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## NEUROPSYCHOLOGICAL REHABILITATION AS HISTORY IN THE MAKING\*

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**Introduction:** *Regardless of whether it is beheld in its broad or narrow sense, neuropsychological rehabilitation (NR) postulates, as a premise, the necessity to be based on knowing (and relying on) commandments of neurocognitive organization. However, the early optimism regarding the productiveness of such an approach hasn't been fulfilled either smoothly or regularly.*

**Aim:** *The aim of this review is to focus on principal hubs that channeled the evolution of neuropsychological rehabilitation towards current empirically based, realistic, and more convincing approaches to the treatment of both neurodevelopmental and acquired cognitive disturbances.*

**Methods:** *The topic is approached by comparing the main paradigms of NR (as) postulated in predominant literature and our contemporary practice.*

**Results:** *The main facets directing present shifts in doctrines of neuropsychological rehabilitation ensue from increasing data supply on research-based comparisons of diverse NR methodologies and exploration of treatment effects using neuroimaging techniques, largely accumulated during the previous decade. Neuropsychological rehabilitation in our territory has been grounded on sound theoretical bases from its outset (Bojanin, 1979) and holds true potential for further development in line with modern highest standards.*

**Conclusion:** *The theory of (neuro)cognitive organization is necessary but not sufficient precondition for NR. Neuropsychological rehabilitation requires functional models of the treatment itself; presently, their share gradually expands. The sum of knowledge enriched during the last decade involves a promise that NR might reach its true maturity in years to come.*

**Keywords:** *neuropsychological rehabilitation, evidence-based treatment, theoretical models*

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## INTRODUCTION

Albeit there are numerous examples - like Broca's attempt of rehabilitation program for aphasia or Seguin's techniques to improve the cognitive skills of children with neurodevelopmental disorders – suggesting that neuropsychological rehabilitation (NR) is as old as neuropsychology itself, it mainstreamed just about the early eighties, largely related to the expansion of theoretical models offered by cognitive neuropsychology (Ben-Yishay & Prigatano, 1990; Boake, 2003; Wilson, 2017). However, despite tenable conceptual bases of cognitive-neuropsychological rehabilitation (Coltheart et al., 2005), its practical outcomes often fell short of hopes (Malec, 1999; Prigatano et al., 1994). The last two decades have significantly remodeled the discipline; among the influences that have promoted major advances and cutting-edge developments in the field, a notable role belongs to increasing understanding of the mechanisms of plasticity in recovery and accumulation of a solid database of NR research.

## NEUROIMAGING, PLASTICITY, AND PROSPECT FOR REORGANIZATION

For decades, the idea of NR has generally followed Luria's concept of reorganization (Prigatano, 2013; Wilson, 2017), but beyond the model that enabled interventions for aphasia, disorders of motor planning, visual perception or executive functions (Luria et al., 1969; Christensen & Castano, 1996.) little was known about true mechanisms and dynamics of reorganization after injury or in erroneous development. New vistas were unlocked by introducing brain structural and especially functional imaging from the late 80s. Magnetic resonance imaging (MRI), a 'gold standard' for visualizing structural elements of the brain, informs us with growing precision of the properties of cerebral morphological reshaping of both maturational or postlesional nature (Dubois et al., 2021.; Genon et al., 2022). Applying different mathematical models on the data – as in diffusion tensor imaging (DTI) – enabled not only describing the primary orientation of white matter axonal pathways (O'Donnell et al., 2019; Sotiroglou et al., 2013) but even subtle connectivity changes in/after illness or trauma as well (Puig et al., 2020; Smits et al., 2023). In addition to task-related functional MRI (fMRI), important for relaying brain activity to specific cognitive processes (Lebreton et al., 2019), later developed resting-state fMRI has shown particular potential in mapping the brain's functional connectivity/interregional information transfer (Raimondo et al., 2021; Yang et al., 2020). Unmasking previously hidden mechanisms of brain plasticity entails, among others, dissociating structural versus functional (Dresp-Langley, 2020; Olafson et al., 2021; Stampanoni Bassi et al., 2019) or intrahemispheric versus interhemispheric reorganization (Coelho et al., 2021; Sebastianelli et al., 2017), discovering temporary pathways that can persist and replace damaged ones in early development lesions (Eyre et al., 2001; Staudt, 2007), the role of lesion timing, size, location or etiology in activating diverse reorganization mechanisms in children and adults (Batschelet et al., 2022; Sebastianelli et al., 2017; Staudt, 2007) and else.

Last but not least, the overall concept of brain organization has progressively shifted from purely modular localizationist models to connectomal accounts of cerebral processing where high-level cognitive functions are presumed to emerge through dynamic interactions between specialized functional systems (Fuster & Bressler, 2012; Herbet & Duffau, 2020). In such a milieu, previous evidence, together with the rising knowledge about molecular mechanisms supporting neural repair, have set more rational and yet more elastic scene for future NR, announcing innovative treatment approaches like targeting network patterns to enhance recovery (Guggisberg et al., 2021; Hartwigsen & Volz, 2021; van den Heuvel & Sporns, 2019) or directly aiming existing plastic potential (Jasey & Ward 2019; Lyu et al., 2021).

## RESEARCH ON NR OUTCOMES

Advances in any clinical field, NR as well, heavily depend on research arguments on the efficacy of certain therapeutic approaches. Especially in the domain of cognitive rehabilitation, the literature has long remained scarce in this respect, largely confined to general theoretical recommendations and empirical support offered primarily by narratives, small-group studies, or single case reports. Indeed, producing high-quality research in NR is heavily burdened by numerous methodological issues, including difficulties in selecting variables – consequent to a wide variety of clinical population, scope of interventions or possible outcome measures (Covington & Duff, 2021; Negrini et al., 2020; Weuve et al., 2015), problems in application of adequate randomized control trials (Arienti et al., 2021), favoring cross-sectional to more appropriate longitudinal designs (Schultz & Tate, 2013), insufficient clinical applicability of the results (Negrini et al., 2019), biases in evaluating rehabilitation (Tate & Perdices, 2017) and other. Still, in the last twenty years, NR research has been constantly growing, even at a rate exceeding research in general (Arienti, 2021), initially embracing adults with acute lesions originating from stroke or traumatic brain injuries (i.e. Cappa et al., 2005; Cicerone et al., 2000, 2005), gradually expanding to other forms of adult brain pathology and acquired cerebral lesions in children (Laatch et al., 2020; Slomine & Locascio, 2009) and, finally, to neurodevelopmental disturbances (Dandil et al., 2020). By now, this recent endeavor to provide hard data on the efficiency of NR has already offered sufficient evidence about certain restorative and compensatory strategies (i.e., Clare & Jones, 2008; Creighton et al., 2013), in defined cognitive domains (Azouvi et al., 2017; Loetscher et al., 2019) and specific pathologies (Dang et al., 2017; Markham et al., 2020; Wilson et al., 2021), even regular updating of evidence-based therapeutic recommendations (Cicerone et al., 2011, 2019). Yet, some very basic issues remain of concern, like the question of adequacy of strict methodological demands in this field (Eichler et al., 2021; Sherman et al., 2016.) or underusing imaging data (Nasios et al., 2019), particularly in NR of children (Prigatano, 2013).

## AN OLD APPROACH IN THE NEW SHOES

In addition to promoting novel paradigms in NR, fresh touchstones acquired during the last decades also decouple the old ones. As the core of the therapy has shifted from cognition to emotions (i.e., Salas et al., 2019; Shields et al., 2016) and to prioritizing patient perspectives (Patterson et al., 2016; Wilson, 2017), narrow focusing on cognitive retraining gradually dissolved while a holistic framework has strengthened to the point of prerequisite (Diller & Ben-Yishay, 2020; Marklund et al., 2019). Although no single model, theory, or framework is considered sufficient to address the complexity of issues in comprehensive holistic NR (Wilson, 2017), one approach might, in many ways, dispute this assumption: reeducation of psychomotoricity (RP), one of the oldest methods of NR. Grounded in the ideas of Dupres (1862-1921) and Vallon (1879-1962) and appearing around 1960 with the work of Julian de Ajuriaguerra (i.e., Ajuriaguerra & Bonavalot-Soubiran, 1960; Le Camus, 1994), RP integrates knowledge from neurology, psychiatry, developmental psychology and psychoanalysis into a therapeutical method crossbreeding and fusing original disciplines (Bojanin, 2016; Constant, 2007). On the practical side, RP might be of particular interest due to its deep roots in our special education and rehabilitation, where it was introduced as early as the late 70s (Bojanin, 1979) and has been widely used for decades either as the primary treatment or conjoined with other therapeutic strategies (Govedarica & Bojanin, 2000; Šćepanović & Nikolić, 2015).

Resulting from a theoretical position that places the body at the center of all learning and postulating that subtle interplay between sensation, tone, and emotion is the very heart of any mental image, RP is truly a holistic approach in its essence, thus able to overcome intricacy of coordinated interdisciplinary rehabilitation. Moreover, purported semiology and underlying mechanisms reasoned to explain motor and cognitive behavior in disharmonic development (Bojanin, 2006, 2016; Paquet & Vaivre-Douret, 2019; Reinersmann & Lucke, 2018) correspond contemporary views on complex networking underlying neurocognitive functioning (Bagarinac et al., 2019; Junker-Tschopp, 2017) and offer rational account of plasticity in maturation and carrying these processes (Raimo et al., 2019). Rehabilitation research evidence suggesting the role of specific systems in overall cognitive reviving (Beltrán et al., 2022; Moreau-Debord, 2021; Olszewska et al., 2021; Xing & Bai, 2020) additionally confirms the basic assumptions of the model. However, RP still lacks sufficient corpus of presentable and modernized empirical evidence for many reasons (Rivière, 2010), though a number of tries can already be found (Lazović, 2021; Rodriguez, 2022; Zilić & Šećić, 2022).

## CONCLUSION

NR has entered the third decade of the century with plausible empirical support and paradigms freshened by new theoretical models that improve our understanding of mechanisms of plasticity in brain injury or dysfunctional maturation. Among other things, novel positions have strengthened demands for

holistic rehabilitation programs suited to comprehensively address the specific needs of patients. Reeducation of psychomotoricity, a practice with a strong tradition and intrinsically holistic by its theoretical bases, still offers a prosperous framework for NR of the future, especially if tighter related to neurocognitive research. What is still lacking in this domain is sturdy research evidence on the effectiveness of RP, including more rational approaches to evaluation itself.

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