

Rehabilitation

Current Awareness Bulletin

October 2025

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Next sessions: 11th November @ 10am & 3rd December @ 11am

• Quickfire health literacy: communicating with patients more effectively 30 minutes. Learn about the communication barriers patients may encounter, and ways to ensure they get the most from their care.

Next sessions: 28th November @ 12 noon & 9th December @ 1pm

Book a session today at https://forms.office.com/e/HyiSXfDaYV (these sessions will be held on a monthly basis)

1. Implementation of Group Physical Therapy for Knee Osteoarthritis: A Cluster Randomized Clinical Trial

Authors: Allen, Kelli D.;Webb, Sara;Coffman, Cynthia J.;Anderson, Livia;Cummin, Graham;Drake, Connor;Tucker, Matthew;Webster, Amy;Sperber, Nina;Zullig, Leah L.;Hughes, Jaime M.;Ballengee, Lindsay A.;Abbate, Lauren M.;Hoenig, Helen;Fullenkamp, Natalie;Van Houtven, Courtney H. and Hastings, Susan N.

Publication Date: 2025

Journal: JAMA Network Open

Abstract: This cluster randomized clinical trial compares the effectiveness of foundational vs enhanced implementation support for enrolling and retaining patients in a group physical therapy program for knee osteoarthritis. Key Points: Question: Is an enhanced implementation support approach superior to less intensive foundational implementation support for promoting delivery of a group physical therapy program for knee osteoarthritis? Findings: In this cluster randomized clinical trial including 19 sites and 144 patients, sites receiving enhanced implementation support did not have significantly greater penetration (patients enrolled per month) or fidelity (number of classes per patient) compared with sites receiving foundational support. The rate of adoption was high for both arms, but penetration was relatively low. Meaning: In this study, enhanced implementation support did not outperform foundational support, suggesting different implementation approaches are likely needed to adequately support penetration. Importance: Group-based physical therapy (PT) for knee osteoarthritis is an effective, efficient strategy for delivering care, but little is known about optimal strategies for implementing new clinical programs like group PT. Objective: To compare 2 implementation support approaches—foundational support and a combination of foundational support and

more intensive enhanced support involving individual external facilitation—for delivering group PT. Design, Setting, and Participants: This cluster randomized clinical trial was conducted from January 31, 2022, to March 18, 2024, in outpatient PT departments at Department of Veterans Affairs (VA) Healthcare sites that agreed to deliver group PT to patients with symptomatic knee osteoarthritis. Sites were randomized to receive foundational or enhanced implementation support for delivering 6 sessions of group PT over 12 months that included exercise and educational content. Interventions: The foundational support approach included self-guided tools and monthly learning collaborative calls. The enhanced support approach added tailored support (eg, external facilitation) for sites that did not meet a priori benchmarks for adoption at 6 months or sustainment at 9 months. Main Outcomes and Measures: Site-level implementation outcomes were measured during months 7 to 12 and included penetration (primary outcome, assessed as the mean number of patients enrolled per month) and fidelity (mean number of classes attended per patient, out of a maximum of 6). Generalized linear models were used to examine differences in implementation outcomes between the enhanced and foundational support arms. Results: Nineteen sites (10 enhanced support, 9 foundational support) enrolling across 3 cohorts delivered group PT to 144 patients (68 enhanced support, 76 foundational support) during months 7 to 12. Patients were predominantly male (130 90.3%]), with a mean (SD) age of 67 (9.2) years. Mean penetration estimates were 1.0 (95%) CI, 0.2-1.7) patients enrolled per month for the enhanced support and 1.0 (95% CI, 0.1-1.9) for the foundational support arm, with an estimated mean difference between arms of -0.1 (95%) CI, -1.1 to 1.0) patients enrolled (P = .92). Mean fidelity estimates were 5.0 (95% CI, 4.3-5.7) classes attended per patient in the enhanced support arm and 4.1 (95% CI, 3.2-4.9) in the foundational support arm, with an estimated mean difference between arms of 0.9 (95% CI, 0.0-1.9) classes per patient (P = .06). Conclusions and Relevance: In this cluster randomized clinical trial, an enhanced implementation support approach for delivering group PT did not outperform foundational support. Penetration was modest, illustrating the challenge of fostering referrals. Trial Registration: ClinicalTrials.gov Identifier: NCT05282927

2. Active and passive physical therapy in patients with chronic low-back pain: a level I Bayesian network meta-analysis

Authors: Baroncini, Alice;Maffulli, Nicola;Manocchio, Nicola;Bossa, Michela;Foti, Calogero;Schäfer, Luise;Klimuch, Alexandra and Migliorini, Filippo

Publication Date: 2025

Journal: Journal of Orthopaedics & Traumatology

3. Occupational Therapy in Athletics and Sports: A Scoping Review

Authors: Bulan, Paolo Miguel Pangue; Villalino, Celine Karla; Gutierrez, Martina Simone Y. and Evardo, Michelle Kyra S.

Publication Date: 2025

Journal: The American Journal of Occupational Therapy : Official Publication of the American Occupational Therapy Association

Abstract: Importance: Despite the growing recognition of sports as meaningful occupations, occupational therapy's contributions regarding specific populations, intervention approaches,

and outcome measures remain underexplored.: Objective: To map evidence on the characterization of occupational therapy in sports and types of occupational therapy interventions provided to support participation, recovery, and performance in sports-related settings.; Data Sources: A search was conducted across CINAHL, EBSCO, PubMed, and SCOPUS databases, covering studies published from 2000 to 2024.; Study Selection and Data Collection: Peer-reviewed studies were included if they discussed occupational therapy's role in sports, including leisure and competitive contexts, with interventions focusing on recovery, rehabilitation, or performance enhancement. Data were charted to identify key themes, study characteristics, populations, interventions, and outcomes.; Findings: Thirteen studies were included. Occupational therapy in sports was characterized by its holistic focus on physical, emotional, and social rehabilitation, particularly in adaptive and competitive contexts. Interventions included assistive technology, education, and client-centered approaches, with reported outcomes such as improved quality of life, athletic performance, and psychosocial well-being. Barriers included resource limitations and stigma.; Conclusions and Relevance: Occupational therapy plays a multifaceted role in sports, enhancing participation, recovery, and performance through client-centered and adaptive interventions. Addressing systemic barriers and expanding culturally tailored approaches can further advance occupational therapy's integration into sports contexts. Future research should focus on underrepresented populations and long-term intervention outcomes to strengthen evidencebased practice. Plain-Language Summary: Occupational therapy helps athletes and sports participants recover, perform, and engage meaningfully in sports activities. This study reviews evidence on how occupational therapy supports sports participation, including using adaptive tools and education to improve performance and quality of life. Occupational therapy can address athletes' physical and emotional challenges, but more research is needed to expand occupational therapy's role in diverse sports settings and ensure accessibility for all. (Copyright © 2025 by the American Occupational Therapy Association, Inc.)

4. Blowing devices, resources and incentive screens during respiratory physiotherapy: a systematic review

Authors: Cadorin, Thaise Helena; Cardoso, Juliana; Castilho, Tayná; Ducati, Gabriela Castilhos; Wamosy, Renata Maba Gonçalves and Schivinski, Camila Isabel Santos

Publication Date: 2025

Journal: BMC Pulmonary Medicine

5. The changing face of acute low back pain management by physiotherapists, osteopaths and chiropractors in the UK: a 20-year comparison from 2003 to 2023

Authors: Evans, David W.; Foster, Nadine E.; Breen, Alan C.; Pincus, Tamar; Underwood,

Martin and Vogel, Steven

Publication Date: 2025

Journal: BMC Musculoskeletal Disorders

6. Threat or Opportunity? Social Prescribing and Implications for Occupational Therapy

Authors: Gallagher, MaryBeth and Lambdin-Pattavina, Carol

Publication Date: 2025

Journal: The American Journal of Occupational Therapy : Official Publication of the American

Occupational Therapy Association

Abstract: Social prescribing (SP)-the use of nonmedical community activities and supports to enhance health and address social drivers of health, provided in tandem with medical interventions-is embedded in many health care systems around the globe, but its use in the United States is still emerging. Similarities between SP and occupational therapy abound. In this column, the authors take an occupational justice perspective and use the Capabilities, Opportunities, Resources and Environments framework to analyze the relationship between occupational therapy and SP. They argue that the occupational therapy profession needs to be aware of SP, understand its potential for professional role overlap or blurring, and foster the profession's inclusion in this practice in the United States. They also discuss opportunities for occupational therapy to capitalize on this growing movement to enable a positive outcome. (Copyright © 2025 by the American Occupational Therapy Association, Inc.)

7. Enhancing cardiac rehabilitation adherence through home-based rehabilitation and behavioral nudges: The ERA nudge study design and rationale

Authors: Gupta, Prerna;Fletcher, Dana R.;Durfee, Josh;Martinez, Monica;Hajoglou, Amanda;Waughtal, Joy;Bull, Sheana and Peterson, Pamela N.

Publication Date: 2025

Journal: American Heart Journal

Abstract: Competing Interests: Conflict of Interest The authors declare that they have no known competing financial interests or personal relationships that could have appeared to influence the work reported in this paper.; Background: Cardiac rehabilitation (CR) continues to be under-utilized despite known benefits across the cardiovascular disease spectrum. Unfortunately, despite efforts to augment access, barriers persist in patient access to rehabilitation and ability to participate due to logistical challenges. A choice of home-based CR may present an appealing alternative that circumvents these known obstacles. Similarly, nudge reminders, or messages designed to elicit behavioral change, may improve adherence to CR.; Hypothesis: Providing a choice of home or hospital-based CR, and nudge reminders will improve adherence to CR in an urban safety net population.; Design: The Enhancing Cardiac Rehabilitation Adherence through Home-Based Rehabilitation and Behavioral Nudges (ERA-Nudge) study utilizes a 2 × 2 factorial design to randomize eligible CR patients to usual care versus choice of home or hospital-based CR, and tailored nudge messages versus generic reminders to encourage healthy behavior. The study assesses the effectiveness of choice of CR location (ie, home versus hospital) and nudge messages in improving CR adherence. The study also uses an implementation framework to understand reach, adoption, implementation, and maintenance of this approach within the context of real-world care delivery in a pragmatic trial design. The enrollment was completed in May 2023, with a total of 447 patients.; Summary: The ERA-Nudge trial assesses the implementation, effectiveness, and safety of choice in CR location and nudge messaging to improve CR adherence. If

successful, this approach can be easily disseminated and may inform future implementations for rehabilitation and other behavioral therapies.; Trial Registration: URL: https://clinicaltrials.gov; Unique identifier: NCT03834155. (Copyright © 2025 The Authors. Published by Elsevier Inc. All rights reserved.)

8. Development, Reliability, and Validity of the Occupational Therapy Self-Efficacy of Clinical Competence (OT-SECC) Assessment

Authors: Hoover, Karen D.; MacGregor, Alicia M.; Sheikovitz, Lisa J. and Ohl, Alisha M.

Publication Date: 2025

Journal: The American Journal of Occupational Therapy : Official Publication of the American Occupational Therapy Association

Abstract: Importance: There is a lack of reliable and valid tools to measure self-efficacy of clinical competence in didactic occupational therapy education.; Objective: To determine the content validity, test-retest reliability, internal consistency, convergent validity, and factor structure of the Occupational Therapy Self-Efficacy of Clinical Competence (OT-SECC) assessment.; Design: A cross-sectional psychometric study.; Setting: Two higher education institutions in the northeastern United States.; Participants: Ninety-two first- and second-year master's-level occupational therapy students.; Outcomes and Measures: The 12-item OT-SECC was developed to measure self-efficacy of clinical competence on a 10-point sliding scale ranging from 0 (cannot do at all) to 10 (highly certain can do). The OT-SECC was psychometrically evaluated using classical test theory approaches.; Results: Overall, results support the reliability and validity of the OT-SECC. For instance, the assessment had good test-retest reliability (intraclass correlation ICC(2,1) = 0.817, p < .001) and acceptable internal consistency across its two factors ($\alpha s = .838$ and .923, respectively). The OT-SECC also demonstrated convergent validity across two administrations when compared with a similar assessment, the Physiotherapist Self-Efficacy Questionnaire (rs = .67 and .61, ps < .001, respectively).; Conclusions and Relevance: The OT-SECC is a psychometrically sound assessment that may be used by occupational therapy programs to examine students' selfefficacy of clinical competence before attending fieldwork. Plain-Language Summary: There is an increasing responsibility for occupational therapy graduate education programs to prepare students for clinical practice. Although experiential learning activities are commonly used to teach these clinical skills, there are few valid and reliable tools to measure their effectiveness. To address this, the researchers developed the Occupational Therapy Self-Efficacy of Clinical Competence (OT-SECC) assessment. Findings show that the OT-SECC exhibits acceptable content validity, test-retest reliability, convergent validity, internal consistency, and construct validity. The assessment can be used by faculty to select instructional methods, refine experiential learning activities, assist with individual student advisement, and evaluate program effectiveness. (Copyright © 2025 by the American Occupational Therapy Association, Inc.)

9. Artificial Intelligence and Occupational Therapy: From Emerging Occupation to Educational, Practice, and Policy Imperative

Authors: Jozkowski, Amanda Colleen

Publication Date: 2025

Journal: The American Journal of Occupational Therapy: Official Publication of the American

Occupational Therapy Association

Abstract: Artificial intelligence (AI) is now increasingly integrated into health care, education, and daily life. It now shapes how people learn, work, communicate, and manage health. For occupational therapy, which centers on enabling meaningful participation across contexts, this technological transformation presents critical challenges and opportunities. Despite Al's growing presence, the profession lacks cohesive standards or strategies to address its impact on education, clinical reasoning, or client-centered practice. Al is a practice-relevant and educationally urgent phenomenon that demands structured engagement and leadership within the profession to ensure its ethical, inclusive integration. Occupational therapy practitioners must be prepared to support students, practitioners, and clients in navigating these technologies. Without clear competencies and shared frameworks, the profession risks marginalization and missed opportunities to uphold occupational justice. Action is needed in three domains: (1) occupational therapy education, where AI literacy and ethical use must be taught and modeled; (2) clinical practice, where AI tools require critical evaluation and adaptation; and (3) client engagement, where AI use must be recognized and supported as an evolving occupation. Accreditation, continuing education, and public policy must align to support this shift. (Copyright © 2025 by the American Occupational Therapy Association, Inc.)

10. Psychosocial Occupational Therapy Interventions for High-Risk Pregnancies: A Systematic Review

Authors: Khan, Sabina;Tran, Thuy;Edema, Christianah;Grant, Jessica;Olivares, Laritza and Ferreira, Viviana

Publication Date: 2025

Journal: The American Journal of Occupational Therapy : Official Publication of the American Occupational Therapy Association

Abstract: Importance: High-risk pregnancies present significant psychological challenges for affected women, and psychosocial interventions may improve their mental health and quality of life.; Objective: To evaluate the effectiveness of psychosocial occupational therapy interventions for managing anxiety, depression, stress, and quality of life among women with high-risk pregnancies.; Data Sources: CINAHL, SocIndex, AMED, Embase via Ovid, MEDLINE in PubMed, Cochrane Library, OTseeker, and PsycINFO.; Study Selection and Data Collection: This systematic review followed Cochrane Collaboration methodology and Preferred Reporting Items for Systematic reviews and Meta-Analyses (PRISMA) guidelines. Studies included women with high-risk pregnancies (e.g., gestational diabetes, hypertensive disorders, preterm labor) and examined occupational therapy-related psychosocial interventions. Eligible studies reported outcomes for anxiety, depression, stress, or quality of life and were classified as Level 1b, 2b, or 3b evidence. Data were analyzed using narrative synthesis.; Findings: Thirty-four studies met the inclusion criteria. Cognitive-based and

counseling-based interventions showed moderate to strong effectiveness in reducing anxiety, depression, and stress. Emotion-based approaches had low to moderate effectiveness, and sensory-based interventions were largely ineffective. Integrated approaches, such as mindfulness-based cognitive therapy, showed mixed results.; Conclusions and Relevance: Findings support integrating psychosocial interventions into occupational therapy to enhance mental health and occupational engagement for women with high-risk pregnancies. Plain-Language Summary: This study reviewed 34 studies of psychosocial interventions for women with high-risk pregnancies. Cognitive and counseling-based strategies were most effective in reducing anxiety, depression, and stress. Sensory-based approaches had little impact. These findings reinforce the role of occupational therapists in supporting mental health and inform future practice and education. (Copyright © 2025 by the American Occupational Therapy Association, Inc.)

11. Social Isolation, Loneliness, and the Potential of Occupational Therapy as an Integrated Solution

Authors: LaRocca, Caterina

Publication Date: 2025

Journal: The American Journal of Occupational Therapy : Official Publication of the American Occupational Therapy Association

Abstract: Social isolation and loneliness (SIL) has been deemed an epidemic, with reports indicating dramatic increases in prevalence over the past decade. Despite the growing recognition of SIL as a public health crisis, current interventions remain insufficient to address the need. Occupational therapy practitioners are well positioned to screen for and address SIL, and preliminary evidence suggests that individual and group-based occupational therapy interventions hold promise in reducing SIL. The three aims of this Health Policy Perspectives column are to (1) describe the SIL epidemic in the United States, (2) analyze the strengths and limitations of current initiatives, and (3) identify occupational therapy interventions and approaches that may be integrated into current efforts to combat SIL in the United States. (Copyright © 2025 by the American Occupational Therapy Association, Inc.)

12. Dropouts in Exercise Rehabilitation Program in Patients With Long COVID: A Systematic Review

Authors: Monte, Adão Luis;Karla Tavares do Nascimento Faustino da Silva, Jéssika;Duarte de Oliveira, Max;Quintella Farah, Breno;Kanegusuku, Hélcio;Almeida Correia, Marilia and Mendes Ritti-Dias, Raphael

Publication Date: 2025

Journal: American Journal of Physical Medicine & Rehabilitation

Abstract: Objective: The aim of the study was to describe dropout rates, reasons, and factors associated with dropout during rehabilitation programs for patients with long COVID. Design: A search was conducted in PubMed, Embase, and Web of Science. Clinical trials were included that involved exercise programs lasting at least 4 weeks and focused on long-COVID patients aged 18 or older of both sexes, reporting on dropouts and their reasons. The TESTEX scale

assessed study quality. Data on patients, interventions, and dropout rates were extracted and presented as frequencies. Results: Twenty-three studies with 1523 patients (mean age 53.0 ± 6.4 yrs, 51% female) were included. Overall, 14% (n = 216) of long-COVID patients dropped out. Reasons included health problems (23%), incomplete assessments (19%), loss of interest (16%), lack of adherence (7%), adherence to other interventions (4%), and 31% unreported. The dropout rate was significantly higher in 2020 compared to 2021 (P = 0.039), while no significant associations were observed between the dropout rate and other variables. Conclusions: Exercise rehabilitation studies for long-COVID patients show a 14% dropout rate, with the most common reasons being health-related issues and incomplete assessments.

13. The effectiveness of physiotherapy for chronic headaches in patients with temporomandibular disorders: a systematic review

Authors: Quilghini, Charlène; Lefflot, Julian and Buchholtz, Kim

Publication Date: 2025

Journal: Frontiers in Rehabilitation Sciences

14. The experiences and perspectives of participating in a nature integrative rehabilitation programme when suffering from post-concussion syndrome: responses, gains, and impact from using enriched nature environments as a rehabilitation setting and integrating nature as rehabilitation means

Authors: Sidenius, Ulrik; Corazon, Sus Sola; Varning Poulsen, Dorthe; Jul Olsen, Lisbeth and

Kæreby, Natasha

Publication Date: 2025

Journal: International Journal of Qualitative Studies on Health and Well-Being

Abstract: Purpose: This study aims to understand the perspectives of individuals participating in a nature integrative rehabilitation (NIR) programme for post-concussion syndrome (PCS) in Denmark. The focus is on benefits, challenges, and impact of using enriched natural environments in rehabilitation.; Methods: A qualitative approach was employed, utilizing semistructured interviews with 23 participants who completed a 10-week NIR programme in a therapy garden. Thematic analysis was conducted to identify key themes and patterns in participants' experiences.; Results: Participants reported enhanced emotional and sensory engagement with natural environments, leading to decreased PCS symptoms. The structured nature integrative activities promoted present-moment awareness, relaxation, and physical activity, which were valued by the participants. The facilitators' ability to adapt activities to individual needs was crucial to the perceived benefit of the programme. Group settings provided social support, reducing feelings of isolation.; Conclusions: NIR supports individuals with PCS by enhancing emotional well-being, reducing symptoms, and providing coping strategies. Alongside social support, the flexibility of the activities, allowing individuals to engage according to their symptoms and capabilities, is critical for rehabilitative outcomes. Future research should explore long-term effects and refine intervention protocols for implementation in the healthcare system to ensure the efficacy of NIR for people with PCS.

15. Initial management and disposition of metastatic spinal cord compression in the emergency department: a review of the literature

Authors: Singer, Emad; Elsayem, Ahmed; Nassif, Tracy; Rodriguez, Christopher; Zoghbi, Marianne; Dagher, Jim; Yammine, Nicole; Kamal, Mona; Cruz Carreras, Maria, T.; Vu, Trien; Qdaisat, Aiham; Yeung, Sai-Ching J. and Chaftari, Patrick

Publication Date: 2025

Journal: Annals of Medicine

Abstract: Background: Metastatic spinal cord compression (MSCC) is a serious medical emergency that can complicate the course of various malignancies, including prostate, breast, and lung cancers. Appropriate evaluation and effective management of MSCC early in the emergency department are necessary to minimize neurologic deterioration and optimize the trajectory of patient recovery.; Methods: This literature review examines and summarizes current evidence surrounding the emergency department approach for timely recognition, initial evaluation, and management of MSCC.; Results: A comprehensive clinical history, nerve root or spinal cord clinical examination, and urgent imaging procedures are fundamental for early diagnosis and initial management. The urgency of intervention depends on the rate of onset of motor deficits, which can progress during work-up. Patients should be stratified into subgroups: those requiring immediate surgery, those who can be treated with radiotherapy, and those who may be discharged for outpatient care. Some patients can be observed for 24 h to adjust the medical and/or surgical treatment. In most cases, systemic steroid administration with dexamethasone should be started immediately upon diagnosis, followed by a tapering course of oral dexamethasone. Selected patients should undergo surgical decompression with or without stabilization. A multidisciplinary approach involving both spinal surgeons and radiation oncologists is essential for diagnosis and stratification.; Conclusion: For patients with MSCC, early and effective evaluation and intervention in the emergency department, through a coordinated multidisciplinary effort, are vital to optimizing patient outcomes.

16. Research progress in the use of botulinum toxin type a for post-stroke spasticity rehabilitation: a narrative review

Authors: Xu, Qianwen; Xiao, Hongbo; Zhu, Zongjun; Guan, Yuanyuan and Wang, Ya

Publication Date: 2025

Journal: Annals of Medicine

Abstract: Background: Stroke is a leading cause of long-term disability and death worldwide. Spasticity after stroke seriously affects patients' quality of life. If this state persists for a long time, it will lead to severe joint atrophy, reduced motor coordination, and even permanent disability. Therefore, clinical research has focused on the treatment of spasticity and the recovery of motor function after stroke.; Aim: The aim of this paper is to explore the use of botulinum toxin type A in the rehabilitation of spasticity after stroke and to provide a theoretical basis for optimizing rehabilitation strategies, highlighting its potential value in reducing spasticity and improving motor function.; Method: This article reviews the latest research progress on the application of BTX-A in spasticity after stroke, discusses the potential and challenges of BTX-A in reducing spasticity and improving motor function in patients with

stroke.; Result: Botulinum toxin type A (BTX-A) is a local muscle paralytic agent that has received extensive attention in recent years for its application in reducing muscle spasticity and promoting post-stroke rehabilitation.; Conclusion: This article confirms that botulinum toxin type A has a significant clinical effect in treating muscle spasticity after stroke and also helps improve motor function restoration in patients. Studies have shown that botulinum toxin type A injections are effective in reducing spasticity and, when combined with rehabilitation training, can facilitate the recovery of motor function in post-stroke patients. Therefore, botulinum toxin type A has a broad application prospect in the rehabilitation of post-stroke spasticity.

17. Experience of use, usability and psychosocial impact of robotic and virtual reality technology in neuromotor rehabilitation: A mixed-method triangulation analysis of patients' and their therapists' perspective

Authors: Zanatta, Francesco; Steca, Patrizia; Maffoni, Marina; Fundarò, Cira; Giardini, Anna; Ferretti, Chiara; Arbasi, Giovanni; D'Addario, Marco and Pierobon, Antonia

Publication Date: 2025

Journal: Applied Ergonomics

Abstract: Competing Interests: Declaration of competing interest The authors declare that they have no known competing financial interests or personal relationships that could have appeared to influence the work reported in this paper.; Robotics and Virtual Reality (VR) have shown promise in rehabilitation programs, but more integrated technology evaluations are essential to promote patient engagement and outcomes. This study assessed technology experience of use, usability, and psychosocial impact in neuromotor rehabilitation, by accounting both patients' (n = 29) and their therapists' (n = 13) view. A mixed-method convergent parallel design with a nested triangulation protocol was adopted to analyze participants' perspectives and further identify agreements and discrepancies. Positive perceptions of technology experience of use, usability, and psychosocial impact were reported by patients along with significant correlations between technology use and perceived effectiveness. Therapists noted acceptable usability with some device-specific variations. From qualitative data, key themes were identified (i.e., "Learnability," "Engagement," "Implementation", "Barriers") and areas for improvement were highlighted for future deployment. Finally, triangulation showed broad agreement among participants. Findings emphasize the need for integrating different user perspective when evaluating rehabilitation technologies and underscore their potential to enhance rehabilitation outcomes. (Copyright © 2025 The Authors. Published by Elsevier Ltd.. All rights reserved.)

New / Updated Guidance from NICE

18. Digital technologies to deliver pulmonary rehabilitation programmes for adults with COPD: early value assessment [NICE]

National Institute for Health and Care Excellence (NICE)

Publication Date: 2025

19. Bed frames for adults in acute medical or surgical hospital wards: late-stage assessment

Publication Date: 2025

National Institute for Health and Care Excellence (NICE)

LSA guidance evaluates categories of technologies that are already in widespread use within the NHS. It assesses whether price variations between technologies in a category are justified by differences in innovation, clinical effectiveness and patient benefits. This will support NHS commissioners, procurement teams, patients and healthcare professionals to choose technologies that maximise clinical effectiveness and value for money.

20. A profession under pressure: speech and language therapy retention and waiting times

Publication Date: 2025

Royal College of Speech and Language Therapists (RCSLT)

Results from a survey of over 1000 SLTs shows significant time pressures and feeling of burnout across the profession.

21. Outcomes of specialist physiotherapy for functional motor disorder: the Physio4FMD RCT

Author: Nielsen G.

Publication Date: 2025

Journal: Health Technology Assessment

Functional motor disorder often causes persistent disabling symptoms that are associated with high healthcare costs. In recent years, specialist physiotherapy, informed by an understanding of functional motor disorder, has emerged as a promising treatment, but there is an absence of evidence of its effectiveness from large randomised controlled trials.

22. Effectiveness of physiotherapist-led tele-rehabilitation for older adults with chronic conditions: a systematic review and meta-analysis [with consumer summary]

Author: Edward H.

Publication Date: 2025

Journal: Disability & Rehabilitation

Older adults live with chronic conditions worldwide. The aim of this systematic review was to determine the effectiveness of physiotherapist-led (PT-led) tele-rehabilitation on various health outcomes.

23. Examination of occupational therapists' encounters with violence

Author: Öksüz Ç.

Publication Date: 2025

Journal: British Journal of Occupational Therapy

We aimed to investigate whether occupational therapists are exposed to violence in their professional lives and to identify the types of violence they encounter.

24. When occupational therapists and physiotherapists are leading—same or different? A qualitative study of management practice

Author: Skovbjerg M.

Publication Date: 2025

Journal: British Journal of Occupational Therapy

In the Danish public healthcare sector, leading occupational therapists (LOTs) and physiotherapists (LPTs) hold key managerial roles. However, fewer LOTs engage in management development activities compared to LPTs, despite both needing similar tools for effective management. This study explores (1) the leadership styles of LOTs and LPTs, (2) their expectations from management practices, and (3) any discrepancies in their leadership roles.

25. The Drucebo effect in occupational therapy: A double-edged phenomenon (editorial)

Authors: Tedeschi R.

Publication Date: 2025

Journal: British Journal of Occupational Therapy

The Drucebo effect refers to the negative impact of patient expectations and contextual factors on treatment outcomes, leading to poorer recovery, reduced adherence, and heightened perceptions of disability. Unlike placebo effects, which enhance therapeutic benefits through positive expectancy, Drucebo represents the opposite phenomenon, in which negative clinician communication, implicit bias, or an unstructured therapeutic approach undermine rehabilitation efficacy.

26. Spirituality in occupational therapy practice: A scoping review with narrative synthesis

Authors: So, H; MacKenzie L; McColl M.A; et al

Publication Date: 2025

Journal: A British Journal of Occupational Therapy

Spirituality is a fundamental aspect of human existence. Additionally, spirituality is acknowledged within many occupational therapy models of practice. Despite this, other health professions are dominant in published spirituality research and resources. Therefore, to develop our profession-specific perspective, a broad range of occupational therapy spirituality literature was explored to identify how international occupational therapists integrate spirituality into practice.

27. Effect of Enhanced Versus Usual Mobilization Activities in Critically III Adults: A Systematic Review and Meta-Analysis of Randomized Controlled Trials

Authors: Carayannopoulos KL.

Publication Date: 2025

Journal: Critical Care Medicine.

This review demonstrates that enhanced mobilization likely reduces the incidence of ICU-acquired weakness and may reduce duration of delirium, while supporting prior findings that there is little to no difference in risk of adverse events. Early mobilization may be the most promising avenue for optimizing mobilization activities and raise the question of whether the key to improving outcomes lies in early exposure to these activities rather than increased intensity.

28. NHS Trials World-First Al Physiotherapist

Publication Date: 2025

Practice Business

The platform, which offers same-day video consultations for back pain via an app, has been successfully piloted by NHS trusts in England and Scotland.

29. The formal EU-US Meniscus Rehabilitation 2024 Consensus: An ESSKA-AOSSM-AASPT initiative. Part II-Prevention, non-operative treatment and return to sport

Author: Prill R et al.

Publication Date: 2025

Journal: Knee surgery, sports traumatology, arthroscopy: official journal of the ESSKA

30. The formal EU-US Meniscus Rehabilitation 2024 Consensus: An ESSKA-AOSSM-AASPT initiative. Part I-Rehabilitation management after meniscus surgery (meniscectomy, repair and reconstruction)

Author: Pujol N et al.

Publication Date: 2025

Journal: Knee surgery, sports traumatology, arthroscopy: official journal of the ESSKA

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