Guest Editor’s Introduction

I was pleased when Mindy Bartscherer told me that the Neurology Section wanted to dedicate an entire issue to cardiopulmonary issues for the neurologic patient. As guest editor, and someone who has dedicated her career to championing this cause, I welcome the opportunity to challenge you. Reading this issue will, I hope, turn on some internal lights (or what I call a “V-8” response). I want you to broaden your horizons and recognize that every neurologic patient is a cardiopulmonary patient, because if you can’t breathe, you can’t exercise! We cannot ask our patients to work on complicated tasks if we haven’t helped them to address the simple task of breathing comfortably and efficiently.

In this issue, you will read about such diverse topics as sleep apnea, movement strategies and positioning, fitness for spinal cord injuries, and respiration as it ties into normal motor development. Also included are comprehensive articles on integrating cardiopulmonary concerns with therapy programs and the likelihood of seeing cardiac disease co-occurring with stroke. Finally, there is a personal perspective on the impact of managed care on rehabilitation and pulmonary treatments and a review of an interesting article on breath support for speech production in Parkinson’s disease.

Whether neurologic or orthopedic, pediatric or geriatric, all of our patients have one thing in common: their hearts pump and their lungs vent. Omitting this system from your evaluation and treatment program for your patients may result in limiting your patients’ rehabilitation potential. A compromised cardiopulmonary system can limit endurance, block maximal physical gains, and/or cause psychological distractions, all of which can limit patients’ true functional outcomes.

Many thanks to Mindy Bartscherer for all her support, and my special thanks to all of the authors who did such a terrific job. ENJOY!

Mary Massery