For this edition we have reviews of two books relating to cognitive-behavioural management. I would like to thank the reviewers for their time and effort in reviewing these books. All ISCP members are offered a further 15% discount on the listed price of Elsevier books (including both these books) if they purchase them via the members section of the ISCP website. Finally, if any members are aware of new books which they would like to have reviewed, please let me know.


Reviewer: Karen McCreesh, MScSP, MSc (Man Ther), Lecturer, Physiotherapy Department, University of Limerick.

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This text is a core resource for physiotherapists dealing with patients who are experiencing pain, and in particular for those working in any form of pain management setting. The main difference from the first edition is that this book aims to present how pain management principles, viewed from a cognitive-behaviourally based perspective, might be applied to present how pain management principles, viewed from a biopsychosocial perspective, might be applied in a variety of settings, as opposed to just tertiary pain management programmes. The book is divided into six sections: Models and mechanisms, Assessment, Psychosocial interventions, Tertiary pain management programmes, Occupational perspectives, and a concluding section.

The early sections present a detailed, but very accessible, review of the historical and theoretical aspects of pain, with descriptions of most of the important models and how they interrelate. A similar, straightforward approach has been taken to the chapter on psychological perspectives, which would be easily understood without extensive knowledge of psychology. The authors would be well known for their work on assessment of psychological risk factors, and the assessment section clearly outlines how the ‘Flag’ concept should be used to identify factors that might influence choice of treatment approach.

The detailed discussion of the occupational perspective is particularly noteworthy, with the importance of return to work perhaps being underestimated by some pain clinicians. The practical ‘how to’ approach of sections on for example goal-setting and therapeutic groups, including case study examples, will be welcomed by clinicians using this book to help them plan and deliver treatment using this approach.

The book is well organised and structured and has a user-friendly lay-out. I would recommend it as a reference text for all outpatient physiotherapy and occupational health departments, and to students on both undergraduate and postgraduate physiotherapy programmes.


Reviewer: Katie Robinson, MSc (Disability Management), Lecturer, Occupational Therapy Department, University of Limerick. katie.robinson@ul.ie

This edited text is the first on cognitive behavioural interventions written specifically for occupational therapists and physiotherapists. The chapter contributors are primarily occupational therapists and physiotherapists and the text is aimed at students and therapists. The text is presented in two parts; theoretical context and practice application. A foreword is presented by Professor Paul Salkovskis who discusses the problem of translating knowledge from research to healthcare practice. Indisputable high level evidence is available to support the use of cognitive behavioural interventions for a wide range of conditions. However, the evidence to support cognitive behavioural interventions has been slow to translate to the practice of occupational therapists and physiotherapists. This book seeks to address this issue through presenting both theoretical and practice based information to aid therapists in integrating cognitive behavioural interventions into practice.

The first three chapters together provide a comprehensive overview of the history of cognitive behavioural therapy (CBT), the central tenets of this approach and the theoretical underpinnings of CBT. The first chapter presents the main characteristics of CBT alongside an overview of the empirical evidence to support CBT. Chapter two illustrates how CBT can theoretically guide the practice of occupational therapists and physiotherapists in conjunction with current models of practice such as the biopsychosocial model. The resonance between a biopsychosocial approach and the use of cognitive behavioural interventions is very usefully illustrated through a case study. Chapter three considers the neurobiology of two conditions; anxiety and depression, to illuminate the links between thinking, emotion, behaviour and physiology. Thus chapter three explains the biomedical links between cognitions and behaviour.

The second part of the book; chapters four to ten, considers a range of conditions and presents practical advice on how to use cognitive behavioural interventions when working in these clinical areas. Chapter four presents the strong evidence to support CBT for depression; an extensive case study is presented to demonstrate how effectively CBT can enhance the role of a therapist in treating depression. This case study presents extracts of dialogue between the client and therapist which illustrates many core characteristics of CBT such as the process of challenging distorted thinking patterns. Chapters five and six present the use of CBT for anxiety and enduring mental illness. Chapter seven presents a case study to illustrate the application of change theory, CBT and exercise to the treatment of alcoholism. Although overall the chapter author (Marie Donaghy) surmises that the evidence for exercise improving abstinence levels or controlled drinking levels is at
this time equivocal, exercise can be used alongside other interventions such as relaxation training, or as an alternative approach for stress management. Chapters eight and nine consider the use of CBT for chronic pain and fibromyalgia. The authors describe the widely accepted biopsychosocial understanding of chronic pain and demonstrate the centrality of thoughts and feelings to the chronic pain experience. The use of CBT interventions to address kinesiophobia are presented alongside the use of educative techniques, pacing and goal setting. An overview of multidisciplinary pain management programmes with a cognitive behavioural focus is presented and a case study illuminates the process of cognitive and behavioural interventions with a client with chronic pain. The case study describes the process of addressing faulty beliefs and negative thinking alongside avoidant behaviours through cognitive behavioural interventions. In chapter nine an extensive case study of a client with fibromyalgia details the assessment process, the use of motivational interviewing techniques, the goal setting process and presents an intervention plan. The final chapter considers chronic fatigue syndrome (CFS) and presents the high quality evidence to support CBT for improving the physical functioning of people with CFS. Once again excellent use of a case study is made here to illustrate the process of cognitive and behavioural change by physiotherapists.

This book is ideal for student and practicing occupational therapists and physiotherapists as it provides a very comprehensive introduction to cognitive behavioural therapy theoretically. For students the clinical chapters introduce both the clinical condition and illustrate the therapy process. Practitioners will appreciate the use of case studies in the clinical chapters as they demonstrate how cognitive behavioural interventions can be integrated into physiotherapy and occupational therapy practice. Therapists who have completed further training in CBT beyond undergraduate education may find the book is limited in further developing their expertise. This text does not discuss fully the challenges for the discipline of physiotherapy of integrating primarily psychological interventions into practice. Overall this is a well written, accessible introduction to the use of cognitive behavioural interventions within occupational therapy and physiotherapy.