

Our Opinion in Clinical Study

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The most important mission of physiatrists is to help patients suffering from illness or disability. The greatest joy of physiatrists lies in making their patients healthy and happy. Some opine that physiatrists do not require much creativity when providing treatment and care to patients on a daily basis and those physiatrists do not need to be researchers. It makes me wonder if this opinion is valid.

In daily clinical practice, we encounter innumerable problems that have no interpretation or solution, no matter how many textbooks we read and how much literature we examine. Moreover, recent scientific development has been remarkable, with new diagnostic equipment being developed successively and treatment methods are also continuously advancing. Therefore, clinicians must continue to learn state-of-the-art treatment and how to use equipment and publish new findings with a research-oriented clinical approach.

Most people imagine large-scale clinical trials when referring to clinical research and may believe that this research cannot be conducted alone; however, the several thousand randomized controlled trials are no more than the accumulation of every single case. Therefore, the basics of clinical research lie in the study of patients at hand, and research is nothing more than a case report. At present, several journals solely deal with case reports, including BMJ Case Reports and Case Reports in Neurology. The number of open access journals, such as this journal, International Journal of Physical Medicine and Rehabilitation, has also increased. As a result, readers throughout the world have been able to instantly share information on extremely rare cases which may contribute to the development of medicine. We must listen to patients accurately, examine carefully, and then review symptoms case by case. Finally, based on information collected from the patients, we must provide them with the best treatment. This is the last sanctuary left to clinicians no matter how much medical devices and testing equipment progress. Case reports summarizing these clinical processes therefore form the basis of clinical medicine and are in no way inferior to papers that handle large-scale studies as mass data.

Clinicians who have written a case report even once must have learned its importance. Each one of us as a clinician must ask ourselves the following questions: did I give a correct or false diagnosis? Were there any test which should had been performed or anything overlooked? Was the selected treatment method appropriate? Should any other measure have been taken? Should I have done anything more for the patient and their family? And Should I have taken a different approach and/or talked to the patient more? As clinicians, we place emphasis on reflection each time we examine a patient in order to provide better treatment next time; thus, we must look back on the course of treatment of every case. Physiatrists who wish to provide quality care are no exception.

We would like young physiatrists in particular to acquire a habit of publishing papers that carefully summarize the treatment course of patients in their care. The acquisition of clinical skills also requires the detailed evaluation of each individual patient, the identification of issues, the setting of goals, and finally the trialing of new approaches. In rehabilitation medicine, physical impediments may vary even for the same disease, and since the personality, life history, and social background of each patient differ, you will never encounter any two patients with the same attributes. Therefore, rather than issuing instructions based only on test data and paramedical reports,

clinicians should first directly perform interviews, visual examinations, auscultation, and palpation of the patient in order to understand the pathology and subsequently evaluate the nature and severity of the disorder. Clinicians should also consider the effect of the disorder on the daily life of the patient and their family, and identify any issues that concern the patient. Further, this information should be shared with paramedics and methods should be devised to provide better treatment for the patients as a team. Discussion with coworkers is also extremely important and can lead to the discovery of clinically relevant subjects, quite a number of which may develop into future research. In any case, large-scale clinical studies cannot be performed until the patient's image is formed based on the data obtained from such a thorough clinical practice.

Clinical evidence regarding the discovery of new symptoms, the establishment of treatment methods, and the devising of tests has yet to be found in clinical settings, with many areas remaining unknown. It is completely preposterous for clinicians to carefully examine patients and gather data in order to write papers. To be honest, whichever the cases clinicians are responsible for, it is hoped that we clinicians will perform routine medical care, thoroughly evaluate each case, provide the best treatment that they can every time. Furthermore, we should perform daily clinical practice with the intention that you might publish the entire course of treatment as a paper and discuss with clinicians all over the world on line to treat patients.

Do physiatrists need to be creative and research-minded? The answer is yes. To quote a past great doctor, "a patient him/herself is a textbook of his/her disease." Physiatrists should therefore continue to write case reports and conduct clinical studies in order to resolve each question obtained from daily clinical practice. Needless to say, our another important objective is to properly pass valuable experiences down the generations in order to reciprocate the willingness of patients who entrusted us with their own bodies.

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