

Rehabilitation Research Review™



Making Education Easy

Issue 3 – 2016

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Abbreviations used in this issue:

ABI = acquired brain injury
PTA = post-traumatic amnesia
TBI = traumatic brain injury
UCLA = University of California, Los Angeles

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Creativity in practice

Welcome to the third issue of Rehabilitation Research Review.

In this issue I welcome a guest editor Dr Donna McDonald, a Social Worker and Senior Research Fellow at Griffith University, who specialises in disability scholarship and, in particular, the role of art in understanding and responding to disability.

We live and work in a world that urgently insists on quantifiable techniques, tactics and results in response to complex questions about people's health, wellbeing and social circumstances. Objective, time-limited, measurable certainties appear to be more valued than the uncertain, slower heuristic and creative approaches to discovery. The relentless demand to count, evaluate, weigh, and enumerate can cause even the most dedicated rehabilitation and disability practitioner to wilt under the strain. Can creativity be fostered in such a complex world?

Although few practitioners would give deliberate consideration to creativity in their practice, we are reminded that rehabilitation itself is a creative process. Every day, practitioners blend imaginative responses with the best available evidence to generate innovative solutions that can address complex challenges. Rehabilitation at its best is about uncovering new and exciting pathways that can circumvent the barriers posed by disability, injury or illness.

Creativity in rehabilitation aims for more than the practice of art as a therapy to meet clinical goals. It is about the drive to visualise, express and enact our ideas, emotions, and hopes through creative approaches. It is also about understanding the experience of disability from creative perspectives to reveal and appreciate unexpected insights.

In this issue, we review recent research focused on:

- How practitioners can nurture their own creativity to enrich their practice.
- Examples of creative approaches that can be deployed in practice.
- The benefits of different creative practices for people with disabilities.

Before you read this issue, we encourage you to watch at least the first ten minutes of a video clip made by Dr Francis Wells, a UK cardiac surgeon, who describes his use of drawing as a tool to prepare for surgery. In 'The Secret of Drawing: Line of Enquiry' <https://www.youtube.com/watch?v=9H59cVnnF9Y&sns=em>, Dr Wells describes how he came to use the 'da Vinci cut' to improve his surgical procedures. By bringing your attention to this documentary, we are flagging our own fascination with the potency of creativity in transforming the way we understand our world and the way in which we practice. We believe that creativity can bring back the humanitarian core of rehabilitation and restore our capacity to see things from multiple perspectives.

Kind Regards,

Professor Elizabeth Kendall

elizabeth.kendall@researchreview.com.au

"The arts and humanities define who we are as a people. That is their power – to remind us of what we each have to offer, and what we all have in common. To help us understand our history and imagine our future. To give us hope in the moments of struggle and to bring us together when nothing else will."

*First Lady Michelle Obama, Honorary Chairperson,
The President's Committee on the Arts and the Humanities*

Rehabilitation Research Review™

Independent commentary by Professor Elizabeth Kendall.

Elizabeth Kendall is a Research Professor at the Menzies Health Institute Queensland, Griffith University which is home to an extensive collaborative of multi-disciplinary and cross-sectoral researchers focusing on disability, resilience, recovery, and rehabilitation. The research collaborative includes partners from Queensland Health and Department of Communities along with large non-government organisations, private companies and local authorities. She completed her PhD in 1997 on the topic of adjustment following traumatic brain injury, for which she won the Dean's Commendation for Outstanding PhD Thesis at University of Queensland. She has attracted over \$40 million in research grants and consultancies and has over 200 publications. She has been an active advocate in the field of disability for her entire working life.



Independent commentary by Dr Donna McDonald

Dr McDonald is the MAIC Qld Senior Research Fellow at Griffith University, Menzies Health Institute Queensland and a member of the RECOVER Injury Research Centre. She was the Convenor of Disability Studies at Griffith's School of Human Services and Social Work from 2011 to 2015. Donna has served as a social inclusion advisor on government, community sector and education industry panels. In 2015, Donna led an industry-university NDIS readiness research partnership to gain an improved understanding of people's lived experiences of disability services delivery together with their decision-making pathways.

Donna's extensive policy expertise has been developed throughout her thirty plus-years career as a social worker, policy advisor and manager in Federal, State and Local Government in Australia and England. Her rehabilitation and disability research priorities include exploring the teaching and community awareness potential of visual arts narratives of people with disability. In her research, Donna works with her own drawings and looks at the work of other visual artists to find new ways of understanding the history and experiences of people with disability. In March-April 2016, Donna exhibited a suite of her drawings, 'Talking back to Diane Arbus', in The 5 FIVE Show: Queensland Artists Thinking, at the Logan West Library's Artists' Walk, and again in the Four plus One Artists Exploring show at the Woollongabba Art Gallery in July 2016. Donna's books include The Art of Being Deaf: a memoir (GUP 2014) and Jack's Story (Allen & Unwin 1991).





The transformative potential of the arts in mental health recovery – an Irish research project

Authors: Sapouna L and Pamer E

Summary: The benefits of participating in the arts for people experiencing emotional stress is generally accepted as a truism. It is perhaps less well understood that recovery is not just the absence of symptoms but also a process of recovering what was lost, including meaningful roles, responsibilities and potential. In this article, the authors identify recurrent themes from their research to highlight the power of the arts in that recovery process, within and beyond service provision. Benefits include experiencing and expressing emotions; connecting with others as well as one's own self; building confidence and recognising personal strengths; providing opportunities to develop different roles other than as patients; creating accepting and respectful environments; and being part of a social community which in turn reduces stigma and isolation.

Comment: Although this research was conducted in a mental healthcare environment, their findings are generalisable to all traditional biomedical health and rehabilitation settings. They recommend developing strategic partnerships with the arts sector; fostering multidisciplinary teams that include arts practitioners, and including arts modules in health professionals' training. Most significantly, they caution that the contribution of the arts to health goes beyond art workshops towards a comprehensive cultural shift in practice "that embraces creativity and provides opportunities for people to be seen beyond the role of the 'patient'".

Reference: *Arts & Health*. 2016;8(1):1-12

[Abstract](#)

Fight like a ferret: a novel approach of using art therapy to reduce anxiety in stroke patients undergoing hospital rehabilitation

Authors: Ali K et al.

Summary: The authors argue that stroke rehabilitation needs to address the emotional and psychological wellbeing of patients as well as their physical recovery. They note the literature reports the effectiveness of using creative activity such as art, dance and music therapy to engage older people some of whom may have experienced stroke. To explore their hypothesis about the need for more emphasis on creative strategies in rehabilitation, they undertook a pilot study with six male stroke patients between the ages of 38-85 years undergoing rehabilitation at the Sussex Rehabilitation Centre.

The patients participated in twice weekly art therapy sessions for six weeks, using mixed media including a camera and iPad. The participants were encouraged to use the art materials in whatever way they wanted, though most of them needed prompting and help from the art psychotherapist. The group produced several visual art works and photographic images, as well as a short animation film. In their group sessions, the members were able to express their feelings of frustration as well as hope for physical and emotional recovery: 'fight like a ferret' as one group member said. In follow-up interviews, five participants reported enjoying the art therapy sessions but one participant expressed extreme frustration and anxiety about the experience. The authors conclude that art therapy helps most stroke patients to address their anxiety and depression.

Comment: This pilot study was small in scale and duration because of budget limitations and requires replication. However, the authors emphasised that the success of their pilot study relied on having an effective co-facilitator to link between the ward and the rest of the hospital's multidisciplinary team, as well as fostering good engagement with and by the patients. This finding is important and is common across many non-traditional interventions. Too often, activities such as art are seen as inexpensive alternatives to rehabilitation, but in the absence of appropriate facilitation, can be ineffective or even detrimental.

Reference: *Med Humanit*. 2014;40(1):56-60

[Abstract](#)



Art to heart: The effects of staff-created art on the postoperative rehabilitation of cardiovascular surgery patients

Authors: Bowen MG et al.

Summary: Post-operative complications arising from immobility result in long and costly hospital stays. As patients can experience pain and difficulties in getting out of bed and walking postoperatively, strategies are needed to motivate them to walk. Although engagement in art is used therapeutically in a number of health settings, evidence about the benefits of simply viewing visual art is limited. The purpose of this 10-month project conducted in the Vanderbilt University Medical Centre was to determine if the type of artwork displayed in hospital hallways would influence patients' walking experiences after surgery. Three different groups of patients were exposed to different art collections (1) the usual hospital art (2) no art (3) staff-created art that included paintings, drawings, photography, a collage and a quilted piece. Although there was no difference among patients in the *number of times* that they walked postoperatively, patients in the staff-created art group walked *longer distances* (median 370 feet) than patients who viewed the usual hospital artwork or had no artwork at all (median 270 feet).

Comment: This study distinguishes between the activity of art as mood-changing therapy, and the viewing of art as motivation. People can engage with creative practice by making art or by consuming (viewing or watching) art. Benefits accrue to both art-makers and art-consumers. The study also found that nursing staff reported an improvement in their work environment and pride when staff-created works were displayed. The nurses were enthusiastic about their art and wanted to show it to patients and visitors. Consequently (as the authors themselves reason), some of the increase in participant ambulation could be due to the elevation in mood of the staff rather than to the artworks alone. Nevertheless, the injection of creativity into the workplace clearly had benefits for both staff and patients.

Reference: *Medsurg Nurs*. 2015;24(5):349-55

[Abstract](#)

Scarred for life: Using art to bring humanity to trauma recovery

Authors: Meyer T et al.

Summary: Ted Meyer is the guest artist at the David Geffen School of Medicine at UCLA, aiming to teach doctors and medical students about illness through the practice of art. He invites artists to help him educate future physicians and epidemiologists about the human aspects of living with illness, disability and disease. Meyer's programme provides future doctors with a tangible understanding of living with certain disabling conditions by engaging with artists who speak about their illnesses and disabilities, their artworks, and the relationship between the two. The medical conditions represented are as diverse as the artistic media explored. Meyer's unorthodox merging of art and medicine proves that art therapy is not only helpful for patients, but for doctors as well.

Comment: This article includes images of Meyer's art and illustrates the potency of visual arts as a way of portraying the experience of illness and disabling conditions. The paper highlights the importance of using creative ways to learn, particularly when the subject matter (i.e., living with a long-term condition) may be foreign to the learner. In this situation of uncertainty, art becomes a more familiar conduit for sharing information.

Reference: *J Humanities in Rehabilitation* 2016;June 20 [Epub ahead of print]

[Abstract](#)



Talking back to Diane Arbus

Artist's bio

Donna McDonald PhD is the MAIC Qld Senior Research Fellow at Griffith University. She is also a developing art-maker.

Donna's research priorities include exploring the teaching, research and community awareness potential of visual arts narratives of people with disability and disablement. In her research, Donna works with her own drawings and examines the works of other visual artists to find new ways of understanding the history and experiences of people with disability. She is now working towards an improved understanding of the Australian visual arts history of disability and disablement.

Donna's books include 'Jack's Story' (1991) and 'The Art of Being Deaf: a memoir' (2014). She exhibited some of her drawings in *The 5 Five Show: Queensland Artists Thinking* at Logan West Library in March-April 2016 and in the *Four plus One Artists Exploring* show at the Woolloongabba Art Gallery in July 2016.

Artist's statement

In my series of mixed media drawings, 'Talking Back to Diane Arbus', I express my distress about Arbus's photos of intellectually disabled people living in an institution in North America in the late 1960s. These photos are in an anthology called 'Untitled, 1971'.

Arbus's disturbing photographs are confrontingly transgressive. She expressed delight in their 'freakery' and 'freakishness'. Her photos raise ethical dilemmas about the nature and consequences of her access to these intellectually disabled people.

My mixed-media drawings serve as a memorial to all people with a disability who have been oppressed, marginalised, excluded and mocked. I revisit several of Diane Arbus's photos, to restore the dignity and humanity of the people in them within the context of contemporary disability rights.

Figure 1



Figure 2



Figure 3



Figure 1 and 2: Three girls playing in a park: After Diane Arbus (with words from Alden Nowlan's poem, He sits on the floor of a school for the retarded). (2015).

Mixed media: charcoal, chalk and ink on facsimiles of photos and transparent paper. NFS.

Figure 3: Sad girls revisited: After Diane Arbus (with words from Alden Nowlan's poem, He sits on the floor of a school for the retarded). (2015).

Mixed media: charcoal, chalk and ink on facsimiles of photos and transparent paper. NFS.



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Professor Michael Sullivan, Ph.D., is a clinical psychologist who is currently Director of Recover Injury Research Centre at The University of Queensland, Australia. Over the past 25 years, Professor Sullivan has held appointments as Professor in departments of psychology, medicine, physical and occupational therapy and neurology. Professor Sullivan has worked as an educator, consultant, clinician, and department chair. He has served as a consultant to numerous health and safety organizations, insurance groups as well as social policy and research institutes. In 2011, he received the Award for Distinguished Contributions to Psychology as a Profession by Canadian Psychological Association (2011). He is best known for his research on psychosocial risk factors for pain-related disability, and for the development of risk-targeted interventions designed to foster occupational re-engagement following injury. One such intervention, the Progressive Goal Attainment Program (PGAP), has been included in the 18th edition of the Official Disability Guidelines (Work Loss Data Institute, 2013) as an evidenced-based approach to the management of work disability. Professor Sullivan developed the Pain Catastrophizing Scale (PCS) in 1995. The PCS has been used in more than 1000 scientific studies, it has been translated into 25 languages and is currently the most widely used measure of catastrophic thinking related to pain. He also developed the Injustice Experiences Questionnaire (IEQ). Professor Sullivan has published more than 180 scientific articles, 23 chapters and 4 books on the topic of psychosocial factors associated with disability.



Music therapy for early cognitive rehabilitation post-childhood TBI - an intrinsic mixed methods case study

Authors: Bower J et al.

Summary: Traumatic brain injury (TBI) is a leading cause of death and acquired disability in children worldwide. Agitation is common in patients with post-traumatic amnesia (PTA). Studies have shown that patients benefit from listening to music and participating in music therapy. This Australian study sought to address a gap in the research about the benefits of singing familiar songs as a music therapy intervention for children who are experiencing PTA. A qualified music therapist implemented the music therapy protocol to a 10-year-old girl who sustained an extremely severe TBI as a result of a motor vehicle accident. 'Evelyn' (not her real name) received 10 music therapy sessions over 14 consecutive weekdays. The sessions were video-recorded and analysed using video microanalysis and the Agitated Behaviour Scale. The authors found that the participant displayed four discrete categories of behaviours: Neutral, Acceptance, Recruitment and Rejection. Further analysis revealed brief but consistent and repeated periods of awareness and responsiveness to the live singing of familiar songs.

Comment: The authors acknowledge that the value of this study is severely limited by its reliance on just one participant. Nevertheless, they assert the value of using a single case study as an investigative tool. Further research with a larger sample size is needed to confirm the authors' conclusion that familiar songs may promote responsiveness and, perhaps, foster cognitive recovery in the early acute phase post-TBI.

Reference: *Developmental Neurorehabilitation* 2014;17(5):339-46

[Abstract](#)

Fostering creativity in rehabilitation

Authors: Taylor MJ

Summary: This book aims to fill a gap in the knowledge and application of how rehabilitation professionals can be more creative and innovative in their professional practice, education, and policy. The 27 chapters – several of them written by the editor – cover the history of creativity; the need for creativity from the patient's perspective; creativity and evidence-based medicine; creativity in relationships; allied health and medical practitioner experiences of creativity in rehabilitation; and specific chapters on art, music, recreational, and dance/performance therapy. The book closes with a series of practical creativity exercises that aim to foster the best possible futures for patients, practitioners and the rehabilitation professions.

Comment: This book (\$US185, hardcover) receives excellent reviews including the following: 'A huge paradigm shift is needed to get back to personal, patient-focused care. ... This shift requires the unique creativity that this scholarly text artfully describes, as clearly prescribed from the combined perspectives of practitioners, scientists and patients' (Carol M. Davis, DPT, EdD, MS, FAPTA. Professor Emerita University of Miami). It seems that we are being confronted with a constant barrage of new and complex frameworks for professional practice; person-centred practice, values-based practice, collaborative practice, recovery-oriented practice, self-management and so on. The interpretation and implementation of these complex frameworks often lag well behind the written policy. However, as this reviewer noted, creativity can act as a catalyst to shift stubborn perspectives and enable new ways of knowing that can accommodate new approaches to practice.

Reference: *Fostering Creativity in Rehabilitation. Series: Physical Medicine and Rehabilitation. 2014. Nova Science Publishers*

[Abstract](#)



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Expressive art for the social and community integration of adolescents with acquired brain injuries: a systematic review

Authors: Goyal A and Keightley ML

Summary: Adolescents with acquired brain injuries suffer from social and community withdrawal. In this systematic review, the authors examined ten studies from Canada, the USA, and the UK focused on drama-based treatments and programmes used to improve aspects of social or community integration. Most of the interventions were administered within hospitals, community schools or established institutions for the expressive arts. ‘Drama therapists’ led many of the interventions although this title was rarely defined. Only two of the studies identified a specific theoretical foundation (Jungian psychology and humanistic philosophy) for their drama-based interventions. Drama therapy was found to be effective in improving psychological health, emotional intelligence, cognitive function, and social integration, but not necessarily community integration.

Comment: The authors acknowledge that a significant limitation of their review is the low quality of the study designs, which is a common problem across all non-traditional therapies. Nevertheless, the review highlighted the effectiveness of expressive art interventions for people with difficulties in physical, emotional, cognitive, or social functioning. It is possible that sampling biases and inadequate power influenced the findings, but the data suggest that there may be value in using performance arts to promote personal and social adjustment following brain injury.

Reference: *Research in Drama Education: J Applied Theatre and Performance* 2008;13(3):337-52

[Abstract](#)



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Grief, anger, and relationality: The impact of a research-based theater intervention on emotion work practices in brain injury rehabilitation

Authors: Kontos P et al.

Summary: This Canadian evaluation study investigated the impact on neurorehabilitation practitioners of a research-based theatre intervention, a one-hour play titled, “*After the Crash*” (full details about the development of the play can be found in Colantonio A et al. *After the Crash: A Research-based Theatre Approach for Knowledge Translation on Traumatic Brain Injury. J Continuing Education in the Health Professions* 2008;28:1-6). The study focuses on therapeutic emotion work and client centred rehabilitation following TBI using research-based theatre. Theatre contributes significantly to medical education because its emotional quality makes it difficult for participants and audiences to avoid or intellectualise the struggles being portrayed. The analysis of audience responses to the play took place over three years from 2008-2011. Participants were recruited from nursing, psychology, allied health, recreational therapy, and chaplaincy. The play was developed from focus groups with survivors of TBI, their families, and health care practitioners. It portrays the complexity of TBI rehabilitation using concepts such as access to information, goal-setting, and reintegration strategies. It was intended to help the audience identify with the characters and develop empathy.

Comment: Although empirical evidence supports the effectiveness of research-based drama for learning about illness and humane patient care in various clinical areas, it is used with surprising infrequency in educational interventions to improve the quality of rehabilitation. *After the Crash* had little impact on the empathy felt by staff, but was particularly effective at improving staffs’ responses to issues involving relationality. The authors suggest the dramatic arts are well positioned to improve the efficacy of therapeutic emotion work after TBI, but also to build cultures of best practice.

Reference: *Evaluation Review* 2014;38(1):29-67

[Abstract](#)

Social context, art making processes and creative output – a qualitative study exploring how psychosocial benefits of art participation during stroke rehabilitation occur

Authors: Morris J et al.

Summary: This study explored the beliefs of stroke survivors and artists about a participatory visual arts program conducted during in-patient rehabilitation. Specifically, they aimed to identify benefits and potential mechanisms of action. They found that three components of the art intervention – the social context, art making processes and creative output – resulted in benefits for the eleven stroke survivors, aged between 61 and 90 years. Benefits for the stroke survivors included improved social interaction, enjoyment, confidence, self-efficacy, sense of achievement, mood and self-esteem. The artists commented on how the stroke survivors immersed themselves in the project and used their art to express their emotions.

Comment: The authors acknowledged the limitations of their study (small sample size, lack of cultural and social diversity, and the risk of hindsight bias as interviews were conducted some time after participation in the program). Nevertheless, the authors’ findings suggest that art may facilitate important psychosocial processes (and outcomes) that other rehabilitation approaches do not typically address.

Reference: *Disabil Rehabil.* 2016;38(7):661-72

[Abstract](#)

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Email geoff@researchreview.com.au

Phone 1300 132 322



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