Version anglaise

TR03-001-EN
« Readaptation » or « rehabilitation », which term to use in French?
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Keyword: Rehabilitation

In French, the word “Réadaptation” is either employed in a restricted meaning to the function or with a global meaning as “réadaptation” in English. We often use the triad “rééducation-réadaptation-réinsertion” (the “3R”). “Rééducation” is used to call the different techniques aiming to restore the function. These techniques can include some adaptation to a new permanent dysfunction to maintain or to restore this function: walking for example, as usually or with an orthotic device is a matter for “rééducation”. “Réadaptation” often completed with “fonctionnelle” means the different ways to adjust to a new situation where the previous function is obviously changed and must be supplied by another approach: for example to use the left arm when the right one is paralysed. “Réinsertion” calls then the social component of the “réadaptation”. But the term “réadaptation” is also sometimes used in French in its broadest sense, including “rééducation” (qualified as “fonctionnelle”) and “réadaptation”, either with its restricted meaning to the function then completed by the term “réinsertion” or with a medical and social meaning. The meaning of “réadaptation” is then the same as the English term “rehabilitation”. In French “réhabilitation” refers only to the legal restoration of a person. It is time to propose a modern use for these different words in the French language, to clarify related studies and moreover to guide the legislature. The SOFMER has to get down to this work: to maintain the use of the “3R” well defined, to adopt the term “rehabilitation” with a new sense in French including medical aspects or to adopt the only term “réadaptation” in its broadest sense? This thought and the choice made are of some importance to understand physical and rehabilitation medicine among the other specialties and for all the professionals of “réadaptation” (with its broadest sense!).


TR03-002-EN
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No english abstract provided.


TR03-003-EN
The words to say « rehabilitation » in Belgium
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Keyword: Rehabilitation

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TR03-004-EN
Using the term “réadaptation”: A Quebec perspective
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TR03-005-EN
“Re-education”, “re-adaptation” and their relevance in PRM
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The question is about the words we used to explain what PRM is. Like the common sense we speak about “rééducation” or “réadaptation” but these two words are not relevant as meta-terms. The specific aims are to:
– describe with a lexicological approach the semantic meaning of these words;
– encourage clinicians to propose a terminological approach;
– identify specific semiotic in PRM 1;
– synthesize anatomy and pathology literature for PRM.

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Rehabilitation: From concepts to good use in PRM
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Keywords: Re-education; Rehabilitation; Function; Integrated care

The conceptual content of the terms rééducation and réadaptation, despite their use so natural in French, is characterized by chronic semantic instability. Both activities are defined by their purpose and maintain close relations in the function attributed to them by professionals in the health care system. Three relations are possible:
– the identity where réadaptation is confused with the English meaning of rehabilitation;
– differentiation of the concepts that respond to different objectives;
– the inclusion of re-education in the broader scope of rehabilitation.

Two ideas are emerging professional texts in a different sense of the notion of function in medicine: the first distinguishes functional re-education, which aims to recover lost functions temporarily, and functional rehabilitation, which aims to substitute if necessary for other functions. The result is a segmented view of the activity that generates the representation of a third family of activities: réinsertion, which is the share of the full integration in French “3R’s”. Systemic risk is the occupational segregation, institutional and artificial segmentation of clinical actions yet inseparable in a series of technical procedures. The integrative concept of rehabilitation disappears in legislation and regulations, confining it to SSR in which functional re-education is no more formally structured. The second develops functional re-education as included in a broader rehabilitation process, involving social interventions, and now international consistency desired by the WHO. It maintains the distinction of rehabilitation actions aiming at the restoration of function, by considering a more generic as the displacement function when walking must be abandoned. It deploys rehabilitation in an integrated continuum of care, closely entangled with the prevention, curative care and social support of disability.


1 Wirotius JM: Sémiologie des handicaps en MPR. Limoges, Editions Lambert Lucas, 2011