

## Editor's Page

### Spinal Cord Editor's Page July 2007



Dear *Spinal Cord* reader,

Locomotion is a predominant function in everyone's life. It permits us to move from one place to another, to grab and reposition things, to make objects and perform tasks. It also allows us to work, to enjoy ourselves and even to stay alive. It is the key to providing ourselves with drinks and food, fleeing from danger and protecting our own body and environment.

One of the predominant activities of a spinal unit is the planning and application of physical treatment to restore these functions to a maximal extent.

The rehabilitation team, from their knowledge of each patient's physical and psychological disability, will schedule a constructive program often guided by detailed outcome expectations.

Physiotherapy of the paralyzed parts of the body will aim to prevent and treat contractures and atrophy and treat spasticity and develop the best muscle function required for proper activities of daily living (ADL). From the early stages of physiotherapy, adaptation therapy of normal parts of the body aims to overdevelop non-paralyzed muscles, which are essential for a patient's upright position and readjustment of postural and vasomotor control. Exercises to restore independence have a self-explanatory purpose.

Sports have proven to be most essential in physical readjustment. Sports often help to restore strength, coordination and endurance. They have proved also to be a good way to restore activity of mind and self-confidence. For many spinal cord-injured patients, it has been a way back into the world around them.

Knowledge of muscle and somatic nerve physiology and pathophysiology – the integration of motor function in the spinal cord and higher central nervous system – is an important guide in physical rehabilitation for us.

In this issue of *Spinal Cord*, manuscripts on several aspects of locomotor function have been included.

I am happy that so many excellent studies are submitted to *Spinal Cord*. We try to keep the review process as short as possible, and the decision to take a manuscript into the review process or not is usually taken within days. Reviewers are invited and, if they accept, we request for the comments to be returned within 2 weeks. Extensions can be given if specifically requested. If you think you would qualify to be a reviewer for *Spinal Cord*, please contact me and I will be more than happy to take this into consideration.

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