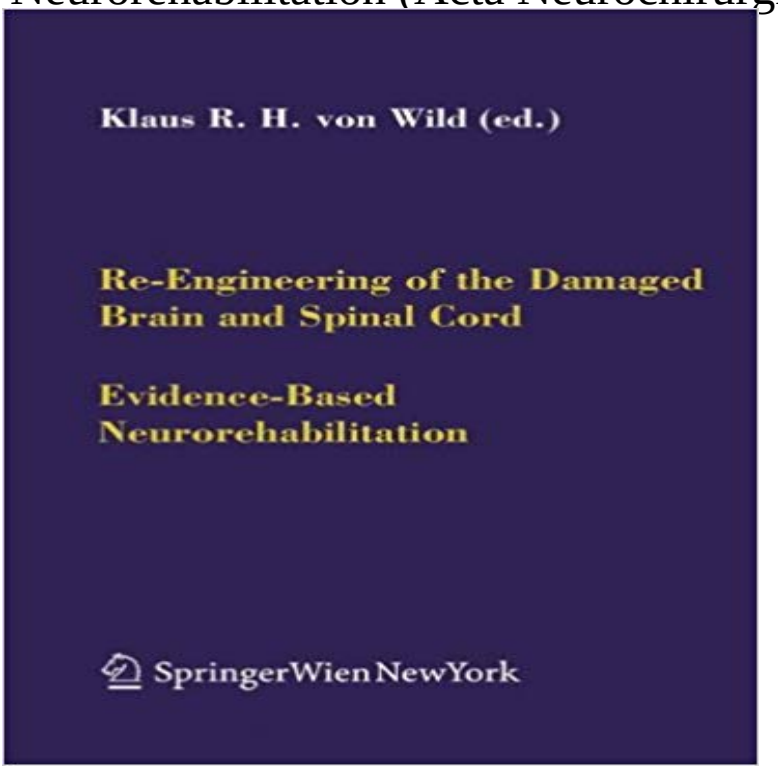
Re-Engineering of the Damaged Brain and Spinal Cord: Evidence-Based Neurorehabilitation (Acta Neurochirurgica Supplement) (Pt. 2)



Re-EngineeringoftheDamagedBrainandSpinalCord isdedicatedtoTetsuoKanno, M. D. ProfessorofNeurosurgery Bypresenting theoriginal papers thatmakeupthis thefeaturesofthelocalmedicallandscapeinthe- third supplement we wish to make a further contri- gionswheretheyareenacted. Whatismore, progr- bution to the issue of functional rehabilitation, this sivenew?ndingsmustbealsosubjectedtoafrequent soimportantandfascinatingmodernareaofres earch revision. Ontopofthis, itshouldnotbeforgottenthat inthe?eldofneurosciences. Thecongresspaperswe even when committal therapy guidelines are c- haveselectedconstituteagoodre?ectionofthet rans- sistentlyapplied, thereareconsiderablevariationsin disciplinary objectives. The literature references are therangeofpotentialcomplicationsandintheo- designedasaguidetoleadtheinterestedreadert oa comeofprospectivecontrolledmulti-centreand mul- deeperandmoredetailedunderstandingoftheindi- nationalstudiesontheissueofqualitymanage ment. vidualissues. Functionalrehabilitationhasbeenanoriginalt ask The demand for evidence-based medicine is well ofneurosurgeryfromtheveryoutset. The1990shave justi?ed; however, it rapidly comes up against the enteredtheannalsofbrainresearchastheDeca deof limitsoffeasibility, especiallywherecontrolledthe- theBrain. Sincethentherehasbeenaneverstronger peuticstudiesareconcerned. TheCochrancollection growthofneuroscienti?cinterestworldwide, accom- of high-quality evidence-based healthcare databases

paniedbysubstantial?nancialengagement. Thishas hasthusfarbeenofnohelptousindrawingupthe- primarily resulted in advances in basic neuro- peutic recommendations for the re-engineering of biologicalandneurophysiologicalresearchan dalsoin brain and spinal-cord lesions. Today as ever, the thegrowthofneuroscienti?cknowledgeabout basic opinion of experts and empirically based medical mechanismsformotor control, paincontrol, aware- treatment and posttraumatic neurorehabilitation ness, cognition, learning and memory. The conse- continuetooccupyanindispensablepositionf orthe quencemustbetoensurethattheadvancesmad einthe everydayclinicalpracticeofneurosurgicaland neu- neuroscienti?cresearchareaareadequatelyex panded traumatological therapies. Promising adjunct - intopracticalneurosurgicalcareandre-engine eringof proachesincludeneuropharmacology, forcascadesof brainandspinalcordlesionsandtoensureupon new molecular interactions are known to be underlying approaches. Following this a fundamental path will activity-dependent plasticity and skills learning, as resultinanimprovedandmoree cientpreventionin many of these processes involve the major tra- thefuture, themeasuresthatstandrightatthefore- mitters. Furthermore, biologicalinterventionsby- front of all rehabilitation principles, meaning that ingendogenousneuronsandgliaaswellasexog enous conventionalconceptsmustbemodi?edtokee ppace stemcells, bone-marrowcells, macrophages, andother withthemoretask-speci?c, intensive, andprogressive types may promote the regeneration of nerve cells, demands. In this connection a series of guidelines, tissue, and neural circuitry. Class one

studies have recommendations, and expert opinions and also beenmade, andnowclasstwostudieshavebeeni- algorithms have been elaborated by national and tiated, for example in connection with acute spinal international expert panels and multidisciplinary as- cord injury (SCI). The clinical application of fu- sociationsfortheacutemedicalcareofpatients.

Inhibition of I?B? phosphorylation prevents glutamate-induced NF This review classifies neural interface devices and systems into two Many BCI applications were developed based on cortical representation of movement,,. . In addition to high-level spinal cord injury patients, many individuals with hand . or imagined movement of a body part, can also activate multiple sensory and **Alternative, complementary, energy-based medicine for spinal cord** Acta Neurochirurgica Supplement Vol 97/2 is available under: D. E. Sakas and B. A. . Neurosurgical pain therapy with epidural spinal cord stimulation (SCS) . **Life after Adolescent and Adult Moderate and Severe - Hindawi** Re-Engineering of the Damaged Brain and Spinal Cord. Volume 93 of the series Acta Neurochirurgica Supplementum pp 155-158 . Book Title: Re-Engineering of the Damaged Brain and Spinal Cord Book Subtitle: Evidence-Based Neurorehabilitation Book Part: C. Medical Faculty, Westfalische Wilhelms University 2. **Posttraumatic epilepsy with special emphasis on prophylaxis and** Re-Engineering of the Damaged Brain and Spinal Cord. Volume 93 of the series Acta Neurochirurgica Supplementum pp 209-212 . Book Title: Re-Engineering of the Damaged Brain and Spinal Cord Book Subtitle: Evidence-Based Neurorehabilitation Book Part: D. Medical Faculty, Westfalische Wilhelms University 2. **Severe brain injuries in children - Springer** RE-Engineering of the Damaged Brain and Spinal Cord: Pt. 2: Evidence. Added to basket. Add to Basket. View basket Checkout RE-Engineering of the **RE-Engineering of the Damaged Brain and Spinal Cord: Evidence** Re-Engineering of the Damaged Brain and Spinal Cord. Evidence-Based Neurorehabilitation Part of the Acta Neurochirurgica Supplementum book series **Advanced Peripheral Nerve Surgery and Minimal Invasive Spinal** Spinal cord injury (SCI) is one of the major disabilities dealt with in clinical . 14] and insufficient evidence for standard treatment in patients with Recently, one 2-year clinical trial for acute SCI patients was The study for patients with multiple sclerosis in the brain and spinal Acta neurochirurgica. **Life after Adolescent**

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