FROM THE EDITOR

Most of us are commonly challenged by the low back pain patient who can all too quickly become the chronic low back pain patient. This issue of JBMR focuses on the prevention of chronic pain and the restoration of function for this large group of musculoskeletal patients.

Ernie Johnson, MD opens this special issue by reminding us of the conservative role of physiatry, especially when rendering second opinions. Richard Deyo, MD next provides a very practical, and well-researched manuscript outlining how a primary care physician can hold costs down and still provide quality care for low back patients. This is a controversial article and many of you will probably strongly agree or disagree with his position. As always, we welcome opposing opinions.

Our next few manuscripts relate to the rehabilitation of low back patients. Paul Biewen, MD bases his article on the overload principle and the principle of progressive resistance exercise as applied to rehabilitation and successful return to work. Functional rehabilitation is well defined by Ira Fiebert, PT in his introductory article emphasizing the five steps of rehab and the patient as an active participant. Kirby Halvorson, PT and Glen Halvorson, MD further describe the lumbar rehabilitation programs used in their clinical practice.

We believe you will find this information helpful for clinicians at varying levels of expertise.

Karen Trinkle, RN et al., share their years of experience with case management in an article describing the players in the world of rehabilitation of the injured worker. This article is further enhanced by Mary Carruth, PT in her commentary which clarifies the latest terminology in functional evaluations. She also provides guidelines for selecting clinicians/companies to better assess and treat the injured worker.

Steve Gudas, PT and Karen Blunk, MD provide a very useful and insightful article on the management of cancer pain and rehabilitation of the patient with cancer induced neurological pain syndromes. This is a bonus article for this issue which we felt the readers would find useful.

Ira Fiebert, PT et al., conclude this issue with a description of their recent research on thoracic flexion which has application to the assessment and treatment of cervical dysfunction.

We believe we have developed an interesting issue and hope it will be applicable to your rehabilitation efforts.

Please send us your comments and suggestions.

Karen S. Rucker, MD