

Introduction

We are pleased to present the first of two issues of *NeuroRehabilitation* focusing on chronic neuropathic pain. Subjects especially relevant to clinical practice are discussed by authors actively involved in chronic pain treatment. This first issue will introduce this under appreciated topic and set the stage for a follow-up issue that will more exclusively focus on conceptualizing, assessing and treating chronic neuropathic pain.

Within the current issue, Nicholson provides an overview of pain problems associated with disorders of the central nervous system, including traumatic brain injury, stroke, spinal cord injury, multiple sclerosis and other disorders. Pain, epidemiology, characteristics, and prognosis are reviewed for these and other disorders, including various pain presentations not traditionally associated with central causes. Areas requiring further study and understanding, including neurobiological mechanisms and behavioral vulnerability factors, are identified. Orza, Boswell, and Rosenberg review neuropathic pain mechanisms and provide an up-to-date review of pharmacologic management. A methodology for optimizing compliance and patient care is delineated. In a manuscript by Miller, neurosensitization syndrome is discussed as a general sensitization model for explaining traumatic disability syndromes and applied to chronic pain, depression and posttraumatic stress disorder. This biopsychosocial conceptualization offers

hope for improved understanding of pathological behavioral syndromes and increased treatment effectiveness based on integration of medical, behavioral and psychotherapeutic treatment strategies.

Other articles of more general interest are also included in this issue. León-Carrión and colleagues report on a new strategy for treatment of persistent memory deficits following traumatic brain injury. A combination of pharmacologic management as well as neuropsychological rehabilitation show promising findings in improving memory function. This study is exciting in its implications for a model of integrated disease state management for brain injury that is truly biopsychosocial, and hence, offers good fit with this special issue. Finally, Kreutzer and Kolakowsky-Hayner, in a follow-up manuscript, offer additional ideas for a framework to address psychological and rehabilitation needs of persons with neurological disabilities. Ideas include principles of practice to guide rehabilitation professionals in their delivery of services.

As always, we appreciate the contributions of talented professionals in the field. We are confident you will find the information contained in this and the upcoming issue both enlightening and practical.

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