

# Rehabilitation

## Current Awareness Bulletin

### January 2026

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### 1. Effect of Wii Fit Rehabilitation on Balance, Functional Ability, and Risk of Falling in Patients With Chronic Ankle Instability: A Randomized Controlled Trial

**Authors:** Abdel-Aal, Nabil;El-Kablawy, Maher;Kadah, Mohamed Abdel-Haleem;Abbas, Aya Abd El Hady;Basha, Maged A. and Kamel, FatmaAlzahraa H.

**Publication Date:** 2026

**Journal:** American Journal of Physical Medicine & Rehabilitation

**Abstract:** Objective: The aim of the study was to evaluate the efficacy of incorporating Wii Fit-based rehabilitation into a conventional physical therapy program on balance, functional ability, and fall risk in individuals with chronic ankle instability.; Design: This is a single-blinded randomized controlled trial.; Methods: Sixty participants with chronic ankle instability (aged 18-60 yrs) were randomly assigned to either an experimental group (Wii Fit-based rehabilitation plus conventional physical therapy) or a control group (conventional physical therapy only). Both groups received supervised therapy three times per week over 8 wks. Outcome measures included the anteroposterior, mediolateral, and overall stability indices assessed via the Biodex Balance System; functional ability via the Foot and Ankle Ability Measure-Activities of Daily Living; and fall risk via the Falls Efficacy Scale-International, measured before and after intervention.; Results: The Wii Fit-based rehabilitation combined with conventional physical therapy group demonstrated significantly greater improvements across all outcome measures compared with the conventional physical therapy-only group ( P < 0.001). At 8 wks, Foot and Ankle Ability Measure-Activities of Daily Living and Falls Efficacy Scale-International scores were 94.7 ± 3.22 and 17.77 ± 2.76 in the intervention group versus 83.43 ± 2.45 and 26.3 ± 3.51 in controls, respectively.; Conclusions: Combined Wii Fit-based rehabilitation and

conventional physical therapy program significantly enhance postural stability, functional performance, and reduces fall risk in patients with chronic ankle instability. Wii Fit-based rehabilitation may serve as a valuable adjunct in rehabilitation protocols targeting balance deficits in this population. (Copyright © 2025 Wolters Kluwer Health, Inc. All rights reserved.)

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## 2. Sexuality in the field of occupational therapy: A scoping review

**Authors:** Auger, Louis-Pierre;Vinette, Billy;Potvin, Laury;Nelson-Drolet, Sandrine and Thomas, Alik

**Publication Date:** 2026

**Journal:** Australian Occupational Therapy Journal

**Abstract:** Introduction: While sexuality is gaining recognition as a relevant domain of occupational therapy practice, the scope of empirical research involving occupational therapy practitioners or students in relation to sexuality remains unclear. This study aimed to map the extent and focus of this research.; Methods: A scoping review was conducted using four databases: MEDLINE, Embase, CINAHL, and PsycINFO. The search strategy included keywords related to 'Occupational therapy' and 'Sexuality'. Two independent reviewers screened the references by title and abstract, and then by full text. The team conducted a bibliometric and collaborative inductive content analysis of included papers to categorise them by themes addressed. Consumer and community consultation. Consumer and community were not involved FINDINGS: Of the 4491 references screened, 136 studies were included. The papers addressed at least one of seven themes: (1) Influencing factors reported by occupational therapy practitioners and students regarding sexuality (41.9%); (2) Assessment or intervention implemented by occupational therapists to address sexuality (27.2%); (3) Educating occupational therapy practitioners and students regarding sexuality (13.2%); (4) Development or validation of assessment tools regarding sexuality (7.4%); (5) The role of occupational therapists regarding sexuality (5.1%); and (6) Frameworks, models, practice guides or guidelines related to sexuality (4.4%). Several studies (41.9%) addressed more than one topic.; Conclusion: The occupational therapy literature on sexuality reveals a disproportionate emphasis on certain topics, while others remain underexplored. Most studies examined the challenges encountered by occupational therapy practitioners and students in incorporating sexuality into practice. Future studies should not only focus on developing and implementing evidence-based assessments and interventions but also on advancing theoretical understanding at the intersection of sexuality, occupation, and occupational therapy practice. (© 2026 The Author(s). Australian Occupational Therapy Journal published by John Wiley & Sons Australia, Ltd on behalf of Occupational Therapy Australia.)

### 3. Self-management support for people with non-specific low back pain: a qualitative survey among Italian physiotherapists

**Authors:** Cioeta, Matteo;Giannotta, Gabriele;Carbotti, Domenico;Cicinelli, Davide;Giovinazzi, Roberta;Dell'Anna, Alessandra;Germani, Andrea;Balestra, Francesco;Giovannico, Giuseppe;Mourad, Firas and Hutting, Nathan

**Publication Date:** 2026

**Journal:** Musculoskeletal Science & Practice

**Abstract:** Background: Non-specific low back pain (NSLBP) is the leading cause of global disability, and self-management is considered a key component of care. However, physiotherapists' approaches to supporting self-management can be improved.; Objective: To explore how Italian physiotherapists conceptualize and enact self-management support for non-specific low back pain, and to describe perceived barriers and enablers to its implementation in routine practice.; Methods: An online SurveyMonkey questionnaire was administered in February 2024 to assess Italian physiotherapists' knowledge and experience with self-management strategies for NSLBP. The survey consisted of 15 open-ended questions adapted from a Dutch study. Responses were analysed using inductive thematic analysis.; Results: Thirty physiotherapists (21 female, mean age 30.4 ± 8.7 years) participated. Four themes emerged: (1) Therapeutic interaction style: active, passive, or multimodal?; (2) The patient as the main actor; (3) Self-management as more than a single tool; and (4) The physiotherapist's role in the self-management journey. Most participants viewed self-management support as essential and commonly used education as their primary strategy, while recognising its limitations. Although a variety of treatment approaches was reported, many remained grounded in biomechanical reasoning. A majority expressed the need for further knowledge and skills to better support self-management.; Conclusion: Most participants recognised the importance of self-management in treating NSLBP but did not fully align with its core principles. Although they emphasised patient-focused, person-centred care, it remains unclear whether these principles are truly applied. Over half indicated a need for additional skills, consistent with broader challenges physiotherapists face in integrating self-management strategies. (Copyright © 2025 The Authors. Published by Elsevier Ltd.. All rights reserved.)

#### 4. How Robust is the Evidence for Prehabilitation in Cancer Surgery?: A Systematic Review and Fragility Index Analysis

**Authors:** Cook, Sarah;Liu, Xiaoqiu;Hancock, Mark;Solomon, Michael;Koh, Cherry;Kim, Bora;Karunaratne, Sascha;Alexander, Kate and Steffens, Daniel

**Publication Date:** 2026

**Journal:** Annals of Surgical Oncology

**Abstract:** Background: The number of randomized controlled trials (RCTs) exploring the effectiveness of prehabilitation on improving postoperative outcomes for cancer surgery is increasing. Fragility index (FI) and reverse fragility index (RFI) represent the minimum number of participants whose status needs to change from an "event" to a "non-event," thereby the results change from statistically significant to nonsignificant (or vice versa for RFI). Fragility quotient (FQ) allows for the FI or RFI to be standardized to the sample size of the study. This review aims to examine the robustness of prehabilitation RCTs by assessing their FI, RFI, and FQ.; Materials and Methods: The Allied and Complementary Medicine Database (AMED), Cumulative Index of Nursing and Allied Health Literature (CINAHL), Cochrane Central Register of Controlled Trials (CENTRAL), Embase, Medline, and PsycINFO were searched from inception to December 2023. Eligible articles included RCTs, with parallel arm design, evaluating the effectiveness of prehabilitation intervention on the reduction of postoperative complications in selected major oncologic surgeries. FI and RFI were determined using the R fragility package.; Results: After screening 2486 publications, 76 RCTs met inclusion criteria. Most of the included RCTs explored the effectiveness of nutritional prehabilitation (N = 38; 50%). A total of 544 postoperative complication outcomes were reported across all 76 studies, with 25 (4.6%) demonstrating a significant effect and 519 (95.4%) demonstrating a nonsignificant effect of prehabilitation. Overall, the median FI and RFI were 1 (range 1-14) and 4 (range 1-13), respectively.; Conclusions: The current evidence on the effectiveness of prehabilitation for major cancer surgeries is fragile. Changing outcomes for four participants in most studies was sufficient to make a nonsignificant finding significant. (© 2025. The Author(s).)

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#### 5. Physiotherapist factors associated with the intention to deliver psychologically informed physiotherapy in persistent low back pain: An online cross-sectional vignette study

**Authors:** Earl, Claire;Bean, Debbie J. and Lewis, Gwyn N.

**Publication Date:** 2026

**Journal:** Musculoskeletal Science & Practice

**Abstract:** Background: Prior qualitative research has revealed several barriers to physiotherapists delivering psychologically informed physiotherapy (PIP). It is not known which factors are most relevant to PIP delivery.; Objectives: To determine the proportion of physiotherapists in Aotearoa/New Zealand who intend to deliver PIP to persons with non-specific low back pain (LBP), and to determine factors associated with the intention to deliver

PIP.; Design: This study used a cross-sectional online vignette case survey design.; Setting: Aotearoa/New Zealand registered physiotherapists who regularly treat LBP were invited to participate.; Methods: Participants (n = 224) outlined their intended assessment and treatment plan for two vignettes with persistent LBP. They then completed the Knowledge and Attitudes of Pain Questionnaire (KNAP), components of the Determinants of Implementation Behaviour Questionnaire (DIBQ) and demographic questions. The proportion of physiotherapists intending to deliver PIP was determined by scoring participants' vignette plans as psychologically informed or non-psychologically informed. Binary regression was used to determine which questionnaire and demographic variables were associated with the intention to deliver PIP.; Results: One third of participants intended to deliver PIP in the management of LBP. Binary regression analysis showed that pain knowledge and attitudes were consistently associated with the intention to deliver PIP across vignettes (OR = 1.05, 95 % CI = 1.01-1.08; p = .015) (OR = 1.05, 95 % CI = 1.02-1.09, p = .005). Beliefs about the consequences of PIP was associated with the intention to deliver PIP in one vignette (OR = 2.15, 95 % CI = 1.12-4.11, p = .021); Conclusion: Findings suggest that physiotherapists' knowledge and attitudes towards pain and their belief that PIP is effective are associated with PIP delivery. Improving pain knowledge and beliefs around PIP may improve the quality of LBP management. (Copyright © 2025 The Authors. Published by Elsevier Ltd.. All rights reserved.)

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## **6. Avoiding Missed Minutes: Improving Therapy Participation in Brain Injury Rehabilitation, A Quality Improvement Initiative**

**Authors:** Ferber, Ally T.;Zhou, Yi;Petrosyan, Hayk and Harris, Kristen A.

**Publication Date:** 2026

**Journal:** American Journal of Physical Medicine & Rehabilitation

**Abstract:** Abstract: Patient participation in therapy sessions during inpatient rehabilitation is essential to maximize recovery. While specific reasons for missed therapies have not been studied in the brain injury population, individuals with brain injuries are often medically complex, which may impact participation. This quality improvement study aimed to deepen the understanding of reasons for missed therapy and design an intervention to improve therapy participation in an inpatient brain injury rehabilitation unit. Over two consecutive years, data on missed therapies were collected in a rehabilitation unit. Preintervention analysis established three categories of missed therapy, including medical complications (67.4%), routine medical testing (20.9%), and nursing care (11.6%). Therapy was commonly missed on Mondays (21%) and often missed for the entire day (35%). An intervention was designed and implemented to improve communication of weekend medical events, aimed at reducing missed therapies on Mondays. After implementation, there was a statistically significant decrease in missed or rescheduled therapies on Mondays ( P = 0.017) and in the number of "all-day" missed sessions ( P = 0.018). This quality improvement study provides valuable data on trends in missed therapy sessions for individuals with brain injury during inpatient rehabilitation, as well as a successful intervention. (Copyright © 2025 Wolters Kluwer Health, Inc. All rights reserved.)

## 7. Actual Roles of Occupational Therapists in Palliative and Hospice Care: A Scoping Review

**Authors:** Güney Yılmaz, Güleser;Yücel, Hülya and Gintiliene, Milda

**Publication Date:** 2026

**Journal:** The American Journal of Hospice & Palliative Care

**Abstract:** BackgroundThis study reviewed the role of occupational therapist's in palliative and hospice care over the past 20 years.MethodsA scoping review following Arksey and O'Malley's five stages was undertaken using PubMed, OTseeker, Scopus, Elsevier, Cochrane Library-Medline, CINAHL, PsychInfo, Web of Science and Google Scholar.ResultsA total of 41 articles were reviewed. The most publications occurred in 2010, 2011, 2015, and 2023. The majority of the studies (48.7%) were of qualitative design. Various roles of occupational therapists have been defined in palliative care: discovering occupational meaning in the last periods of life and supporting occupational participation, management of persistent physical and psychological symptoms, especially pain and fatigue, improving or supporting the quality of life for individuals under palliative care, supporting mental well-being, supporting social participation, use of adaptive technologies, providing individuals with confidence and comfort. Occupational therapists also have various duties in maintaining palliative-hospice care at home include evaluating the individual at home and supporting home care and rehabilitation after discharge. Interventions for caregivers or supporting caregivers who have lost their roles, occupations or jobs in the care process are also among the roles of occupational therapists.ConclusionOccupational therapy within the context of palliative care aims to assist individuals in attaining their highest level of independence in important occupations. Occupational therapists play a crucial role in coordinating and facilitating safe transitions from the hospital to home, aiming to improve the overall quality of life and reduce hospital stays.

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## 8. Key factors in shared decision making between people with osteoarthritis and physiotherapists: A narrative study using storytelling

**Authors:** Jager, J.;Rosbergen, I.;van der Sluis, G.;van Meeteren, N. L. U. and Siemonsma, P. C.

**Publication Date:** 2026

**Journal:** Patient Education and Counseling

**Abstract:** Objectives: To improve the quality of shared decision-making (SDM), this study examined factors perceived by people with osteoarthritis (PwOA) and physiotherapists to influence shared decision making (SDM), and how these perceptions align with a widely used SDM model.; Methods: Using a qualitative storytelling approach, we collected narratives from 10 PwOA and 7 physiotherapists in the Netherlands. Participants shared personal narratives of lived experiences ("stories") related to SDM in physiotherapy practice, resulting in 144 unique stories, of which 118 were related to decision-making and included for further analysis. These stories were analyzed through a seven-phase thematic analysis by a multidisciplinary research team (n = 12). Themes were plotted onto the SDM model of Moore and Kaplan.; Results:

Analysis revealed six main themes: Decision-making as a reciprocal process (four aspects, 51 stories); Influence of patient expectations on decisions (four aspects, 48 stories); Communication and information provision (two aspects, 39 stories); Patients' voice and identity (three aspects, 33 stories); Relationship between patient and healthcare provider (two aspects, 26 stories); External factors influencing decisions (two aspects, 23 stories). Twelve aspects were shared by both PwOA and physiotherapists, one was exclusive to PwOA, and four were unique to physiotherapists. All aspects fit within Moore and Kaplan's SDM model; 12 aligned with specific stages, while five spanned multiple stages.; Conclusions: The study unravels the complex nature of SDM in physiotherapy. Storytelling revealed that factors like (power) dynamics as well as the physical environment seem to influence decision-making. Explicitly addressing these dynamics might provide opportunities for strengthening theoretical SDM models, clinical training, and SDM in real-world practice.; Practice Implications: Greater attention to relational dynamics, patient expectations, and context have the potential to enhance the quality of SDM between PwOA and physiotherapists. (Copyright © 2025 The Authors. Published by Elsevier B.V. All rights reserved.)

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## 9. Muscle oxygenation regulation in physical therapy and rehabilitation

**Authors:** Jan, Yih-Kuen and Cheung, W. C.

**Publication Date:** 2026

**Journal:** Medical Gas Research

**Abstract:** Skeletal muscle oxygenation reflects the balance between oxygen delivery from the microcirculation and oxygen consumption of the muscle cells. Oxygenation in the muscle tissue is an essential factor in muscle contractions for performing activities of daily living and exercise as well as muscle tissue viability. It is until the development of near-infrared spectroscopy for providing a noninvasive, continuous monitoring of muscle oxygenation. The principle of near-infrared spectroscopy is to use light property to assess oxygenation based on the appearance of oxygenated blood in red and deoxygenated blood in darker red to black. To date, there is no comprehensive review focusing on muscle oxygenation regulation and its applications in physical therapy and rehabilitation. The objectives of this comprehensive review are to: 1) highlight the recent technical advances in near-infrared spectroscopy technology for rehabilitation researchers, 2) present the advances in pathophysiological research in muscle oxygenation, and 3) evaluate findings and evidence of recent physical therapy and rehabilitation studies on improving muscle oxygenation. The review also evaluates findings and evidence of aerobic exercise, resistance exercise, contrast bath therapy, wound healing, cupping therapy, stretching, and electrical stimulation on muscle oxygen in healthy adults and patients with cardiovascular diseases. The use of near-infrared spectroscopy allows the assessment of muscle oxidative metabolism for personalized rehabilitation and exercise training. (Copyright © 2025 Medical Gas Research.)

## 10. Acceptance and commitment therapy in rehabilitation for chronic pain and fatigue: a qualitative interview study with patients

**Authors:** Johansen, May-Lill;Eriksen, Thor Eirik and Solhaug, Ida Therese

**Publication Date:** 2026

**Journal:** Scandinavian Journal of Primary Health Care

**Abstract:** Purpose: To shed a nuanced light on the experiences of taking part in a rehabilitation programme using acceptance and commitment therapy (ACT) for people living with persistent pain and fatigue.; Materials and Methods: The ACT intervention, designed by the Pain Clinic of a University Hospital, consisted of six four-hour sessions, each for four groups of 6-8 participants, given over the course of four months. An interdisciplinary research team thematically analysed 13 post-programme individual interviews with people aged 21 to 54 with different symptoms and diagnoses using systematic text condensation.; Results: Participants reported that while illness had led to feelings of loneliness, loss and failure, participating in a safe and supportive group setting led to a nurturing sense of shared community, understanding and learning. Increased self-awareness, self-acceptance and self-compassion were valued outcomes of the programme. Most felt that they had acquired new tools, such as exercises, practices and altered ways of thinking. A few participants were uncomfortable with the sharing practices and felt that the programme brought few benefits for them.; Conclusions: The study indicates the value of a sense of community and experiencing illness as a shared human condition. Learning to see oneself as worthy of self-compassion, suggested in the literature as key to pain rehabilitation, was connected to group validation and ACT-specific sessions. Information, exercises and sharing practices could have been even better targeted and tailored to individual participants.

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## 11. Fatigue-Inducing Protocols in Parkinson's Disease: Implications for Gait Assessment and Rehabilitation: A Systematic Review

**Authors:** Majlesi, Mahdi;Azadian, Elaheh;Farahpour, Nader;Bakhtiarian, Rezvan;Nobari, Hadi and Alves da Costa, Cristine

**Publication Date:** 2026

**Journal:** Parkinson's Disease

**Abstract:** Background: Fatigue is a common and disabling nonmotor symptom of Parkinson's disease (PD), which significantly impacts gait and overall mobility. In spite of its clinical significance, the biomechanical consequences of different fatigue induction protocols on gait performance in PD are not yet well understood. Objective: To systematically review fatigue induction protocols in gait studies of individuals with PD and to examine how different types of fatigue (local, general, and cognitive) and assessment methods influence gait outcomes. Methods: In accordance with PRISMA guidelines registered under PROSPERO (CRD420251038246), five databases were systematically searched from January 2004 to March 2025. Seven studies met the inclusion criteria and were reviewed and analyzed through

descriptive synthesis. Results: Repeated sit-to-stand tasks were the most effective in inducing lower-limb fatigue and produced consistent changes in gait, including reduced stride length, slower speed, and impaired turning. General aerobic or functional tasks had inconsistent effects, and no study directly tested cognitive fatigue on gait. Fatigue assessment methods varied widely, including force decline, perceived exertion, and fatigue scales. Gait outcome measures were also heterogeneous, limiting comparability. Conclusion: Targeted lower-limb fatigue protocols are effective in revealing gait impairments in PD. There is a clear need for standardized fatigue induction procedures and gait evaluation methods to improve consistency and comparability across research. Clinically, assessing gait under fatigue conditions may uncover subtle mobility impairments and inform more personalized rehabilitation strategies.

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## **12. Canadian Stroke Best Practice Recommendations Rehabilitation, Recovery, and Community Participation Following Stroke, Part Two: Delivery of Stroke Rehabilitation to Optimize Functional Recovery, 7th Edition Update 2025**

**Authors:** Salbach, Nancy M.;Yao, Jennifer K.;Lindsay, M. P.;Nelson, Michelle L. A.;Shi, Jing;O'Connell, Colleen;Barclay, Ruth;Bastasi, Diana;Boulos, Mark I.;Boyce, Joy;Claveau, Geneviève;Flowers, Heather L.;Foley, Norine;Gopaul, Urvashy;Kim, Esther S.;Lo, Alto;McDonald, Alison M.;McIntyre, Amanda;O'Connor, Colleen;Patterson, Kara K., et al

**Publication Date:** 2026

**Journal:** American Journal of Physical Medicine & Rehabilitation

**Abstract:** Abstract: The Canadian Stroke Best Practice Recommendations 7 th edition update of the Rehabilitation, Recovery and Community Participation module is presented in three parts. This publication, Part Two of the series, reflects the growing and changing body of research evidence available to guide direct stroke rehabilitation therapies, screening, assessment, interventions, and strategies. Topics in this module include rehabilitation of upper and lower extremity, aerobic function, balance, mobility, activities of daily living, spasticity, fall risk, communication, dysphagia, nutrition, central pain, visual and visual-perceptual issues, and bladder and bowel function. This module provides guidance in the delivery of coordinated and seamless systems of care that support timely access to rehabilitation therapies, building on progress achieved during initial recovery, enabling people to achieve as much independence as possible and successfully resume social roles and leisure activities. Successful recovery, transitions and community participation require integrated and coordinated people-centered efforts by all members of care teams involved, and the broader community. These recommendations were developed with active involvement of people with lived experience of stroke throughout the care continuum. Evidence for effective rehabilitation therapies and support for individuals with stroke and their families continues to emerge and gaps in knowledge should drive future research. (Copyright © Heart and Stroke Foundation of Canada, 2025.)

### 13. Impact of Rehabilitation on Readmission Rates in Older Patients with COPD with Disability After Hospital Discharge

**Authors:** Shirakawa, Chigusa;Shiroshita, Akihiro;Miyakoshi, Chisato;Uda, Kazuaki;Nagata, Kazuma;Tachikawa, Ryo;Tomii, Keisuke and Kataoka, Yuki

**Publication Date:** 2026

**Journal:** COPD

**Abstract:** This study aimed to evaluate the impact of rehabilitation on readmission rates among older patients requiring nursing care following with COPD following hospitalization for lower respiratory tract infection, focusing on whether initiating rehabilitation within two months post-discharge reduces readmissions. We conducted a retrospective observational study using insurance claim data in Kobe City, Japan, with a population of approximately 1.5 million. We included Patients with COPD aged 65 or older with certified care-need levels under Long-term Care Insurance system in Japan, hospitalized for lower respiratory tract infections and survived alive. Patients were classified based on their functional capacity in Activities of Daily Living (ADL). We used the extended Cox model to consider rehabilitation as time-varying exposure and assess the hazard ratios for readmission, adjusting for ADL. The ADL level was adjusted as a confounder. The survival probabilities were estimated among patients who experienced rehabilitation within two months and those who did not experience rehabilitation. Among 745 patients, 479 received rehabilitation within two months post-discharge, 105 received it later, and 161 did not receive rehabilitation. Participation in rehabilitation was associated with an increased hazard ratio for readmission (HR: 1.63, 95% CI: 1.19, 2.24), compared to those without it. The estimated survival curve of patients receiving rehabilitation within two months overlapped with that of those who did not receive rehabilitation. Rehabilitation following exacerbation in older patients with COPD who have disability may increase the risk of readmission after discharge. Healthcare providers should consider that patients with COPD with severe disability and complex needs may require staged, individualized rehabilitation.

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### 14. "A new tool for my toolbox": physiotherapists' perceptions on therapeutic virtual reality for chronic low back pain - a qualitative descriptive study

**Authors:** Slatman, Syl;Ostelo, Raymond;Goor, Harry van;Satink, Ton;Staal, J. B. and Knoop, Jesper

**Publication Date:** 2026

**Journal:** Musculoskeletal Science & Practice

**Abstract:** Objective: Therapeutic virtual reality (VR) is an emerging intervention in physiotherapy for patients with chronic low back pain (CLBP). However, broad adoption of VR by physiotherapists (PTs) is slow. This is possibly due to PT's negative perceptions on and attitudes towards the added value of VR in physiotherapy for patients with CLBP. The aim of this study was to explore these perceptions and attitudes.; Methods: We performed a qualitative descriptive study using semi-structured interviews. The study sample included

eleven primary care PTs with a median age of 35 years (range: 28-58). Participating PTs had at least one year of experience using VR for the treatment of patients with CLBP, after which they continued using VR or stopped using it. The interviews were transcribed verbatim and inductively analyzed using reflexive thematic analysis.; Results: Analysis of the interviews identified four overarching themes: (i) therapeutic VR is perceived as non-threatening to the PT's role; (ii) VR has distinctive qualities that complement the PT's toolbox; (iii) contrasting attitudes towards the added value of therapeutic VR for CLBP; and (iv) PTs need specific skills, positive attitudes and knowledge to administer therapeutic VR.; Conclusion: The study results showed that VR was perceived as a valuable and non-threatening innovation for physiotherapy in patients with CLBP, that fits the hands-off and coaching role of PTs. Therapeutic VR seems promising in physiotherapy for patients with CLBP, but further adoption depends on breaking practical and systemic barriers. Also, more education is needed to train PTs to effectively administer VR. (Copyright © 2025 The Authors. Published by Elsevier Ltd.. All rights reserved.)

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## **15. Comparative effectiveness of rehabilitation therapies for diastasis recti abdominis: A systematic review and Bayesian network meta-analysis**

**Authors:** Zhu, Jiahui;Dong, BaoJin and Liu, Shuang

**Publication Date:** 2026

**Journal:** International Journal of Gynaecology and Obstetrics: The Official Organ of the International Federation of Gynaecology and Obstetrics

**Abstract:** Background: There are currently many rehabilitation therapies for diastasis recti abdominis (DRA) and no unified treatment recommendations in clinical practice.; Objective: A network meta-analysis (NMA) was conducted to explore which rehabilitation therapy has the best treatment effect.; Methods: PubMed, WOS, EMBASE, and Cochrane Library were searched separately, involving relevant randomized controlled trials published from database establishment to April 24, 2024. This NMA compared 11 rehabilitation therapies, including Pilates, suspension training, electro-acupuncture, core stability exercises, abdominal supports, abdominal and pelvic floor muscle exercise, isometric-isotonic exercises, and neuromuscular electrical stimulation. Following the predefined inclusion and exclusion criteria, literature screening and data extraction were performed. Quality assessment was conducted using Risk of Bias 2 (RoB 2), and data analysis was performed using R (V4.4.1) and STATA (v16) software.; Results: A total of 17 articles involving 783 patients were included. The probability rankings for each outcome measure were calculated using the Surface Under the Cumulative Ranking Curve (SUCRA). A higher SUCRA value indicates better overall performance across all studies and a greater likelihood of the treatment being the optimal therapeutic option. Measurement of the inter-rectus distance (IRD) above the umbilicus showed that the suspension training system (STS) had the most significant therapeutic effect (SUCRA = 84.7%), while measurement at umbilicus showed that Pilates had a significant therapeutic effect (SUCRA = 93.5%). Measurement below the umbilicus revealed that the abdominal support plus core stability exercise (ABD\_support\_cse) had a significant therapeutic effect (SUCRA = 82.9%). In terms of reducing the IRD below the umbilicus, ABD\_support\_cse was more effective than abdominal support (ABD\_support) (standard mean difference SMD]: 1.45; 95% credible intervals (95% CrI): 0.16, 2.74]). According to Cohen's guidelines for effect

size, the SMD can be used to measure the effect size between interventions or variables. An SMD of 1.45 implies that abdominal support plus core stability exercise (ABD\_support\_cse) has a more profound effect on the rehabilitation of patients with DRA, warranting further research and promotion.; Conclusion: Our findings have shown that STS, Pilates, and ABD\_support\_cse might have the best effect on reducing IRD above, at, and below the umbilicus, respectively. These methods potentially hold the most promise or are the optimal interventions for improving IRD above, at, and below the umbilicus. However, considering the limitations of the research, future research should employ standardized and objective measurement techniques, utilize blinded assessments, incorporate longer follow-up periods, design standardized intervention protocols, and include diverse populations. Further analysis and exploration based on high-quality evidence are warranted to refine the understanding and exploration of this area. (© 2025 International Federation of Gynecology and Obstetrics.)

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## **16. The State of Musculoskeletal Health**

**Author:** Arthritis UK

**Publication Date:** 2025

The State of Musculoskeletal Health is a collection of the most up-to-date, UK-wide statistics on arthritis and other musculoskeletal (MSK) conditions. This includes how many people have these conditions, the number at risk of developing these conditions, the impact of these on a person, on the health system and society, and inequalities that can be found within all the topics above.

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## **17. Conservative Treatments of Carpal Tunnel Syndrome: A Systematic Review and Network Meta-analysis**

**Author:** Chen Y.

**Publication Date:** 2025

**Journal:** Archives of Physical Medicine and Rehabilitation

Check for full-text availability [To evaluate the efficacy of various conservative treatments for carpal tunnel syndrome (CTS), including manual therapy (MT), local steroid injections, platelet-rich plasma injections, extracorporeal shock wave therapy, low-level laser therapy, through a comprehensive network meta-analysis. 49 RCTs involving 11 conservative treatments and 3323 participants were included. This study shows that MT and dextrose 5% in water injections are the most effective conservative treatments for CTS.

## 18. Prehabilitation and rehabilitation guidelines for allied healthcare professionals working in head and neck cancer: a narrative review

**Author:** Baker K et al.

**Publication Date:** 2025

**Journal:** Disability and rehabilitation

**Abstract: Purpose:** The aim of this review is to give an overview of prehabilitation and rehabilitation guidelines for allied healthcare professionals (AHPs) working in head and neck cancer (HNC).

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## 19. Feasibility of Designing, Manufacturing and Delivering 3D Printed Ankle-Foot Orthoses: An Updated Systematic Review

**Author:** Wang JZ.

**Publication Date:** 2025

**Journal:** Journal of Foot and Ankle Research

Check for full-text availability [The use of additive manufacturing in AFO fabrication has rapidly increased in the past few years. The novel designed 3D printed AFOs might have potential benefits over traditional designs in terms of biomechanical outcomes. 3D printed AFOs have been further proven to be comparable to traditional ones. Further research is encouraged with more specific condition characteristics such as cerebral palsy within a specific GMFCS level, longitudinal trials and testing in a home or natural environment.]

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## 20. Restrictive equipment for children and young people

**Author:** Royal College of Occupational Therapists (RCOT)

**Publication Date:** 2025

Written by occupational therapists for occupational therapists, this guidance brings together legal duties, ethical considerations and evidence-based practice into one clear, accessible framework.

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## 21. Cities aren't built for older people

**Author:** The Conversation

**Publication Date:** 2025

Our study shows many can't walk fast enough to beat a pedestrian crossing.

## 22. Life after stroke: the hidden struggle for recovery

**Author:** The Conversation

**Publication Date:** 2025

Six months after a stroke, 64% of survivors still have problems carrying out usual activities, 47% report anxiety or depression and 62% struggle with mobility. This has been documented repeatedly in national datasets. The UK's Sentinel Stroke National Audit Programme found only 35.1% of eligible survivors received a six-month followup. Improving access to therapy, psychological care, vocational support and community services is central to giving stroke survivors the chance to rebuild.

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## 23. Occupational therapists' role in sleep management in palliative care: A crosssectional survey

**Author:** Madeleine Webster, Linda Barclay , Dhvani Parikh, Aislinn Lalor

**Publication Date:** 2025

**Journal:** British Journal of Occupational Therapy

Sleep is fundamental to an individual's health, well-being and quality of life. Poor sleep and sleep disturbances are common for individuals receiving palliative care. Occupational therapists play a crucial role by effectively addressing sleep in this context.

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