

INTRODUCTION

Geriatric rehabilitation encompasses a splendid diversity of patient problems and complications. For this reason the geriatric rehabilitation professional is challenged to learn effectively and to incorporate information from their identified professional field as well as knowledge from that of their colleagues. This special state-of-the-art geriatric rehabilitation issue serves to broaden the perspective and knowledge base of all individuals on the geriatric rehabilitation team. This issue includes works on the three interrelated areas necessary for successful geriatric rehabilitation: patient treatment, interdisciplinary team functioning, and family involvement in post-acute rehabilitation.

Drs. Siegler, Whitney, and Tideiksaar demonstrate that stroke and fall rehabilitation mainly involves geriatric patients. They carefully review the causes of these problems and the comorbidities that must be recognized if successful rehabilitation is to be undertaken. They provide practical suggestions for treatment and analyze existing research. Their articles point the way to future research needs. Dr. Burlingame's article clearly articulates the special challenges involved with drug therapies during geriatric rehabilitation. He demonstrates in a clear way how medications dramatically affect the geriatric patient's physical

functioning—especially in physical and occupational therapies. Drs. Lovett and Rose provide insight into a lesser-known area of rehabilitation: work with the low-vision patient. They introduce the causes of low-vision, its effects on the older individual's physical functioning, and treatment options.

Two articles highlight the interdisciplinary team and the roles of specific professionals in geriatric rehabilitation. Dr. Abraham and his colleagues provide an extensive overview of the nurse's role in rehabilitation. A theoretical framework and practical suggestions are offered to improve dramatically the integration of nursing into the geriatric rehabilitation team. Dr. Bielaukas provides insight into the best uses of psychological and neuropsychological practice in geriatric rehabilitation.

Effective involvement of family caregivers is a necessary but often difficult part of geriatric rehabilitation. Therapists often do not comprehend the struggles of the caregiver. We conclude with Drs. Lichtenberg and Gibbons's article, which focuses on the older adult caregiver and reviews the stages of caregiving. Their case examples highlight how to improve treatment when involving the family.

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