

PLENARY I

WED 25 OCT 4:30 – 6:30 PM



**GARY R ULICNY, PHD, FACRM**

President and CEO, GRU Healthcare

*“Rehabilitation: Where are we now and where do we need to be?”*

As professionals we tout the virtues and benefits of rehabilitation and we hear the term evidence based practice. However, if we take the time to evaluate where we are as a field it becomes clear that we have very little evidence to differentiate the outcomes of comprehensive rehabilitation from other venues. This presentation will focus on the current state of our science and is it enough to document our worth in a world that is hurtling towards demonstrating value — where have we gone wrong and what do we need to do to flourish in this new healthcare environment.

“Few are better qualified than Dr. Ulicny to tackle this critical issue and who better than ACRM to take



Gary’s challenge to pave a new path for rehab medicine and research to better serve our patients and their families.”

— Deborah Backus, PT, PhD, FACRM, Eula C. and Andrew C. Carlos MS Rehabilitation and Wellness Program at Shepherd Center

“Dr. Ulicny created a system focused on internal customer service for Shepherd employees by Shepherd employees that promotes better patient care and employee morale. He is legendary in rehabilitation and I can’t wait to hear him open the ACRM Conference this year.”



—Lynne S. Padgett, PhD, Strategic Director, Hospital Systems, American Cancer Society



PLENARY II

THU 26 OCT 8:15 – 9:30 AM



**JOSEPHINE P BRIGGS, MD**

Director, National Center for Complementary and Integrative Health (NCCIH), National Institutes of Health (NIH)

*“Integrative Medicine and Progress in Rehabilitation: People Really Matter”*

It is widely recognized that our health care system does too much of some things, and too little of others. Learning what works and for whom — finding the true balance between benefit and harm — is the charge to the biomedical research enterprise. Negative findings are as important a product of evidence-based medicine as the positives. Two examples will be explored: care of the elderly and back pain management.



2016 ACRM Plenary speaker Pamela W. Duncan, PhD, PT, Wake Forest Baptist Health, Winston-Salem, NC

“ACRM membership allows one to really engage in clinical science and team science building. It’s the way research is going in the future, and ACRM really fosters that from all different disability perspectives.”

— Stephanie A. Kolakowsky-Hayner, PhD, CBIST, FACRM ICAHN SCHOOL OF MEDICINE, MT. SINAI



“The ACRM conference is the premier rehabilitation conference in the world with an outstanding mix of research and best practices, but also the opportunity to network with national and international leaders and contribute to the field of rehabilitation through the different task forces.”

—Lance E. Trexler, PhD, FACRM DIRECTOR REHABILITATION NEUROPSYCHOLOGY, REHABILITATION HOSPITAL OF INDIANA

## PLENARY III

FRI 27 OCT 8:15 – 9:30 AM

**MAURIZIO CORBETTA, MD**

Professor and Chair of Neurology, University of Padua; Founding Director, Padua Neuroscience Center; Professor of Neurology, Radiology, Neuroscience, & Bioengineering, Washington University School of Medicine

*“Behavioral Clusters and Brain Network Mechanisms of Impairment and Recovery”*

A long-held view is that stroke causes many distinct neurological syndromes due to damage of specialized cortical and subcortical centers. However, in recent studies on a large cohort of first time stroke subjects studied longitudinally at 2 weeks, 3 and 12 months, we showed that a few clusters of behavioral deficits spanning multiple functions explained neurological impairment. These clusters are stable across recovery indicating that they represent a stable solution to describe impairment. It has been also proposed that focal lesions cause remote physiological abnormalities, but the behavioral relevance of these changes vis-a-vis structural damage is unknown. In separate studies we measured resting functional connectivity fMRI (FC), lesion topography, and behavior in multiple domains (attention, visual memory, verbal memory, language, motor, and visual), and used machine-learning models to predict neurological impairment in individual subjects. We found that visual memory and verbal memory were better predicted by FC, whereas visual and motor impairments were better predicted by lesion topography. Attention and language deficits were well predicted by both. These results link key organizational features of brain networks to brain-behavior relationships in stroke.

“I am excited about Dr. Corbetta’s Plenary session. Dr. Corbetta’s cutting edge research is central to our understanding of the brain’s functional connectivity as a basis for neurologic recovery. His work provides new insights into brain-behavior relationships, and should inspire the development of novel, effective interventions for neurocognitive disorders after TBI and stroke.”

—Keith D. Cicerone, PhD, ABPP-Cn, FACRM, Director of Neuropsychology, JFK Johnson Rehabilitation Institute



“Maurizio’s work in brain connectivity and mechanism of neural recovery in stroke is inspired and visionary, steadily advancing the field of neuro-recovery and restoration; the Italian accented delivery of information makes it incredibly easy to digest!”

—Cristina Sadowsky, MD, Kennedy Krieger Institute and Johns Hopkins School of Medicine, Baltimore MD

## PLENARY IV

WED 25 OCT 4:30 – 6:30 PM



JOHN STANLEY COULTER AWARD RECIPIENT

**JAMES H RIMMER, PHD**

Lakeshore Foundation Endowed Chair in Health Promotion & Rehabilitation Sciences; Director of Research, University of Alabama at Birmingham (UAB)

*“Pathway from Acute Rehabilitation to Lifelong Health and Wellness for People with Disabilities”*

A persistent pattern of secondary health conditions experienced by people with spinal cord injury and other disabilities has received growing attention from rehabilitation researchers. With shortened lengths of stay and multiple secondary health conditions occurring at a very high frequency post-disability, the urgency to create a self-management health promotion hub for people with spinal cord injury (SCI) and other disabilities has taken on greater importance. Dr. Rimmer will discuss how Lakeshore Foundation empowers rehabilitation professionals to provide their patients with context-driven health and wellness recommendations needed to self-manage and sustain health throughout their lifetimes. The Foundation is a health/fitness facility and residential campus committed to serving people with SCI and other physical disabilities through innovative programs, policy, advocacy and research.

“For those rehabilitation researchers and clinicians working in the field of disability and exercise, Dr. Rimmer’s talk is a “must see.” His content applies to all serving people with disability.”

—Sue Ann Sisto, PT, MA, PhD, FACRM, School of Health Technology and Management, Stony Brook University

