OCCUPATIONAL THERAPY.

BY MAJOR G. D. KERSLEY, M.D.,

Royal Army Medical Corps.

THE statement of Galen that "employment is nature's best physician and is essential to human happiness" has become almost a platitude. Yet occupational therapy is really the application of Galen's principle to modern therapeutics by utilizing crafts, trades and games in order to hasten the return of the sick and injured to a state of health in which they will be of the maximum use to the community. It is the prescription of work for specific therapeutic purposes. As but few Medical Officers have so far had much experience of occupational therapy, it has been suggested that a short summary on the subject might prove useful.

Occupational therapy has two sister schools—diversional training, or diversional occupation as it is sometimes called, and vocational training and guidance.

Diversional training consists of the use of crafts and games to maintain general body activity, stimulate interest and prevent boredom. By this means recovery may be expedited and a more favourable mental attitude maintained after physical recovery, especially in cases requiring prolonged convalescence.

Vocational training and guidance is the selection of suitable trades for disabled men and their training in those trades.

In both of these schools medical supervision is obviously necessary but in the former much of the work can be carried out by the Army Education Corps and voluntary workers. In the latter the Ministry of Labour and Ministry of Pensions are primarily concerned.

Occupational therapy itself is entirely a medical problem though it can be subdivided, with of course much overlap, into two main spheres, physical and psychological.

The value of occupational therapy as we know it to-day was first recognized during the last war and is extensively written up in the American History of the Great War. The British Association of Occupational Therapists was not however formed until 1936 and the work at first was developed more in the psychiatric than the physical field.

In the treatment of mental illness, apart from the large personal factor of the patient's interest, crafts may be chosen that are largely stimulating or sedative. Some colours for instance have definite stimulating or sedative properties. Some crafts need much concentration and contain much detail or are extremely simple. Some entail a variety of processes and give scope for initiative while in others the appeal may lie in the production of a personal luxury or of an article that will be of value to mankind.

Major Fraser in a recent lecture classified personality types and their breakdown into four common groups: (1) The Schizoid—the solitary introspective individual—often imaginative and artistic—frequently has a subconscious feeling of guilt as the result of his self love. He has a lack of external emotion and tends to withdraw further and further from the outside world. He should be strongly encouraged in his personal project in order to engender the creative spirit and bring out some emotion of interest and love for the result of his labours. (2) The Cycloid, who is moody; sometimes on the top of the world and at others in the depths of despair; often also has his emotions, especially aggression and love, repressed by an over-strict conscience. He again requires much encouragement but is more likely to choose to make an article of use to humanity as an atonement for his subconscious guilt sense. (3) The Obsessional, again, has a deep guilt sense but is over compensated and is usually over-conscientious. He is a hard worker and good at detail. He is liable to breakdown with lack of concentration. He should not be hurried in his work; the drive will return in due course. Relaxation should be encouraged. Work entailing much detail and likely to be of value to the community will probably be chosen. (4) The Hysteric, always an extrovert, a good mixer with plenty of drive, is likely to breakdown with a physical symptom such as a paralysis or loss of memory. He will be easily interested in a craft which will assist in improving his general outlook on life.

In the more important physical or orthopaedic field, crafts are chosen for the specific purpose of increasing the range of movement in a stiff joint or building up certain muscles and re-education after paralysis; in fact carrying out remedial exercises in the process of plying a craft or playing a game.

There are arguments for and against the use of occupational therapy or remedial gymnastics. Occupational therapy needs more apparatus and a more fully equipped department and many of the movements are less specific. But, in addition to the psychological advantage, and there are few serious injuries without at the same time a vestige of mental trauma, for which occupational therapy may be cited: (1) the larger part of the day during which the movement is being carried out, the mental fatigue element of repeated remedial exercises being eliminated; (2) the use of unconscious movement not calling attention to the injured part together with the coupling of the required movement with other movements producing a gradual return towards the conditions of normal life; (3) the value of the project in some cases and, more important still, the instruction in what may later become a new hobby or even a trade.

Remedial exercises, games and occupational therapy all have their uses. In a given case it is impossible to say which, or which combination, will be most satisfactory until the individual's interests and attitude are known. One man may slack at apparatus work and complain of pain in remedial classes; yet in pursuit of a craft he may persevere with the painful

movements and almost forget his discomfort. A second may hate any kind of craft work but fall an easy prey to competitive games. A third may perform well in the remedial gym but consider all occupations and games a waste of time. On the whole it may be stated that in the early stages of treatment the physiotherapy department holds sway but later occupational therapy comes into its own.

In applying crafts or games to physical treatment firstly a detailed craft analysis is needed for each piece of apparatus or tool used. This entails a knowledge of the joints moved, actively or passively, the muscles used, actively or statically, and finally the most common clinical applications.

In order to obtain the maximal physical benefit from an apparatus it may frequently have to be modified. The apparatus most economical from the point of view of labour is seldom the best for building muscle. Take for instance a loom. The optimum curative posture for the individual concerned may require that he lies on a couch and works from below, stretching upwards to do the work, and moreover the beater may be attached to weights over pulleys in order to increase the work done in pulling it up. A lathe or fretsaw may be operated by a treadle for maximal ankle movement or by a bicycle-like drive to concentrate on the knee and hip movement and building up the quadriceps.

Similarly the tool used may be varied according to the movement required. The weight of a particular tool, the hardness of the material and the length of the stroke (e.g. in planing) all vary the mechanics of the action.

The project itself is chosen with a view to the movement and strength of movement required. Thus the making of a Chinese checkers board entails much use of the brace and counter sink and wood work may be decorated by a pattern of screws (for pronation and supination) or embossed with nail head marks for a hammering exercise.

Either men or women may be trained in occupational therapy but in many ways the latter are more suitable except for overseas, Prisoners of War Camps and where heavy crafts are to be taught and here a technician may be employed under the occupational therapist. As a war-time measure the course of two and a half years has been shortened to six months for partly trained personnel such as masseurs, mental nurses and arts and crafts teachers, who must then specialize either in the mental or physical aspect of occupational therapy.

In addition to the Army Centre at present training R.A.M.C. masseurs, the training of women is also in progress for E.M.S. and private entrants at the Dorset House Centre, Barnsley Hall, Bromsgrove, and the Astley Ainslie Institute, Edinburgh, while the London school is about to reopen.

At the Army Centre the Command Specialist in Physical Medicine is supervising instruction in anatomy and physiology, elementary medicine and surgery, orthopædics and psychology, theory and application of occupational therapy and department management. In addition the following

main crafts are taught; carpentry, tinsmithing and sheet metal work, painting, wood finishing and lettering, basketry (light and willow), leather work and glove making, weaving, rug making and cord knotting. Where possible a war utility aspect is introduced e.g. by teaching splint making (metal and leather), red cross pannier making (willow basketry) and camouflage netting.

In the treatment department attached to the Centre cases with physical or psychological abnormalities are seen and assessed by the specialist in conjunction with one of the occupational therapists and the most suitable craft and also the project in that craft are selected for him, bearing in mind at the same time his interests. Moreover the type of material and tools is selected and modified so that he may obtain the greatest physical benefit from his labours. The R.A.M.C. trainees after they have learnt the crafts are present at such consultations and then assist in instructing the patient along the lines prescribed. By careful recording of progress and graduation of work the patient is steadily and happily led to more vigorous work for the affected part but the work is introduced in such a way that the movements become unconsciously a normal and natural part of everyday life rather than a somewhat guarded and thought out part of a treatment.

One cannot over emphasize the necessity for a clear conception of the uses of Occupational Therapy both for promoting physical recovery and as a means whereby disabled men may regain their self respect and once more become useful citizens.