From the Editor

2023 challenges in rehabilitation

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Dear colleagues,

The editorial board of the *Journal of Back and Musculoskeletal Rehabilitation* (JBMR) wishes all of you a healthy and outstanding 2023!

In 2022, the world has faced many challenges on many societal domains. Health-wise, multiple challenges appeared. While some parts in the world are still struggling with COVID-19, others have completely reopened their society and try to live with the virus. In other parts, the aging paradox becomes pronounced and impacts how we can manage the quality of our health care systems. We get older, but need to care for the elderly with insufficient professional capacities which poses pressure on the current health care systems. We need better solutions, which are, amongst others, expected from the scientific community. JBMR endorses studies that examine new initiatives to sustain health in the future, for example on new technologies that help elderly remain active in their home and living environment, or studies on the effects of self-management programs to recover after musculoskeletal problems.

There is still a huge lack of objective and evidence-based methods to shorten the length of stay in hospitals after such interventions, or to gain insight in intensity, duration, frequency and type of exercise therapy after surgery. In the current issue of JBMR, I would like to highlight two interesting studies examining the effects of high-intensity rehabilitation after bilateral total knee arthroplasty [1]. Lee et al. concluded that high-intensity rehabilitation achieved better functional improvement and shorter length of stay in the hospital. The other

study by Hasebe et al. [2] investigated the effects of cross-training on motor function and length of stay in the hospital after total hip arthroplasty. Post-operative hip pain, strength and walking speed and stride length all improved more compared to the control group. In my opinion, the research community creates important evidence that early, high intensity exercises are crucial to improve function and decrease hospital length of stay, thereby contributing significantly to keep our health systems sustainable.

The **Editor's Choice**, which is granted to an impactful study in the field of musculoskeletal rehabilitation, is awarded to Arias-Álvarez and colleagues [3]. In this important randomized controlled trial, the authors compare C0-C1 mobilizations to a sham technique on function and pressure pain threshold in 28 patients with chronic neck pain. Especially the use of sham techniques are valuable to reduce biases related to patients expectations, but perhaps even more, to therapist expectation. While blinding therapists appears impossible, however, this may provide good evidence on the specific and direct effects of cervical mobilization.

Furthermore in this issue, we present studies on lumbar mobilization, reference values for lumbar multifidus muscle in children, as well as studies related to alternative treatments such as cupping therapy and acupressure therapy. While there is still much work to be done in validating such alternative treatments and working mechanisms are ambiguous, it is of utmost importance to study what is valuable and what is not.

On behalf of the editorial board, we wish you a great research year and all the best in fighting societal problems wherever in the world.

Remko Soer Editor-in-Chief

References

[1] Lee SY, et al. Functional outcomes and length of stay with early and high-intensity rehabilitation after simultaneous bilateral total knee arthroplasty. Journal of Back and Musculoskeletal Rehabilitation. 2023; 36(1): X.

- [2] Hasebe Y, et al. Effects of cross-training on motor function and length of stay after total hip arthroplasty: A randomized controlled trial. Journal of Back and Musculoskeletal Rehabilitation. 2023; 36(1): X.
- [3] Arias-Álvarez G, et al. Are there differences between a real C0-C1 mobilization and a sham technique in function and pressure pain threshold in patients with chronic neck pain and upper cervical restriction? A randomised controlled clinical trial. Journal of Back and Musculoskeletal Rehabilitation. 2023; 36(1): X.