

Editor's comment

Critical care



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This issue of *CME* is on rehabilitation – an often neglected subject, both by practitioners and by the medical curriculum. When I decided on the title 'Critical care' I did so advisedly. Generally, critical care is thought of as acute, emergency care – but in this case I am using the word 'critical' to mean something of crucial importance.

We tend to think about rehabilitation either in the context of substance abuse – which is covered in this issue as updates – or for serious disability from, for example, stroke or spinal injury. But, as Nilesh Patel and his team of authors show us, there is far more to rehabilitation than this. For someone in general practice to understand

the issues around rehabilitation it is necessary to understand something of chronic disease – in all its contexts. The disability that results from stroke and spinal injury is pretty obvious in most cases although, as has been pointed out, silent stroke can leave the person with cognitive problems and depression that is simply not recognised as being anything other than part of the ageing process.

Chronic diseases of lifestyle are placing an increasing burden on all societies, including those in developing countries. Many of the people who suffer these diseases land up with disabilities of varying kinds that need active intervention to prevent a complete deterioration in quality of life.

This is an integral part of rehabilitation and requires an understanding of the factors that can cause disability and how to deal with them.

Also common in developing countries is injury, either related to work or, more often, to motor vehicle accidents. This frequently leaves relatively young people with serious disabilities that have to be managed in the community, usually with few resources. Again, this leaves the GP as the main source of health care intervention and advice.

I remember being told once that geriatrics (now called medicine for the elderly) is internal medicine practised well. I suspect the same can be said for rehabilitation.

Geriatric Rehabilitation Manual, 2nd edition

Edited by **Timothy L. Kauffman, John O. Barr and Michael L. Moran**
ISBN 0443102333 / 9780443102332 · Hardback · 576 Pages · 256 Illustrations
Churchill Livingstone · Published May 2007

This well-established, practical guide for training clinicians covers the evaluation and treatment of geriatric diseases and disorders. Equally appropriate as a quick-reference guide for students as well as for practitioners, this book covers incidence of disorders, diagnostic tests, associated diagnoses, clinical implications for mobility, and rehabilitation techniques. A broad overview of the effects of aging on all body systems, special geriatric considerations for laboratory assessment, thermoregulations, and pharmacology are also discussed. This user-friendly manual is an indispensable resource for all training clinicians in geriatric care and will be an invaluable quick-reference guide for students and practitioners in this field.



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