Royal United Hospitals Bath
NHS Foundation Trust

Rehabilitation

Current Awareness Bulletin

July 2026

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New training via MS Teams available from the Academy Library:

- **Bitesize searching databases for evidence: a quick guide to help you develop your literature searching skills**
  45 minutes. Learn how to transform a question into a search strategy, and how to find the best evidence in a database.
  Next sessions: 3rd August @ 1pm and 29th September @ 2pm

- **Simple and painless evidence into practice (BMJ Best Practice and the LKS Hub)**
  30 minutes. Learn about quick and hassle-free ways to seamlessly incorporate evidence into your daily work.
  Next sessions: 18th August @ 9am and 9th September @ 10am

- **Quickfire health literacy: communicating with patients more effectively**
  30 minutes. Learn about the communication barriers patients may encounter, and ways to ensure they get the most from their care.
  Next sessions: 7th August @ 1pm and 21st September @ 2pm

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New / Updated Guidance from NICE

Digital technologies for managing non-specific low back pain: early value assessment [NICE]
National Institute for Health and Care Excellence (NICE); 2026.
https://www.nice.org.uk/guidance/htg712/chapter/Update-information
[HealthTech guidance HTG712. Published 05 March 2024. Last updated 30 April 2026

King's pilots digital prehab for hip and knee replacement patients
Digital Health, 17 June 2026
King's College Hospital NHS Foundation Trust has launched a digital prehabilitation trial for hip and knee replacement surgery patients. 100 patients will receive personalised exercise, nutrition and psychological support through the QuestPrehab platform before operations. The year-long pilot aims to improve surgical outcomes, reduce cancellations and support elective recovery.

1. **Can't I continue to exercise here? Exploring experiences, barriers, and facilitators for physical therapists and survivors of cancer to promote exercise maintenance**

Authors: Agasi-Idenburg, S.;Joosten, M. M. J.;Hoedjes, M.;Buffart, L. M.;Kampshoff, C. S. and Stuiver, M. M.

Publication Date: 2026

Journal: Journal of Cancer Survivorship 20(4), pp. 1684–1696

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2. **ENDO-GYM: A holistic approach with pelvic floor physiotherapy and Yoga for endometriosis pain relief**

Authors: Alboni, Carlo;Comandini, Rebecca;Zoccoli, Sofia Gambigliani;Bertucci, Emma;Zanni, Gaetano;Doronzo, Ilenia;Vagnini, Claudio;Semprini, Michela;Cecchini, Virginia;Arena, Alessandro;Bertoletti, Sara;Melegari, Simona;Fabbri, Giovanna and Marca, Antonio La

Publication Date: 2026

Journal: European Journal of Obstetrics, Gynecology, and Reproductive Biology 324, pp. 115244

Abstract: Objective To retrospectively evaluate the impact of ENDO-GYM Program, which combined Yoga practice and pelvic floor physiotherapy (PFP), on women with ultrasound and/or post-operative histological diagnosis of endometriosis pain resistant to standard treatments, including surgery and hormonal therapy. Methods ENDO-GYM consisted of 12 weekly sessions over a period of 3 months, including two PFP sessions and 12 Yoga sessions. The EHP-30 questionnaires and the NRS scales collected before and after the Program were retrospectively used for this study to evaluate women's quality of life (QoL), chronic pelvic pain and dyspareunia. Results A total of 50 patients fulfilled the inclusion criteria and were included in the final analysis. At baseline, the mean total EHP-30 score was 44.9 ± 17.1 (range 13.2-88.6). After completing the ENDO-GYM Program, the mean score decreased to 39.9 ± 15.8. This reduction was statistically significant ($p < 0.001$), indicating an overall improvement in quality of life. Analysis of the EHP-30 subscales showed a significant improvement across all domains (all $p < 0.001$). Pain assessment using the NRS scale revealed that deep dyspareunia scores decreased from 7.1 ± 1.9 at baseline to 6.6 ± 2.5 at mid-intervention and 6.4 ± 2.6 at the end of the Program, with a statistically significant overall reduction ($p = 0.019$). Conclusions An integrative approach of PFP and Yoga practice can reduce pain and deep dyspareunia and improve the QoL in women with endometriosis and pain resistant to standard treatments.

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3. **Clinical evidence on integrated Chinese-Western medicine for stroke rehabilitation**

Authors: Cheung, Chun Hoi;Qin, Yishan;Yu, Xuan;Ma, Yanfang;Sun, Luyuan;Li, Haodong;Zhang, Huayu;Zhang, Jie;Chen, Yaolong and Bian, Zhaoxiang

Publication Date: 2026

Journal: Integrative Medicine Research 15(3), pp. 101358

Abstract: Background Chinese medicine (CM), notably acupuncture, Chinese herbal medicine (CHM), and moxibustion, is commonly used alongside rehabilitation therapy (RT). This study aims to summarize evidence on the effects of CM interventions, when used adjunctively with RT, on motor function, swallowing function, activities of daily living, neurological deficits, mood disorders, quality of life, and cognitive function after stroke. Methods We systematically searched five databases and eight standards-related websites (up to August 2025) for clinical

practice guidelines (CPGs), systematic reviews (SRs), and randomized controlled trials (RCTs). The study addressed 21 clinical questions (CQs) regarding integrated Chinese-Western medicine in stroke rehabilitation, evaluating CHM, acupuncture, and moxibustion combined with RT, and presented evidence summaries for two specific CQs. Quality was assessed using AGREE II, AMSTAR 2, and ROBUST-RCT, respectively. Results A total of 4316 unique studies were included, predominantly RCTs (92.9%), with acupuncture being the most frequently investigated intervention (51.7%). Methodological quality varied, with nearly a quarter of the CPGs showing moderate to high quality and most SRs demonstrate acceptable methodological standards. Across two representative CQs, evidence from CPGs, SRs, and RCTs generally suggested that integrating acupuncture or CHM with RT may improve functional outcomes compared with RT alone. Relevant guidelines also provided specific CM treatment approaches for different clinical conditions and complications. Conclusion This study provided an overview of the current evidence landscape in stroke rehabilitation. The volume of available evidence is relatively substantial, particularly for acupuncture and CHM; however, the overall quality of the evidence remains in need of improvement

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4. **'Doing dying well': Positive narratives of specialist palliative care occupational therapy from Ireland-based practitioners**

Authors: Gorman, Eoin;Daly, Clodagh and Walsh, Ciara

Publication Date: 2026

Journal: British Journal of Occupational Therapy 89(8), pp. 518–527

Abstract: Introduction: Occupational therapists working in specialist palliative care aim to enable clients with life-limiting illnesses to continue engaging in meaningful occupations. However, there is a dearth of literature illustrating positive examples of occupational therapy practice in specialist palliative care in Ireland. This study aimed to highlight the positive examples of occupational therapists assisting clients in 'doing dying well' in specialist palliative care. Method: Single semi-structured interviews were conducted with nine occupational therapists, working in six different specialist palliative care settings. Interviews were transcribed verbatim and analysed using thematic analysis. Findings: The first theme identified occupational therapists' perceptions of how clients continue to ' focus on living ' when dying. The second theme identified the core elements of ' being client-centred ' as (i) 'being present', (ii) 'developing collaborative goals' and (iii) 'supporting families and caregivers'. The third theme ' holism ' described clients' (i) 'holistic everyday occupations' and (ii) 'holistic unique occupations' in 'doing dying well'. Conclusion: Occupational therapists perceived that 'doing dying well' for clients can be facilitated by focusing on living until death, enabling continued engagement in occupations and roles. Adopting a truly client-centred and occupation-focused approach, occupational therapists can enable dying individuals to live and die as they want.

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5. **Editorial: BJOT special collection on race, culture and occupational therapy**

Authors: Lambert, Rod;Dave, Ketan;Kamalakannan, Sureshkumar;Nadarajah, Sankeetha;Owens-Atkins, Lily;Richardson, Odeth;Robin, Blaine;Teo, Jou Yin and China, Savinia

Publication Date: 2026

Journal: British Journal of Occupational Therapy 89(8), pp. 501–504

Abstract: The article focuses on the British Journal of Occupational Therapy's (BJOT) forthcoming Special Collection on Race, Culture, and Occupational Therapy, which is informed by the UK Health Security Agency's Health Inequalities in Health Protection (2025) report. This report highlights significant disparities in health outcomes and emergency admissions linked to race, ethnicity, and socioeconomic deprivation in the UK. The Special Collection aims to consolidate and promote empirical research that examines how cultural identity, race, and ethnicity influence occupational therapy practice, education, and policy, with an emphasis on culturally responsive and equitable approaches. Submissions are encouraged to align with the Royal College of Occupational Therapists (RCOT) and James Lind Alliance's Top 10 Occupational Therapy Research Priorities, addressing issues such as person-centred practice, reducing hospital admissions, and interprofessional collaboration. The collection seeks to build a robust, internationally relevant evidence base to support occupational therapy's role in addressing structural health inequalities

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6. **Occupational Therapy Services Provided to Adults Diagnosed With Kidney Disease: A Scoping Review**

Authors: Levison, Jane and Brandis, Susan

Publication Date: 2026

Journal: Journal of Renal Care 52(3), pp. e70068

Abstract: Background Chronic kidney disease and treatment have a severe and detrimental impact on life participation, reducing independence, autonomy, physical and cognitive function requiring a multidisciplinary approach. Occupational therapists have comprehensive skills in enabling independence and quality of life, yet the role in a kidney team is poorly understood. Objectives To identify occupational therapy services for adults diagnosed with kidney disease which will inform future practice, service planning and role definition. Methods Following Joanna Briggs Institute methodology for scoping reviews and the PRISMA-ScR guidelines, PubMed, Scopus, PsycINFO-OVID, ProQuest, and CINAHL were searched from inception to 15 December 2025. The population of interest was adults at any grade of kidney disease, the concept being occupational therapy services/models of care, and the context of any service setting. Results were transferred from Endnote to Covidence, duplicates removed and the title and abstract of articles screened. The full text of the remaining articles was assessed by two researchers, and themes were identified in alignment with the research questions. Results The search provided 1603 results, with 434 duplicates removed leaving 1169 articles. Following title and abstract screening, 40 papers remained for full text review, resulting in 23 studies for data extraction and analysis. Themes identified included types of occupational therapy interventions, grade of disease progression when interventions were undertaken, models of care and service location. The most reported occupational therapy roles related to activities of daily living, equipment prescription and mental health interventions. Conclusions While the occupational therapy role for patients with kidney disease is evolving worldwide, notably over the past 5 years, it is still underutilised. Further research is required to inform the development of clinical practice guidelines for clear role delineation.

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7. **The role of physiotherapists in acute post-stroke neurorehabilitation: qualitative perspectives from clinicians and stroke unit managers**

Authors: Pérez-De La Cruz, Sagrario

Publication Date: 2026

Journal: International Journal of Qualitative Studies on Health and Well-Being 21(1), pp. 2634880

Abstract: Purpose The aim of this study was to explore and compare the perspectives of both physiotherapists and medical managers regarding the professional role and clinical contributions of physiotherapy within stroke units. Method A qualitative study was conducted involving ten physiotherapists and five medical managers from stroke units. Participants shared their professional experiences concerning work performance and the perceived impact of physiotherapy on patient care. Results Thematic analysis identified four key areas for physiotherapists: specific training, professional functions, treatment modalities, and the relevance of professionalism and empathy. For medical managers, the analysis focused on their perception of physiotherapy work, their understanding of factors that enhance treatment, and assigned functions. The findings reveal a lack of standardized treatment protocols (non-heterogeneity) and emphasize the need for strong interpersonal professional relationships and high standards of professionalism. Conclusions The observed heterogeneity in practices leads to inconsistencies in patient care. Furthermore, there is a notable gap in medical managers' understanding of the specific clinical scope and technical interventions provided by physiotherapists. These findings highlight the need for coordinated rehabilitation programs and a clearer definition of the physiotherapist's role in acute stroke units to ensure equitable and comprehensive care.

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8. **Impact of Rehabilitation on Readmission Rates in Older Patients with COPD with Disability After Hospital Discharge**

Authors: Shirakawa, Chigusa;Shiroshita, Akihiro;Miyakoshi, Chisato;Uda, Kazuaki;Nagata, Kazuma;Tachikawa, Ryo;Tomii, Keisuke and Kataoka, Yuki

Publication Date: 2026

Journal: COPD 23(1), pp. 2593282

Abstract: This study aimed to evaluate the impact of rehabilitation on readmission rates among older patients requiring nursing care following with COPD following hospitalization for lower respiratory tract infection, focusing on whether initiating rehabilitation within two months post-discharge reduces readmissions. We conducted a retrospective observational study using insurance claim data in Kobe City, Japan, with a population of approximately 1.5 million. We included Patients with COPD aged 65 or older with certified care-need levels under Long-term Care Insurance system in Japan, hospitalized for lower respiratory tract infections and survived alive. Patients were classified based on their functional capacity in Activities of Daily Living (ADL). We used the extended Cox model to consider rehabilitation as time-varying exposure and assess the hazard ratios for readmission, adjusting for ADL. The ADL level was adjusted as a confounder. The survival probabilities were estimated among patients who experienced rehabilitation within two months and those who did not experience rehabilitation. Among 745 patients, 479 received rehabilitation within two months post-discharge, 105 received it later, and 161 did not receive rehabilitation. Participation in rehabilitation was associated with an increased hazard ratio for readmission (HR: 1.63, 95% CI: 1.19, 2.24), compared to those without it. The estimated survival curve of patients receiving rehabilitation within two months overlapped with that of those who did not receive rehabilitation. Rehabilitation following exacerbation in older patients with COPD who have disability may increase the risk of readmission after discharge. Healthcare providers should consider that patients with COPD with severe disability and complex needs may require staged,

individualized rehabilitation.

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9. **An evaluation of a physical therapy app for home rehabilitation.**

Authors: Siwinski, P.

Publication Date: 2026

Journal: *Annals of Agricultural & Environmental,* 33(2): 265–270.

Abstract: [In recent years, digital tools such as mobile rehabilitation applications have been introduced to support motivation and improve patient involvement in therapy. However, the additional benefits of such tools in structured rehabilitation progrmmes remain uncertain. The aim of this study is to evaluate the effect of a rehabilitation programme supported by a mobile application on patient motivation and functional outcomes compared with standard rehabilitation.]

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10. **UK occupational therapy workforce survey 2024–25: A baseline for workforce transformation.**

Authors: Taylor E.

Publication Date: 2026

Journal: British Journal of Occupational Therapy; 89(5):311–322.

Abstract [The Royal College of Occupational Therapists developed a national workforce strategy in 2024, necessitating baseline data to measure progress. Priority actions include addressing staffing shortages, enhancing the use of robust evidence to inform practice, building digital confidence, and supporting workforce motivation to help others achieve their goals. Findings provide baseline data with international relevance.]
