



LETTER TO THE EDITOR **Reply to Wernig letter**

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We thank Professor Wernig for his interest in our editorial. We broadly agree with Professor Wernig's comments but would like to take this opportunity to clarify our position. We are not regretting the replacement of 'standard physical therapy' by locomotor programs for all patients. Nor are we disputing the importance of repetitious practice for the learning of motor skills, or the potential of locomotor training programs for patients with AIS C or AIS D lesions. We are only asking for more caution before advocating the locomotor training programs to people with AIS A and AIS B lesions, especially when rolled out in the place of conventional rehabilitation. We argue that the benefits of providing locomotor training programs to highly disabled patients

needs to be verified with high-quality randomized controlled trials. We also ask that consideration be given to the cost of these interventions. This includes the emotional and psychological cost of encouraging people with AIS A and AIS B lesions to believe that they will walk, and the cost associated with missed opportunities for engaging with family, friends and employment while spending many hours over many weeks or months training. The benefits need to justify the cost.

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