THE FIRST YEAR OF MY ISPRM PRESIDENCY
Joel A. DeLisa

ISPRM continues to grow and mature. I had specific charges to each committee, and established two new task forces—Organizational Structure Task Force (John Melvin, Chair) and Central Office (Christoph Guttenbrunner, Chair). I am impressed by the amount of dedicated hard work these individuals and their committee/task force members have accomplished.

Our website is up and functioning—a specific thanks to Nachum Soroker and Leonard Li, as well as the other committee members. We proved that we could carry on important business by email in between meeting with our selection of Limassol, Cyprus as the host for the Interim meeting in 2010. With respect to the website, we still need to resolve the update responsibility and the missing photos/permission to display issues.

I must thank Marta Imamura and her Education Committee for their energy and productivity. They produced a draft minimum curriculum for Acquired Brain Injury and Spinal Cord Injury. They have drafted minimum curriculum on Research. ISPRM needs to develop an approval process for these types of important documents. I have agreed that they will be published in News and Views but marked ‘draft’, as well as requesting member feedback. I have suggested that the articles be submitted for peer review and publication to The Journal of Rehabilitation. Another option is to have the Publications Committee serve as the approving body. If this option is selected, they would need the ability to have ad hoc members depending on the “white paper” content. The Education Committee has also contributed evidence based alerts which has been vetted by the Publications Committee and posted on our website.

The Education Committee has raised the issue of special interest groups. They have developed draft criteria. I have placed this on the President’s Council agenda for discussion of the concept, and implementation issues.

We added a second official DRJ for 2009. We need to decide whether we have one or more official journals as this has financial implications to the Society. We also need to develop a policy on how to deal with journals that want closer collaboration.

We have asked the Sponsorship Committee (Jorge Lains, Chair) to re-evaluate our fee structure and suggest modifications, as well as develop a plan to increase the number of sponsors and the revenue from them.

The Congress Committee had made recommendations for additional criteria and content for our Congresses from 2015 and beyond. These were incorporated into our request for applications to host the 2015 meeting. These are:
1. The Conference is sponsored/supervised/implemented by an established professional/academic or clinical entity.
2. The program, venue and infrastructure are supported by a committed staff.
3. Plans for the Conference are completed at least four (4) months prior to the event.
4. The costs and or losses of the Conference are backed by an organization with sufficient resources for the commitment.
5. ISPRM assumes no financial responsibility, other than to communicate, regarding the Conference through News & Views.
6. I have also asked the Congress Committee to develop criteria for officially endorsed pre and post conferences. We are developing a contract with China with respect to the 6th World Congress (2015).
A number of legal issues have arisen which we are working on:

1. Should we trademark our logo?
2. No one has legal signature authority for our Society. Currently our Secretary signs our documents, such as Journal contracts, for the Society. The current Belgian incorporation structure does not allow Werner to sign for us. We need to find out what it takes and how much it will cost to have our Executive Director have signature authority. We have asked the Office Task Force Chair, Christoph Guttenbrunner, and our Treasurer, Marty Grabois to evaluate and make recommendations with respect to this issue.
3. Currently ISPRM has no one on retainer to provide us with legal advice. We try to obtain pro bono advice when needed. Should we have someone on retainer? Can we afford it?
4. We do not have Officers and Directors Liability Insurance. Is it necessary in Europe? And if so, what is the cost?

William Peek has resigned as the Society Historian. Jose Jimenez has been appointed as our new historian.

Communications is always key in the Society. The President’s Cabinet can make decisions between meetings. These need to be affirmed or modified at the next face to face meeting by the Executive Committee. The Board of Governors receives reports, approves officers, meeting sites, by-law changes, dues/fees increases, assessment etc. I am anxious to see Professor Melvin’s Organizational Task Force recommendations. I want to thank John Melvin for the help and advice he has provided during the first year of my presidency.

THE FIRST YEAR AS SECRETARY OF THE ISPRM

Jorge Lains

Since my nomination as ISPRM Secretary in Brugge, I had the friendly, unique and always available help of Prof. Leonard Lee, Past-secretary. My thanks!

I also would like to emphasize the permanent availability of Mr. Werner Van Cleemputte. Several are the tasks where the Secretary has been involved. The most relevant to be reported:

1. Interim ISPRM Meeting
   The BOG approved the voting process by internet, “option A” where the Secretary and the Central Office became responsible for directly collect the votes and to announce the final result. Both had the responsibility to keep in secret each and every vote. The President Cabinet approved the Call for submission of proposal to hold 2010 Interim Board Meeting.
   The voting process occurred nice and smoothly and in accordance with the schedule. The winner was the Mediterranean Forum PRM Congress, to be held in Limassol, Cyprus, September 29 – October 2, 2010.

2. Legal Issues
   During the last year several legal issues were raised.
   - Legal designation of Central Office – our legal current registration status in Belgium is being clarified
   - Logo/trademark: ISPRM Logo isn’t protected by copyright. This is expensive and probably not enough efficacious to protect our Logo.
   - Signature authority: The ISPRM contracts must be signed. Who has signature authority for ISPRM - President, Executive Director, Treasurer, Secretary? Some items may/should require two signatures.
   - Directors’ and Officers’ insurance: who is responsible for any payment if ISPRM can’t do it? It is necessary an insurance to protect and prevent from possible compensations.
   - Legal retainer: we should have someone on legal retainer.

3. World Congress
   The Requirements for application to hold the ISPRM World Congress were prepared by the Congress Committee and published in the N&V issue (in attach). As Prof. Jose Jimenez mentioned, “this is a change/amendment of the Policies and Procedure X, titled World Congress.” The Congress Committee is working on a proposal to update Policies and Procedures X, Paragraphs 5, Financial Responsibilities and 6. Disposition of Final Balance.
The Paragraph 5.2 of the Requirements for application to hold the ISPRM World Congress states that “a contract must be drawn up between ISPRM and the National Society and signed not less than 4 years before the congress by the President, Treasurer and Executive Director of ISPRM on the one hand and by the Chairman of the LOC and the President of the local hosting National Society on the other hand”. When China was voted to host the 2013 ISPRM World Congress the requirements to host a ISPRM World Congress were different from those that were updated and approved by the Congress Committee, published in the News and Views. So, it will most important that the contract to be signed by between ISPRM and the Chinese colleagues is the result of a dialogue and consensus”. I am certain that we can arrive to a consensus about the contract with our colleagues from China, but we need a contract for all future Congresses.

On the other hand, the ISPRM Congresses are the resource where we can increase our incomes and membership. We can’t continue increasing the fees of our membership. We need to assure that the ISPRM Congresses progressively become an “ISPRM organization”. The Central Office can and should play a central role in these World Congresses.

4. Membership
The Italian colleagues had the idea of the “combined membership”. In the near future, all nations should choose this option for ISPRM membership. In 2009 up until the present, we have combined membership from Australia, Columbia, France, Portugal and Thailand and the Chinese Societies. Probably Hong Kong and Belgian Societies will also choose the combined membership. We must continue pushing forward and hard our colleagues representing the National Societies to opt for the “Italian Model”.

5. Official Journals
Disability and Rehabilitation Journal and Journal of Rehabilitation Medicine
ISPRM arrive to an agreement and signed contracts with both our official Journals, thanks the efforts of Prof. Leonard Lee and the good will of the Journals. Both are available through our website for all the ISPRM members in good standing, due to the excellent work done by Prof. Nachum Soroker and the Website subcommittee.

6. Website
   1) Updates
   The website became the most important link between the ISPRM members and an unique tool to access to relevant information. One major advantage of being an ISPRM member in good standing is the ability to get free access to the electronic version of the Disability and Rehabilitation Journal and Journal of Rehabilitation Medicine.
   Updating the website is a huge task and need a lot of time available for doing it. This task is being done by Prof. Nachum Soroker and the Website subcommittee but is too time consuming.
   2) Photos
   After Seoul it was decided to have photos from real patients. Some questions appear about possible legal issues on using these photos. The possibility for using them depends on the country and, in accordance with a friend lawyer, at least in Portugal we only need a written consent.
   3) History
   The Society has Active File recording past and future history of the International Society of Physical and Rehabilitation Medicine. This file has the following chapters: (1) Creation of the ISPRM. (2) History of the International Federation of Physical Medicine and Rehabilitation. (3) History of the International Rehabilitation Medicine Association. (4) Subsequent Chapters to be written every two years with a summary of the activities of the ISPRM during each period and (5) Honours and Awards
   The Historians were Dr. José Jimenez (1999 – 2004); Dr. William Peek (2004 – 2009). Dr. Peek asked for his resignation during January 2009. The new ISPRM historian is Dr. José Jimenez. He worked a lot writing the Archives and History of ISPRM in a single file and presenting important suggestions. It is on discussion the decision to present ISPRM History in one file or in several, as it can be seen in the ISPRM website.

7. Physiotherapy and ISPRM
On April 2009, ISPRM received an email form Raija Kuisma, research officer for the UK Chartered Society of Physiotherapy Special Interest Group of Physiotherapists Working Internationally and the President of the European Network of Physiotherapy in Higher Education. Dr. Raija Kuisma was asking for collaboration with ISPRM. We emphasized our availability to change ideas and look for points of common interest and collaboration. We also suggested a meeting during the ISPRM Congress, in Istanbul.
8. Sponsorship fees
ISPRM needs to find new and better ways for funding. Fees must be established for advertising, in particular in the website and/or in the N&V.

Comment
This report is a very brief and short summary of the actions and tasks that were or are being taken, involving the secretary. The enormous amount of information and tasks performed each and every day by several members of different Committees, e.g. the Publication Committee, the Website Sub-Committee and the Secretary need to be reviewed.
ISPRM is growing and needs a professional structure. The World Congresses should become the most important opportunity to further develop our Society. ISPRM must give a step forward and become the “Congress Organizer”

FROM THE PRESIDENT OF THE AAPM&R: FOSTERING INTERNATIONAL PM&R (OR IS IT PRM) IS IMPORTANT FOR THE GROWTH OF OUR SPECIALTY
William Micheo

“You must be the change you wish to see in the world.” – Mohandas Gandhi
“Those who dream by day are cognizant of many things that escape those who dream only at night.” – Edgar Allan Poe

June is an important month for international PM&R. The 5th World Congress of the International Society of Physical and Rehabilitation Medicine (ISPRM) will take place in the beautiful city of Istanbul, Turkey, June 13-17. The general theme of the Congress will be “Moving Rehabilitation Medicine Beyond the Continents at the Timeless City,” and PM&R experts from all corners of the world will be sharing their expertise and scientific information. This scientific event is the most important meeting organized by ISPRM. It allows individuals from areas in which access to rehabilitation is limited, and PM&R is just a developing specialty, to gain exposure to state-of-the-art clinical and scientific information they can take back home. Our Academy (as a member society of ISPRM), individual Academy members (as individual members and invited speakers), and our scientific journal PM&R will be represented during the meeting in several scientific sessions and in the board of governors meeting.

The ISPRM President Cabinet includes:
- President Joel DeLisa, MD (USA)
- President-Elect Gerold Stucki, MD, MS (Germany), a senior editor of PM&R
- Vice President Marta Imamura, MD, PhD (Brazil), an AAPM&R member and associate editor of PM&R
- Secretary Jorge Lains, MD (Portugal), an AAPM&R member
- Treasurer Martin Grabois, MD (USA), a past president of AAPM&R

Individuals from all corners of the world are involved in ISPRM leadership, committees, publications, and advocacy with international medical bodies such as the World Health Organization (WHO).

ISPRM was created from the merger of the International Federation of Physical and Rehabilitation Medicine (ISPRM) and the International Rehabilitation Medicine Association (with its individual members). The ISPRM mission is to be the preeminent international society for practitioners of PM&R; to improve the knowledge, skills, and attitudes of physicians in the understanding of the pathodynamics and management of impairment and disabilities; to improve the quality of life of people with disabilities; and to facilitate rehabilitation medicine’s input to international health organizations. An area of particular interest for ISPRM is that of standardization of education in the field of medical rehabilitation and the development of a basic curriculum for our specialty that could be applied around the world.

AAPM&R is starting to collaborate more with ISPRM and other international societies such as the European Society of Physical and Rehabilitation Medicine (ESPRM) and the Latin American Medical Association of Rehabilitation (AMLAR) in educational and scientific activities. Because the AAPM&R 2009 Annual Assembly is in “Tejas,” ISPRM and AMLAR members were encouraged to submit their scientific papers to our Annual Assembly and can receive a discounted meeting registration rate; and, for the first time, we will present an educational session on “Educational Issues in Rehabilitation Medicine in Latin America” entirely in Spanish.
As an Academy we also have a constituency of international members who participate in one of our Community Networks. AAPM&R has 214 international members from 42 countries. Of these, 69% are male and 31% are females, and they come from faraway places such as Australia, China, Greece, Qatar, Romania, Singapore, Turkey, and the United Arab Emirates, as well as from our neighboring countries Canada and Mexico. We certainly would like this membership to grow so we can learn from our international colleagues and collaborate on projects that would improve education and services to our members and the patients they serve.

Continued growth of PM&R/PRM as a specialty is needed around the globe. WHO estimates that only 1-2% of individuals with disability around the world get the rehabilitation services they need. To change this shocking statistic, we need a strong specialty with a solid scientific base, excellent educational programs with a basic curriculum that defines our specialty, and a large number of caring clinicians who always want the best for their patients in every corner of the world.

From The Physiatrist, June 2009, Volume 25, No. 5, pages 1-2

**ISPRM in Africa & Middle East**

Nachum Soroker

The following extract from my report for the Brugge Interim Meeting of the ISPRM BOG in 2008 will serve as an introduction for the current report in which I will concentrate on the status, purposes and intended further development of the ISPRM website. Optimal use of the new website depends on the active involvement throughout the year of various ISPRM officers, as will be explained.

From the 2008 report: *As we all know, in many countries of the Africa & Middle East region there are no national PRM societies and PRM is not considered a distinct medical specialty. In addition, the infrastructure of rehabilitation services is very poor in most of these countries. As I have reported to the board in the Seoul meeting, part of the people from this region who were once ISPRM members (76 in total; from - Israel, Kuwait, Iran, Egypt, Tunisia, UAE, Saudi Arabia, Lebanon, Qatar, Pakistan, and Libya – in descending order), did not renew their membership in recent years. We can hope that this situation will change when the new ISPRM website becomes functional and loaded with attractive educational materials for members only and the advantages of becoming an ISPRM member become more visible and clear to individual rehab people in all countries.*

**The ISPRM Website**

Nachum Soroker

Since that report, the new ISPRM website became functional due to the dedicated work of the members of the original task-force created in the Seoul meeting (Leonard Li, Mark Young, Marta Imamura, Andy Haig, Jorge Lains and myself), followed by the current members of the ISPRM Website Sub-Committee (same persons except Jorge Lains, with the addition since the Brugge meeting of Deog Young Kim from Korea and Yaron Sacher from Israel). Throughout that period there is constant exchange of ideas with Walter Frontera, Chair of the ISPRM Publications Committee and Marta Imamura, in her position as Chair of the ISPRM Education Committee. The central office is becoming more involved with routine website maintenance work including members’ list updating and periodic uploading of notes and new issues of News and Views. It is certainly too early to assess whether our original expectations from the new website (to serve as a central means for disseminating state-of-the-art P&RM knowledge throughout the world) are likely to materialize or not. Past and current efforts to develop the ISPRM Website are guided by the idea that the website is no less important than the ISPRM World Congresses for the fulfillment of ISPRM mission, and actually may have greater chances to penetrate into regions of the world, especially in Africa, that so far were largely disconnected from the mainstream rehab profession. Exposure, through the ISPRM website, of interested medical personnel in developing countries to rich didactic materials and clinical guidelines, as well as to sources of help in developed countries, is expected to become a leading force in the advancement of P&RM in Africa and the Middle East among other regions of the world.
The following report refers to work done with the ISPRM Website from Mid 2008 to Mid 2009. All feedback, suggestions and comments from the members of the ISPRM BOG (please address comments to soroker@netvision.net.il) are most welcome. We hope to have fruitful discussions in Istanbul with members of the Publication and Education Committees on further developments of the website.

**Introductory remarks:**
The new ISPRM website is on air since mid July, 2008. The website uses Daronet (Israel) technology, providing advanced development tools for independent application by the website sub-committee. A satellite site (ROUThost, Houston Tx) is linked to the ISPRM website and serves for holding educational and other large size materials. Routine website maintenance work (keeping members’ registry updated, uploading of N&V issues, etc) as well as development work (creating new libraries, uploading educational materials, formation of discussion forums, etc) is done through the website back office, by a limited number of persons who received the formal tuition from Daronet either in Israel or in Belgium. A huge amount of information has already been uploaded and hundreds of internal and external links have been created. Yet, to fulfill the website mission and our original intentions and expectations, much work has yet to be done.

**Basic website statistics (further data in the Appendix):**

<table>
<thead>
<tr>
<th></th>
<th>January 11-17, 2009</th>
<th>May 17-23, 2009</th>
</tr>
</thead>
<tbody>
<tr>
<td>Average daily visits</td>
<td>344</td>
<td>368</td>
</tr>
<tr>
<td>Total daily file downloads</td>
<td>199</td>
<td>234</td>
</tr>
<tr>
<td>Unique IPs (week)</td>
<td>1210</td>
<td>1264</td>
</tr>
</tbody>
</table>

**Current website status and things-to-do:**
Things-to-do (maintenance and development work) marked in *italics*.

**A. Upper Bar items:**
2. Joining the ISPRM: Functional and updated.
   *The note on registration fees will need updating upon change.*
   *Content needs replacement every 2 years.*
5. Contact us: Functional and updated.

**B. Homepage items:**
1. Composite (4 part) picture: The picture elements now displayed clearly pertain to the content world of P&RM. Prof DeLisa asked to replace some of the 4 picture elements so that not only Caucasian patients/therapists are shown. Prof Park and others sent pictures taken in their hospitals with living patients clearly identifiable. This raised the issue of having to obtain a legal permit from patients to use their pictures in the website homepage. The legal aspect has to be cleared.
2. Central message: The message currently displayed relates to the new website and its mission and goals. *The content will be revised during the Istanbul meeting.*
3. Added items: Three items (message & picture) are currently displayed:
   - Message from Prof DeLisa on the forthcoming ISPRM Congress (upper).
   - Message on the forthcoming ISPRM World Congress (middle).
   - Message from Prof Park on website (lower).
   *The upper and middle items will be replaced after the Istanbul Congress. *  
   *The Lower item will be replaced by another Presidential note upon Prof DeLisa’s decision.*
   *Additional new items will be placed when appropriate (announcement of the elected venue of the 2010 interim board meeting; announcement of new website developments with significant benefit to members, etc).*
4. Ticker: Five items are currently (May 27, 2009) active:
   - 1. Note on new evidence-based rehab alerts.
   - 2. Note on the forthcoming online journal club.
- 3. Note on benefits to ISPRM members incl. access to official journals.
- 4. Call for submission of proposals to host the 2015 ISPRM Congress.
- 5. Note on the forthcoming meeting of the BOG.
  - Items #1-3 will be revised by January 2010.
  - Item #4 will be inactivated after the hosting country is selected.
  - Item #5 will be inactivated after the Istanbul meeting.

5. Sponsors’ corner: Only one sponsor’s logo (Allergan) is displayed presently.
The Sponsorship Committee / Central Office will inform on any new ISPRM sponsor, so that the appropriate logo can be placed. We recommend that towards the event of a new ISPRM World Congress, when many companies are addressed and recruited for sponsorship, these same companies will be asked to provide continuous sponsorship for ISPRM activities.

5. C. Left Bar items:
1. Logout: Functional.
2. Who is the ISPRM: The library contains 3 folders:
   2. By Laws and Policies. 3 items functional and updated.
       a. ISPRM BL ed. 2007.
       b. ISPRM P&P ed. 2007.
       Updating and uploading of new materials will be done upon demand of the By-Laws Committee and/or President Cabinet.
3. Archives and History. There are currently 7 different items in this library.
   Item #5 – ISPRM - is updated only until mid 2008. The approved minutes of the 2008 Interim Board Meeting, including the updated list of BOG members and the BOG discussion summaries should be prepared in the exact format of the previous documentation and uploaded to the website.

4. Executives and Committees: The library contains 6 folders:
   1. President Cabinet. Functional and updated.
   2. Executive Committee. Functional and updated.
   3. Board of Governors. A new item – updated list of members of the BOG and committees - was added to the existing gallery of pictures and affiliations.
      The list (excel file) was prepared by Werner and sent to NS by October 6, 2008. A few items in the list need updating.
      The picture gallery also needs to be completed by missing pictures of 9 BOG members.
      This first BOG forum was created for the event of the election of the venue of the 2010 interim board meeting. Following the conclusion of the e-voting on November 30, 2008 and the election of the venue (Limassol), the discussion forum can be used now for other purposes. A new item placed in January 2009 calls for suggestions/comments from BOG members on that.
   5. Regional Vice Presidents. The 5 folders of this library are functional and updated.
      Some links to regional and national societies should be created. Regional VPs need to review the materials and see what has to be updated.
   6. Committees. This library contains 13 folders for the different ISPRM committees. Committee chairs will be asked to check if the info is complete and updated.

5. Members only: Functional and updated.
6. Scientific Congresses and Meetings: The library contains 9 different folders:
   1. Coming ISPRM World Congress. Functional and updated. Content to be replaced after the Istanbul meeting in June 2009.
   2. 2009 Meeting of the ISPRM BOG. Functional and updated. Content to be replaced after the Istanbul meeting in June 2009.
3. Future ISPRM World Congresses (2011, 2013). Created in January 2009. Purpose – to hold information on the future world congresses already decided. This directory should be filled with info pertinent to the San Juan (2011) and Beijing (2013) congresses. Links should be created to the relevant websites.

4. Past ISPRM World Congresses. A brief account and some photos appear in each of the 4 folders (for ISPRM World Congresses I-IV. As these are very important landmarks in ISPRM evolution, there is place for enlarging the coverage of the past congresses, with references probably to accounts made for past issues of News and Views.

5. Conferences Endorsed by the ISPRM. This folder has to be reviewed and updated.

Clear criteria for ISPRM endorsement are lacking.

6. Other Scientific Meetings. This folder has to be reviewed and updated periodically.

7. ISPRM Interim Board Meeting. This new folder is functional and updated.

Following the e-voting of November 30, 2008 and the election of Limassol as the venue for the next (2010) interim board meeting, the directory is now kept to serve future actions related to interim BOG meetings. A note on that was introduced. The info related to the activity that preceded the election of the 2010 venue was left in place as an example. This folder will be updated every 2 years.

8. ISPRM World Congress 2015. Information relevant for candidates to host the 2015 World Congress was placed in this new sub-directory. Further info will be placed when available. Mandatory review – following the election of the venue in June 2009.

7. Education: The Education library contains at the present 6 different folders.

1. Educational Materials for the General Public. The folder has only a few phrases (on what is P&RM). The Education Committee is asked to look for appropriate materials that can be accessed by linking, with information relevant to the general public. It will be good if appropriate material is placed also in the website (not through linking to other sites).

2. Discussion Forums for ISPRM Members. Discussion forums have been opened in April 2009 to enable complementary offline discussion following the online sessions dedicated to guidelines formation. Unfortunately people don’t tend to use these forums.

For discussion: Opening SIG educational forums. Such forums when coordinated by responsible people can be very useful for allocation of PRM specialists sharing the same scientific interests, facilitating multi-center joint research, sharing opinions and providing advice on clinical issues (including problematic cases), etc. We can do it in no time and it will be available to all ISPRM members with no technical barriers. There is no limit to the number of SIG forums we can open, and these may be dedicated to broad or to more restricted issues. Headings like: Stroke Rehab, Cognitive Rehab, Brain Plasticity, Pain Management, LBP, FIM, ICF, etc, may all be used. Time will show what is continuously alive and attractive and what is not (then closed). It is important I think to nominate an authoritative person to coordinate the activity of each such SIG. I suggest that in the beginning, until experience is gathered, all educational SIGs will be for PRM clinicians and scientists (MDs and allied professions) - not for the wide public (this can be added later, in a Q&A format). I suggest to announce every new SIG - when ready to be activated in the website - through mail campaigns to ISPRM members, and in addition through the national and regional organizations to all their members, so as to reach as many as possible of the international PRM community (PRM doctors and allied professions). This is likely to attract new people to the ISPRM and increase membership, which is very important.

3. Educational materials for ISPRM Members. This folder contains educational materials classified in a systematic manner, including a new library created in may 2009 for ISPRM Educational Reviews and Monographs.

- The exact mechanism of educational material selection, approval and uploading, using temporary hosting in the website and final placement in the ROUThost server, has to be discussed further.

- Transfer of heavy files to ROUThost has begun with placement of various articles in PDF format in special ROUThost libraries for the purposes of Guidelines' formation (linked from the JC library).

- Links to external sources – The first link was established in January 2009 (to the ICF-oriented site of the Swiss Paraplegic Society). Further links to be created.

- It will be good to create a form to be sent to copyright holders of published articles that are of special interest, so that such articles can be uploaded to the website in pdf format.

4. Student Educational Exchange. This folder connects to the original website constructed by Mark Young. MY reviews the contents of his site and the need to keep the separate site.
5. Journal Club. A new format was given to this folder. We expect to get from Marta Imamura the list of webpages where the records of past meetings are held, so that through appropriate linking these meetings can be viewed offline. Recently, with the work on guidelines formation links were created to the libraries in ROUThost where we hold the relevant literature for this work.

6. Evidence Based Rehab Alerts. A new library created in 2009 to hold alerts on evidence-based work relevant to P&RM. Updates are received now on a monthly basis.

8. Publications: This library contains currently 3 folders.
   1. News and Views. All items of 2002 to 2009 are placed here. We intend to transfer all issues except those of the current year to ROUThost. New issues of N&V are uploaded regularly by the central office and a mail campaign is sent to all ISPRM members to announce that.
   2. ISPRM Official Journals. Links to the 2 official journals – JRM and D&R - are functional for members only.
   3. Other Publications. No items there.

9. Resources: Many useful external links have already been created. As the number of valuable resources is expected to increase, it will be useful to organize the resources in some meaningful categorical manner, providing a one-phrase explanation on the content of each resource.


11. Support Global Rehabilitation: Functional. It might be good to review the exposition of the matter in this page, especially if it fails to recruit support.

Routine maintenance and updating work:
The main aspects of routine maintenance work are:
1. Keeping the back-office registry of (1) ISPRM members and (2) members of the BOG and committees - always updated. This is crucial for the smooth operation of BOG discussion forums, educational SIG forums, mail campaigns, etc.
2. Helping members having difficulties accessing members-only zones who approach the central office via contact us.
3. Updating the contents of the JC folder in strict accordance with the format set for this folder and creating the appropriate links to externally placed records of past JC meetings and relevant articles in ROUThost.
4. Uploading of approved minutes of ISPRM board meetings into the Archives and History folder, in consultation with the ISPRM historian, and editing the material in the back office to correspond in style to the format of the existing older files.
5. Keeping always updated the lists of members of the BOG and committees and their related info (pictures, email addresses) available in the Executives and Committees folder. Taking care to complete missing elements in these lists.
6. Uploading new issues of N&Vs.
7. Sending mail campaigns from the website to announce new JC meetings, new issues of N&Vs, and other things of importance.
8. Keeping the calendar of scientific events updated (as in N&Vs).

Issues and ideas that need to be discussed further in Istanbul:
Various issues related to development of new website activities and further tuning of current operations have been mentioned above. Here is a list of other issues necessitating further discussion:
1. Walter Frontera’s suggestion for a 3 step process to be followed for each submission to the website: 1) All submissions including news, articles and other educational material will be submitted to the Chair of the Website Subcommittee; 2) The Chair of the Website Subcommittee will discuss the submission with the Chair of the Publications Committee; 3) If approved, the new information will be posted on the website”. NS comment: Is this 3-stage procedure necessary for educational material already checked and approved by Marta and Walter?
2. Walter Frontera (Workplan, 2.10.08): The responsibilities of the Website sub-committee are:
   • To contribute to the design of the website.
   • To review its content on a regular basis and identify outdated material.
   • To solicit and review new material submitted for publication.
   • To upload materials approved for publication.
NS comment: It should be the responsibility of committee chair persons, regional VPs and other ISPRM officers to perform a periodic review of the contents under their direct responsibility. The website SC will help the responsible
officers to perform the necessary changes in the website. Saying that, the website chair will yet approach ISPRM officers whose materials seem to be outdated with a request for review and updating.

3. Making use of the website mail-campaign capability to enhance the participation in ISPRM life of members and registered visitors who are not (yet) members; to ask ISPRM officers to review their personal data, etc.

4. In-depth discussion should be continued with Marta Imamura concerning developments of new educational operations, in accord with the content of the Workplan for the Education Committee (October 7, 2008). Among these issues:
   a. How the website can help with the World Action Plan on Initial Education in PRM (WAPIE.PRM), aimed to be an international expansion of the European work plan for initial PRM education, with 3 main objectives: (1) to present handicap and the ICF to the medical trainees of all the medical schools during their undergraduate program; (2) to facilitate access to the best level of education in PRM for the PRM trainees during their postgraduate teaching and training programs; (3) to facilitate access to research and research activities to the PRM trainees. The revised objectives have been defined as follows: (1) create an undergraduate and postgraduate minimum curricula endorsed by ISPRM that could be used in an international level; (2) facilitate access to the best level of education in PRM for the PRM trainees during their postgraduate teaching and training programs; (3) facilitate access to research and research activities to the PRM trainees. A survey of existing PRM programs is ongoing.
   b. Publication of monographs and other educational materials in the website. Clearance of copyright issues. Prof. Gunnar Grimby, JRM Chief Editor has agreed to publish a series of educational articles, filling the gap between textbooks and scientific papers, starting in 2008. Dr Stefano Negrini also agreed to publish an educational article for EJPRM.
   c. How the website can help achieve the goal of facilitating trainees getting access to PRM research activities.
   d. How the website can help create and make known a list of training opportunities in P&RM endorsed by the ISPRM. The European colleagues have already provided a list with 70 training sites. The committee is still working in the other regions.

Appendix: Essential statistics of the ISPRM Website during the week of May 17-23, 2009.

Domain Name: isprm.org
The Result of the Merger and Integration of IRMA and IFPMR

NEWS & VIEWS – JUNE 2009

Statistics

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<tr>
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<td>Average Hits Per Day</td>
<td>6279</td>
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<td>Average Hits Per Hour</td>
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<td>Average Hits Per Visitor</td>
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<td>Average Data Transferred per Hit</td>
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<tr>
<td>Total Visitors</td>
<td>2582</td>
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<td>368</td>
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<td>Average PageViews per visitor</td>
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<td>Average Downloads per visitor</td>
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<tr>
<td>Average Data Transferred per Visitor</td>
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Uniq IPs

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<td>Visitors Who Visit Once</td>
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<td>Visitors Who Visit more than Once</td>
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PageViews and Downloads

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Bandwidth

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<tr>
<td>Average Data Transferred per Day</td>
<td>156.18 MB</td>
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Pain relief in women with fibromyalgia: A cross-over study of superficial warmth stimulation and transcutaneous electrical nerve stimulation

Monika Löfgren, Cecilia Norrbrink

Isokinetic characteristics of shoulder rotators in patients with adhesive capsulitis

Hsiu-Chen Lin, Jing-Sheng Li, Sui-Foon Lo, Yi-Fen Shih, Chen-Yu Lo, Shu-Ya Chen

Clinical effectiveness of an interdisciplinary pain management programme compared with standard inpatient rehabilitation in chronic pain: A naturalistic, prospective controlled cohort study

Felix Angst, Martin L. Verra, Susanne Lehmann, Roberto Brioschi, André Aeschlimann

Development of the rehabilitation patient experiences questionnaire: Data quality, reliability and validity in patients with rheumatic diseases

Margreth Grotle, Andrew Garratt, Ida Löehning, Ingvild Kjeken, Mari Klokkerud, Till Uhlig, Kåre Birger Hagen

Effectiveness of phantom exercises for phantom limb pain: A pilot study

Özlem Ülger, Semra Topuz, Kezban Bayramlar, Gül Şener, Fatih Erbahçeci
Safety of methylphenidate following traumatic brain injury: Impact on vital signs and side-effects during inpatient rehabilitation
Catherine Willmott, Jennie Ponsford, John Olver, Michael Ponsford

Reliability of lower limb kinematics, mechanics and energetics during gait in patients after stroke
Gilles D. Caty, Christine Detrembleur, Corinne Bleyenheuft, Thierry M. Lejeune

Inappropriate citations used to describe the pharmacology of botulinum toxin type A preparations in clinical use and Response to letter to the editor by Zakine et al. Ongoing discussion on the pharmacology of botulinum toxin type A formulations: conclusions of adult spasticity consensus are correct in this respect  Open Acess!
Benjamin Zakine, Andy M. Pickett, Pascal Maisonobe and Jörg Wissel, Anthony B. Ward
UPCOMING MEETINGS AND CONGRESSES

ISPRM World Congresses

- 6th Congress June 12 - 15, 2011 San Juan, Puerto Rico
- 7th Congress June 16 - 20, 2013 Beijing, China
- 8th Congress June 2015

Congresses on:

- Stroke www.internationalstroke.org/s_content.php?id=fb2002-03-04-1020
- Neurology www.eurostroke.org/esc_main%20links.htm
- Neurorehab www.wfnr.co.uk/docs/events.htm
- Spine www.spine.org/calendar/nass_future_events.cfm
- Brain Injury www.internationalbrain.org/content.php?pages=congress
- Osteoporosis www.iofbonehealth.org/meetings-events.html

= congresses offering reduced registration fees for ISPRM members

2009

Principles and Practice of Clinical Research 2009 - Course will be offered by Scholars in Clinical Science Program and Department of Continuing Education, Harvard Medical School. The course will occur from March 19th to October 25th. For the 2009 edition, CME credits will be provided. – for details please contact Marta Imamura: martaimf@gmail.com

- 3rd Regional and 11th National Congress of the Venezuelan Society of PM&R (in collaboration with the PMR societies of Panama, Peru, Columbia, Ecuador and Bolivia), 21-24 July Caracas, Venezuela. Visit www.svmfyrr@yahoo.com Congress language: Spanish
- Midsummer Meeting, International Neuropsych Society, 29 July – 1 August, Helsinki, Finland. Visit www.the-ins.org
- 6th Satellite Symposium on Neuropsychological Rehabilitation, 3-4 August, Tallin, Estonia. Visit www.koenigundmueller.de
- 10th Int. Congress EFRR, 9-12 September, Riga, Latvia. Visit www.EFRR-Riga09.com
INTERNATIONAL SOCIETY OF PHYSICAL AND REHABILITATION MEDICINE

THE RESULT OF THE MERGER AND INTEGRATION OF IRMA AND IFPMR

NEWS & VIEWS – JUNE 2009

- 35th ASIA Annual Meeting, 22-26 September, Dallas, Texas, USA. Visit www.asia-spinalinjury.org

70th Annual Meeting of the AAPM&R, 22-25 October, Austin, Texas, USA. Visit www.aapmr.org

- 4th Pan Arab congress of PMR, 29-31 October, Damascus, Syria. Contact hitenbak@scs.net.org
- 5th ASEAN Rehabilitation Medicine Association Congress, 10-12 December, Bangkok, Thailand. Visit www.arma2009.org

2010

- 3rd Int. Congress on Gait & Mental Health (GAIT 2010), 26-28 February, Washington DC, USA, Visit www.kenes.com/gait
- Eight World Congress on Brain Injury (IBIA), 10-14 March, Washington DC, USA. Visit www.internationalbrain.org
- World Congress of Internal Medicine, 20-25 March, Melbourne, Australia. Info follows.
- 18th Annual Scientific Meeting of the Australasian Faculty of Rehabilitation Medicine, 20-25 March, Melbourne, Victoria. Contact: afrm@racp.edu.au
- 6th World Congress for Neurorehabilitation, 21-24 March, Vienna, Austria. Contact: traceymole@wfnr.co.uk
- World Congress on Osteoporosis, 5-8 May, Venice, Italy. Visit www.iofbonehealth.org

17th European Congress on Physical Medicine & Rehabilitation, 23 - 27 May 2010, Venice, Italy. Contact: alessandro.giustini@ntc.it


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13th World Congress on Pain, 29 August-3 September, Montreal, Canada. Visit [www.iasp-pain.org](http://www.iasp-pain.org)

8th Mediterranean Congress of Physical and Rehabilitation Medicine, September 29 to October 2, Limassol, Cyprus. Hosting the ISPRM Interim Board of Governors meeting. Contact Congress president: Nicolas Christodoulou. [chrisfam@logosnet.cy.net](mailto:chrisfam@logosnet.cy.net) - visit [http://www.medcongress.prm10.org](http://www.medcongress.prm10.org)

2nd World Parkinson Congress, 28 September – October 1, Glasgow, Scotland. Visit [www.worldpdcongress.org](http://www.worldpdcongress.org)


71st Annual Meeting of the AAPM&R, 3-7 November, Seattle, Washington, USA. Visit [www.apmr.org](http://www.apmr.org)

2011

72nd Annual Assembly of the AAPM&R, 17-20 November, Orlando, Florida, USA. Website: [www.aapmr.org](http://www.aapmr.org)

6th ISPRM World Congress, June, 12 - 15, 2011, San Juan, Puerto Rico

2012

World Congress for Neurehabilitation, 15 -19 May, Melbourne, Australia. Info follows.

3rd Conference of the Asian Oceania Society of PRM (AOSPRM), 17-19 May, Bali, Indonesia. Contact: aosprrmbali@pharma-pro.com

Spineweek. Third Combined Congress of the Different Spine Societies, May 27- June 1, Rai Amsterdam, The Netherlands. Info congresses@medicongress.com

2013

7th ISPRM World Congress, June 16 – 20, 2013, Beijing, China

2015

8th ISPRM World Congress, June 2015, Berlin, Germany