



Neurological Rehabilitation: Chapter 8. Motor learning principles for neurorehabilitation (Handbook of Clinical Neurology)

Tomoko Kitago, John W. Krakauer

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Neurorehabilitation is based on the assumption that motor learning contributes to motor recovery after injury. However, little is known about how learning itself is affected by brain injury, how learning mechanisms interact with spontaneous biological recovery, and how best to incorporate learning principles into rehabilitation training protocols. Here we distinguish between two types of motor learning, adaptation and skill acquisition, and discuss how they relate to neurorehabilitation. Functional recovery can occur through resolution of impairment (reacquisition of premorbid movement patterns) and through compensation (use of alternative movements or effectors to accomplish the same goal); both these forms of recovery respond to training protocols. The emphasis in current neurorehabilitation practice is on the rapid establishment of independence in activities of daily living through compensatory strategies, rather than on the reduction of impairment. Animal models, however, show that after focal ischemic damage there is a brief, approximately 3–4-week, window of heightened plasticity, which in combination with training protocols leads to large gains in motor function. Analogously, almost all recovery from impairment in humans occurs in the first 3 months after stroke, which suggests that targeting impairment in this time-window with intense motor learning protocols could lead to gains in function that are comparable in terms of effect size to those seen in animal models.

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