders of self-awareness and recovery as well as deterioration phenomena after brain injury. It will be an invaluable resource for psychologists, neurologists, and psychiatrists involved in neuropsychological rehabilitation.

Communication Disorders Following Traumatic Brain Injury

Insight into Acquired Brain Injury

Awareness of Deficit After Brain Injury

Clinical and Theoretical Issues

Cellular, Molecular, Physiological, and Behavioral Aspects of Traumatic Brain Injury

The Study of Anosognosia

Every year, an estimated 1.7 million Americans sustain brain injury. Long-term disabilities impact nearly half of moderate brain injury survivors and nearly 50,000 of these cases result in death. Brain Neurotrauma: Molecular, Neuropsychological, and Rehabilitation Aspects provides a comprehensive and up-to-date account on the latest developments in the area of neurotrauma, including brain injury pathophysiology, biomarker research, experimental models of CNS injury, diagnostic methods, and neurotherapeutic interventions as well as neurorehabilitation strategies in the field of neurotraum research. The book includes several sections on neurotrauma mechanisms, biomarker discovery, neurocognitive/neurobehavioral deficits, and neurorehabilitation and treatment approaches. It also contains a section devoted to models of mild CNS injury, including blast and sport-related injuries. Over the last decade, the field of neurotrauma has witnessed significant advances, especially at the molecular, cellular, and behavioral levels. This progress is largely due to the introduction of novel techniques, as well as the development of new animal models of central nervous system (CNS) injury. This book, with its diverse coherent content, gives you insight into the diverse and heterogeneous aspects of CNS pathology and/or rehabilitation needs.

There are very few books available which are concerned with the unique communication problems that can come with traumatic brain injury (TBI). In recent years there has emerged a realisation that these difficulties in communication are closely tied to the cognitive, behavioural and social problems observed following traumatic brain injury. This is changing the way people with TBI are assessed and is generating new approaches to rehabilitation. This volume will be of interest to psychologists, speech pathologists and therapists and linguists. Clinicians and researchers working with people with traumatic brain injury, and their students, will find it a comprehensive source of contemporary approaches to characterising the communication problems of people with TBI and for planning rehabilitation.

The Neuropsychology of Consciousness is based on a symposium entitled "Consciousness and Cognition: Neuropsychological Perspectives held at the University of St Andrews, September 1990. The intention was to assemble a group of the major researchers at the forefront of this field. The starting point for the symposium and for the book was the widespread realization that in several areas of human cognition (e.g. visual perception, memory, language comprehension, and attention), the severe and profound impairments due to brain damage that have been described over the past 150 years are often not absolute. In particular, the use of indirect methods of testing may reveal unsuspected preservation of capacities that are undetected by more traditional direct methods. The book opens with a discussion of the epidemic of dissociations and how well the phenomena within either neuropsychology or within normal human experimental psychology map onto each other. This is followed by separate chapters on topics such as blindsight, covert visual processing in patients, face recognition and awareness following brain injury, and the relationship between the study of attention and the understanding of consciousness.

Evidence and Application

Factors for Feeling and Faring Better

Translational Research in Traumatic Brain Injury

Textbook of Traumatic Brain Injury

2nd Edition

Exercises for Cognitive Rehabilitation

Packed with practical tools and examples, this state-of-the-art workbook provides a holistic framework for supporting clients with acquired brain injury. Clinicians are guided to set and meet collaborative treatment goals based on a shared understanding of the strengths and needs of clients and their family members. Effective strategies are described for building skills and teaching compensatory strategies in such areas as attention, memory, executive functions, mood, and communication. Particular attention is given to facilitating the challenging process of identity change following a life-altering injury. In a large-size format for easy photocopying, the volume features 94 reproducible client handouts. Purchasers get access to a Web page where they can download and print the reproducible materials.

The Handbook of Clinical Neurology volumes on Traumatic Brain Injury (TBI) provide the reader with an updated review of emerging approaches to TBI research, clinical management and patient rehabilitation. Chapters in Part II offer coverage of clinical sequelae and long-term outcome, brain plasticity and long-term risks, and clinical trials. Contemporary investigations on blast injury and chronic traumatic encephalopathy are presented, making this state-of-the-art volume a must have for clinicians and researchers concerned with the clinical management, or investigation, of TBI. Internationally renowned scientists describe cutting edge research on the neurobiological response to traumatic brain injury, including complications to movement, mood, cognition and more Explores cellular/molecular and genetic factors contributing to plasticity Presents up-to-date expert recommendation for clinical trials and issues related to effective rehabilitation New findings are included on the long-term effects of traumatic brain injury that may impact aging and lead to dementia

Traumatic brain injury has complex etiology and may arise as a consequence of physical abuse, violence, war, vehicle collisions, working in the construction industry, and sports. Cellular, Molecular, Physiological, and Behavioral Aspects of Traumatic Brain Injury will improve readers' understanding of the detailed processes arising from traumatic brain injury. Featuring chapters on neuroinflammation, metabolism, and psychology, this volume discusses the impact of these injuries on neurological and body systems to better understand underlying pathways. This book will be relevant for neuroscientists, neurologists, clinicians, and anyone working to better understand traumatic brain injury. Summarizes the neuroscience of traumatic brain injury, including cellular and molecular biology Contains chapter abstracts, key facts, dictionary, and summary points to aid in understanding Features chapters on signaling and hormonal events Includes plasticity and gene expression Examines health and stress behaviors after traumatic brain injury

Awareness of Deficit after Brain Injury

Cognitive Rehabilitation Therapy for Traumatic Brain Injury

International Handbook of Neuropsychological Rehabilitation

A Client's Perspective

Evaluating the Evidence

Awareness of Neurobehavioral Deceits and Emotional Adjustment in Acute- and Post-acute Rehabilitation Following Traumatic Brain Injury

This book presents hands-on tools for addressing the multiple ways that brain injury can affect psychological functioning and well-being. The author is a leader in the field who translates her extensive clinical experience into clear-cut yet flexible guidelines that therapists can adapt for different challenges and settings. With a focus on facilitating awareness, coping, competence, adjustment, and community reintegration, the book features helpful case examples and reproducible handouts and forms. It shows how to weave together individual psychotherapy, cognitive retraining, group and family work, psychoeducation, and life skills training, and how to build and maintain a collaborative therapeutic relationship.

In this book, some of the leading clinicians and cognitive neuroscientists consider the effectiveness of cognitive rehabilitation. They situate the issues within an overall context that considers the different types and levels of diagnosis and assessment, the adequacy of underlying cognitive theory for rehabilitation, and more importantly, the clinical effectiveness of current treatments to improve functional recovery. By employing an evidence-based approach that critically evaluates the published literature, the book provides for a better understanding of the strengths and limitations of the cognitive approach and hopefully a more realistic expectation of its outcome for patients with neurological deficits. The book will serve as a valuable source for a wide spectrum of professionals who deal with the neuropsychological and neurological effects of brain damage.

Neuropsychological Rehabilitation