

Editorial

Welcome to issue 8(3). To start, three articles of this issue are focused on neonatal brachial plexus palsy with others to follow.

The first, by Menno van der Holst et al., is titled *Evaluation of shoulder function after secondary surgery in children with Neonatal Brachial Plexus Palsy (NBPP)*. They evaluated ten children and found that internal contracture release and muscle tendon transfer (ICL+MTT) led to improvement of ROM, strength, arm function, quality of life and high parental satisfaction in their study patients, and is therefore a good intervention to consider in children with NBPP with limited shoulder function.

The question regarding the van der Holst study is which measures are used to determine their conclusions? Are they accepted, who made that determination, are there international variations? Sarac et al. in the second article discuss these in *Outcome measures used in clinical studies on neonatal brachial plexus palsy: a systematic literature review using the International Classification of Functioning, Disability and Health*, providing a framework for the wide variations that exist in evaluating NBPP. They identified 59 different outcome measures among 217 studies of NBPP with the 5 most frequently used outcome measures including: 1) range of motion of the shoulder, 2) range of motion of the elbow, 3) the Mallet scale, 4) Magnetic Resonance Imaging, and 5) the Medical Research Council motor grading scale. Standardization of outcome scales and use is an area that both the pediatric and adult rehabilitation field can improve upon.

In the same realm, the third article addresses translating and validating one of these scales. In *Translation and adaptation of the Pediatric Outcome Data Collecting Instrument (PODCI) into the Dutch language and preliminary validation in children with Neonatal Brachial Plexus Palsy*, Menno van der Holst et al. translate and cross-culturally adapt the Pediatric Outcome Data Collecting Instrument (PODCI) into the Dutch language and evaluate its measurement properties among children (age 3-10) with Neonatal Brachial Plexus Palsy (NBPP). To date the PODCI has only

been translated into Hebrew, Spanish, Korean, and Brazilian with only two of these validated. The authors are applauded for their efforts as future efforts for translation and validation of many measurement instruments and scales will be required as we attempt to standardize treatments and protocols. On a broader scale, these efforts are also required within countries, continents and cultures to enable the use of them among all populations.

Olubukola A. Olaleye et al., in the *Perceived quality of physiotherapy services among informal caregivers of children with cerebral palsy in Ibadan, Nigeria*, found that caregivers of children with CP perceived the quality of physiotherapy provided for their children as poor – recommending that strategies to improve care environment for children with CP and their informal caregivers should be implemented to engender satisfaction with care.

In *Parents' experiences of splinting programs for babies with congenital limb anomalies*, Durlacher et al. concluded that addressing parents' information, support, and individual needs are keys to promoting active parent participation in their child's splinting program, contributing to positive outcomes for their child. I would propose that this concept transcends all of pediatric rehabilitation care, and all of pediatric care. Educating, engaging, and informing the parents and or care givers is always required and a necessary and mandatory part of the care we provide.

In *Testing the Transition Preparation Training Program: Well-being of relationships outcomes*, Betz et al. concluded that relationship type and social support are important factors in overall satisfaction among adolescents with spina bifida. This is an important consideration, as treatment teams must also include the social impact of spina bifida and disease processes when developing treatment plans.

Everyday movement and use of the arms: Relationship in children with hemiparesis differs from adults by Sokal et al. studied 28 children and concluded that children with upper-extremity hemiparesis who met the study intake criteria amount of movement of the more-affected arm in daily life is not related to its amount

to use, suggesting that children differ from adults in this respect. Further research is required to determine the clinical relevance and appropriate rehabilitation approaches required.

We also have two case reports titled *Intradural spinal arteriovenous malformation in a 13-month-old female* and *Health benefits of seated speed, resistance, and power training for an individual with spastic quadriplegic cerebral palsy*.

Thank you for your continued interest in the *Journal of Pediatric Rehabilitation Medicine*.

Sincerely
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Editor-in-Chief