science libraries in clinical and educational settings. This newest edition will certainly be referred to frequently and greatly appreciated by professionals and students working with patients who have arthritis and allied conditions.

Frances Silverstein, OTR/L

The Treatment of Severe Behavior Disorders: Behavior Analysis Approaches
Ennio Cipani, Editor (1989).
American Association on Mental Retardation, 1719 Kalorama Road, NW, Washington, DC 20009.
190 pp., $21.

This monograph is divided into three sections. The first section comprises five chapters that review and discuss current treatment approaches, the second section comprises two chapters concerned with severe problems, and the third section comprises two chapters that address training concerns. The authors of these chapters used various approaches, but all are based on a philosophy of behavior analysis—behavior modification.

Norris Haring, the author of the foreword, sees four areas—behavioral diagnostics, positive programming, self-management, and parent training—as new territory in behavioral management, and the book includes a chapter on each of these topics. Despite their differences, the primary focus of all of these approaches seems to be the humane, respectful treatment of the client. Section 1, Treatment Approaches, reviews token economies, self-management approaches, the use of punishment, positive programming, and behavioral diagnostics. Section 2, Severe Problems, addresses aggressive and disruptive behavior and community-referenced research on self-stimulation. Section 3, Training Concerns, reviews behavioral parent training and effective staff management.

Generally, the monograph articles are well written, although some are wordy, too narrowly focused, or defensive. Each approach is presented in a positive manner and is supported by other research. Application of each approach is discussed through either case studies or research completed by the author. Ideas on the implementation of approaches with different persons are discussed. Although the title of the book indicates that it addresses exclusively the treatment of severe behavior disorders, the authors also address mild behavior problems and approaches that can be applied to any type of problem. Additionally, many references are provided for further reading related to specific topic areas.

An occupational therapist would find this book helpful. Many of the ideas are practical and easy to implement with a minimum of special equipment. The approaches covered generally require the therapist to work with other professionals when treating the clients. Although this book is not addressed specifically to occupational therapists, it would be helpful to the therapist working in developmental disabilities or psychiatry.

Megan Gangl, MA, OTR

Manual of Physical Therapy
Otto D. Payton, PhD, Richard P. DiFabio, PhD, Stanley V. Paris, PhD, Elizabeth J. Protas, PhD, and Ann F. VanSant, PhD, Editors (1989).
761 pp., $71.

Although this manual was designed as a reference for the physical therapist with clinical experience, several sections are equally informative for occupational therapists. Updated material addresses medical advances and contemporary medical complications, such as AIDS, that pertain to all health professionals.

The text is divided into three sections: neurology, orthopedics, and cardiopulmonary dysfunction. The neurology section begins with a review of biomechanical principles that primarily affect gait, followed by chapters on peripheral neuropathies. The chapter on spinal cord injury is particularly helpful to the occupational therapist; patient outcome criteria are clearly written and 13 expected goals are discussed. The remaining chapters in this section review facial paralysis, coma, vestibular stimulation, parkinsonism, stroke, and muscular dystrophy. Motor planning exercises found in the parkinsonism chapter are well diagramed and easy to follow. The chapter on vestibular stimulation serves as a good but brief introduction to sensory integration.

The second section of the manual covers a variety of orthopedic topics divided by body part. Principles of practice are reviewed and each dysfunction is clearly identified by causes, symptoms, signs, and treatment. The chapter on temporal mandibular function is particularly informative. This section’s final chapter on the child with orthopedic limitations emphasizes postural disorders and contains a children’s range of motion chart.

The third section, which covers health risk and assessment, emphasizes wellness and fitness. Protocols and thorough patient assessment forms are included. Chapters address heart disease and its contributing factors, including a helpful list of medications used in the treatment of cardiac disorders and their effects; rehabilitation and post-surgical care of cardiac patients; pacemaker placement, cardiac bypass, angioplasty, and heart transplants; and pulmonary physical therapy techniques with adults and chronically ill children. The concluding chapter on the adaptation of physical therapy to the geriatric population provides a holistic approach that emphasizes quality of life and functional goals while detailing physiological changes noted with aging.

In summary, this text provides valuable technical information for the practitioner in a physical disability setting working with patients with neurological, orthopedic, pulmonary, or cardiac impairments. The chapter on spinal cord injury is unique in that it discusses the roles of other allied health professionals in helping patients achieve functional goals. This chapter and the final chapter of the text are the only ones that clearly address meaningful life-styles and functional abilities. My only major disappointment with the text was its exclusion of other health professionals’ roles in supplementing and augmenting the successes made in physical therapy. Occupational therapists are seldom mentioned, although several chapters address activities of daily living. On the technical side,