

BOOK REVIEWS

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Title: Maitland's Peripheral Manipulation, ed 4

Authors: Hengeveld E, Banks K, eds.

Reviewer: Jeff Yaver, PT, PhD – Kaiser Permanente Medical Center, Manteca, CA

This is the fourth edition of the classic text. This edition contains numerous changes from previous editions. Besides including current, up-to-date references, the format of the text has been completely revised. Each chapter begins with bulleted highlights, key words, and a glossary of terms unique to that chapter. Key concepts of each chapter appear in highlighted boxes for easier visibility and quick reference.

The first 9 chapters are dedicated to the basic principles of the Maitland concept. The introductory chapter presents Maitland's "permeable brick wall," which discusses the relationships between clinical signs and symptoms and the theories of diagnosis, evidence, pathology, and anatomy. This provides the framework for the open, flexible clinical decision making that has become the hallmark of the Maitland concept. Chapter 2, "Mobilization and Manipulation-Definitions, Desired Effects, Role in Rehabilitation and Evidence Base," has been significantly updated.

Neurodynamics, which is the influence on pathology and treatment, is also introduced in this chapter. This is not new from previous editions, but has been expanded for this edition.

Chapter 3, "Communication and the Therapeutic Relationship," covers all elements of communication between the therapist and the patient in detail. Maitland's approach to communication is very thorough and forms the foundation of his approach. Verbatim examples of the patient-therapist interaction from initial contact, "assessment, treatment, and reassessment" demonstrate the communication process. The importance and value of communication is a theme repeated throughout the text. This chapter is a must-read for any person who interacts with patients regardless of practice setting.

Chapter 4, "Contemporary Perspectives in Physiotherapy Practice," is a worthy addition to this edition. The impact of clinical reasoning, bio-psychosocial paradigms, evidence based practice, and qualitative and quantitative research on physical therapy is discussed, and the importance of clinical reasoning is presented. The next 2 chapters cover the principles of assessment and examination. Once again, the importance of clinical reasoning and analytical assessment is stressed. Contraindications and precautions to physical therapy there is a text box that contains thorough discussions of the indicators of change. In chapter 6, "Principles of Examination," the creation of a hypothesis for the patient's unique problem is discussed in great detail as well. The intent of the use of a body chart to track symptoms, planning of what is referred to as "subjective" and "objective" examination and the reflective analysis of previous treatment sessions is presented. The process of "assessment, treatment, and reassessment" is mentioned in multiple other sections of the book.

Two chapters are devoted to the principles that govern mobilization and manipulation treatment techniques. The various grades of mobilization are clearly presented. I appreciated the brief explanation of how the grades can be represented relative to a joint's range, and, most important, the behavior and timing of the symptoms. Emphasis

is placed on the value of the assessment to help guide the process to select and progress a treatment plan. Four classifications or groups of joint signs are presented, and the treatment is discussed at length. A table lists the most valuable techniques for the specific joint and the clinical group. Mini-case studies demonstrate the treatment progression and the clinical reasoning used to treat a given disorder. The importance of integrating specific problems and goals is reinforced here. It also is noted that it is the therapist's obligation to refer patients who fall outside the therapist's scope of practice to the appropriate professional.

Chapter 10, "Peripheral Neuromuscular Disorders," provides information about recognizing disorders that will or will not respond to manual therapy. This chapter not only introduces how specific syndromes and pathologies should respond to treatment, but also examines the influence of cognitive emotional responses on the prognosis. There is a well-done diagram comparing intra-articular and peri-articular symptoms. The last 7 chapters are dedicated to the study of the shoulder and shoulder girdle complex, the elbow complex, the wrist and hand complex, the hip region, the knee complex, the ankle and foot complex, and the craniomandibular complex, respectively. Besides the discussion of each specific joint and soft tissue complex, the differential examination for the contribution of other structures (ie, spinal or neural structures) is presented in each chapter. The explanation of the physical examination is thorough, and helpful clinical advice is given regarding the procedures. The physical examination and treatment techniques are clearly depicted in photographs. The techniques also may be viewed on the accompanying CD-ROM for a more dynamic picture. Each chapter includes summaries of the "subjective" examination as well as the physical examination. This material is summarized and highlighted for quick reference in boxes. The sections on clinical profiles for specific pathologies are concise and well done and also cover clinical reasoning. The case studies in each chapter demonstrate not only treatment progression, but also the reassessment and recording methodology used. The case study in the ankle and foot complex chapter includes the therapist's thoughts and hypotheses, which provide further insight into the clinical-reasoning process. There are 2 appendixes. The first appendix covers the theory and construction of movement diagrams. Movement diagrams have been a mainstay in the Maitland concept, which is a method to analyze the relationship between joint mobility and pain, resistance, and spasm. Research is presented that challenges some of the ideas about when joint resistance begins and how that may effect the grading joint mobilization. The second appendix examines self-management strategies, identifying barriers to adherence and containing interesting evidence-based tips to assist patients in improving their short- and long-term adherence.

The accompanying CD-ROM is user friendly, consisting of multiple menus that allow the reader to navigate through the material regardless of the user's computer expertise. The main menu is arranged in the same manner as the book. The various treatments are shown using the different grades of movement. This dynamic presentation is helpful as the amplitudes utilized in the assessment and treatment of the various structures cannot be truly appreciated in any still photograph. The high-quality video clips clearly show the body mechanics, hand holds, and position of the therapist in relationship to the patient. Each video clip can be paused for further study by the viewer. The CD-ROM is best used to reinforce the material in the book or to refine already existing skills.

The evidence cited in the book is current, and the references are well documented. The CD-ROM ties the text and photos together so that the reader is exposed to the material

in multiple, complementary formats. I feel that this text will complete any therapist's library and assist the therapist in skill development.

Jeff Yaver, PT, PhD, is a clinical specialist, Kaiser Permanente Medical Center, Manteca, Calif.