

STARS Education and Research Alliance

CREATING KNOWLEDGE | TRANSFORMING CARE





STARS Critically Appraised Topic (CAT) Group: Rehabilitation for Functional Neurological Disorder (FND)

Specific Question:

What are the most effective interventions for improving outcomes of adults aged 18 years and over who are hospitalised with a diagnosis of FND

Clinical bottom line

Short-term (3 weeks), co-ordinated inpatient interdisciplinary rehabilitation incorporating adapted physical activity, education, and positive reinforcement is effective in improving functional independence, functional mobility and health related quality of life of community based adults with a subtype of FND (functional gait disorder), with benefits maintained at one year follow up.

Why is this important?

Functional Neurological Disorder (FND) is frequently diagnosed and its varied symptomology results in considerable impairment and distress which can result in hospitalisation. STARS staff have identified the importance of identifying the most effective interventions for improving outcomes of adults with FND who are admitted to hospital.

Inclusion Criteria

Adults with diagnosis of FND Hospitalised due to FND English language

Search dates

2014-2024

Type of Study

Studies evaluating interventions addressing FND in the target population (all available, relevant evidence considered to determine highest level of evidence available)

PICOT

	Description	Search terms
Population and Setting	Adults over 18; diagnosis of FND (regardless of co-morbidities/type) admitted to hospital (inpatient)	Refer below to detailed search strategy
Intervention or Exposure (ie what is being tested)	any intervention to target FND during hospitalisations (rehabilitation, acute wards) setting to be included.	
Comparison, if any	no or other interventions (not FND targeted)	
Outcomes of interest	all studies have measured different things (ie. Seizures, QOL, PT outcomes) FND symptom frequency, functioning, QOL and participation	
Types of studies	All	

Databases Searched

PubMed, Embase, CINAHL, Cochrane Library, PsycINFO

Date of search

19/09/24

Search Strategies (including subject headings)

PubMed 170 results

Limited English Last 10 Years

((("Conversion Disorder"[MeSH Terms] OR "functional neurological disorder*"[Title/Abstract] OR "FND"[Title/Abstract] OR "conversion disorder*"[Title/Abstract] OR "functional neurological symptom disorder*"[Title/Abstract] OR "functional movement disorder*"[Title/Abstract] OR "dissociative seizure*"[Title/Abstract] OR "pseudoseizures"[Title/Abstract] OR "PNES"[Title/Abstract] OR "pseudoseizures"[Title/Abstract] OR "PNES"[Title/Abstract] OR "NES"[Title/Abstract] OR "NES"[Title/Abstract] OR "nonepileptic seizures"[Title/Abstract] OR "non-epileptic seizures"[Title/Abstract] OR "somatoform"[Title] OR "somatoform disorder"[Title/Abstract] OR "somatic symptom disorder"[Title/Abstract] OR "neurasthenia"[Title/Abstract] OR "functional dissociative seizure*"[Title/Abstract] OR "Functional cognitive disorder"[Title/Abstract] OR "functional seizure*"[Title/Abstract]) AND ((("inpatients"[MeSH Terms] OR "hospitalization"[MeSH Terms] OR "inpatient*"[All Fields] OR "in-hospital" [Title/Abstract] OR "hospital*" [Title/Abstract] OR "ward*" [Title/Abstract] OR "acute care"[Title/Abstract] OR "admitted"[Title/Abstract]) AND ("Patient Care Team"[MeSH Terms] OR "care team*"[Title/Abstract] OR "team care"[Title/Abstract] OR "Interdisciplinary"[Title/Abstract] OR "multidisciplinary"[Title/Abstract] OR "Inter-disciplinary"[Title/Abstract] OR "multi-disciplinary"[Title/Abstract] OR "health team*"[Title/Abstract] OR "healthcare team*"[Title/Abstract] OR "Rehabilitation"[MeSH Terms] OR "Rehabilitation"[Title/Abstract] OR "physiotherap*"[Title/Abstract] OR "physical therapy modalities"[MeSH Terms] OR "physical therap*"[Title/Abstract] OR "Neurology"[MeSH Terms] OR "psychiatry"[MeSH Terms] OR "physical and rehabilitation medicine"[MeSH Terms] OR "behavior therapy"[MeSH Terms] OR "Neurology"[Title/Abstract] OR "psychiatry"[Title/Abstract] OR "psychological therapy"[Title/Abstract] OR "Psychotherapy"[MeSH Terms] OR "model of care "[Title/Abstract] OR "care model*"[Title/Abstract])) OR "Neurological Rehabilitation"[MeSH Terms])) NOT ("Infant"[MeSH Terms] OR "Child"[MeSH Terms] OR "child, preschool"[MeSH Terms] OR "infant, newborn"[MeSH Terms] OR "infan*"[Title/Abstract] OR "newborn*"[Title/Abstract] OR "new born*"[Title/Abstract] OR "perinat*"[Title/Abstract] OR "neonat*"[Title/Abstract] OR "baby"[Title/Abstract] OR "baby*"[Title/Abstract] OR "babies"[Title/Abstract] OR "toddler*"[Title/Abstract] OR "Child"[Title/Abstract] OR "child*"[Title/Abstract] OR "children*"[Title/Abstract] OR "adolescen*"[Title/Abstract] OR "juvenil*"[Title/Abstract] OR "youth*"[Title/Abstract] OR "teen*"[Title/Abstract] OR "pubescen*"[Title/Abstract] OR "pediatrics"[MeSH Terms] OR "pediatric*"[Title/Abstract] OR "paediatric*"[Title/Abstract] OR "prematur*"[Title/Abstract] OR "preterm*"[Title/Abstract])) AND ((y 10[Filter]) AND (english[Filter]))

CINAHL Complete (EBSCOhost) 80 results

Limited to English language & last 10 Years

Query Limiters/Expanders Last Run Via Results

S5 S3 NOT S4 Limiters - Publication Date: 20140101-20241231; English Language Database - CINAHL Complete 80

S4 ((MH "Child+") OR (MH "Infant+") OR (MH "Adolescence+") OR (TI infan* OR AB infan*) OR (TI newborn* OR AB newborn*) OR (TI "new born*" OR AB "new born*") OR (TI perinat* OR AB perinat*) OR (TI neonat* OR AB neonat*) OR (TI baby OR AB baby) OR (TI baby* OR AB baby*) OR (TI babies OR AB babies) OR (TI toddler* OR AB toddler*) OR (TI Child OR AB Child) OR (TI child* OR AB child*) OR (TI children* OR AB children*) OR (TI adolescen* OR AB adolescen*) OR (TI juvenil* OR AB juvenil*) OR (TI youth* OR AB youth*) OR (TI teen* OR AB teen*) OR (TI pubescen* OR AB pubescen*) OR (MH "pediatrics+") OR (TI pediatric* OR AB pediatric*) OR (TI prematur* OR AB prematur*) OR (TI preterm* OR AB preterm*)))

Database - CINAHL Complete

S3 S1 AND S2 Expanders - Apply equivalent subjects Database - CINAHL Complete 238

S2 ((MH "inpatients") OR (MH "hospitalization+") OR inpatient* OR (TI in-hospital OR AB in-hospital) OR (TI hospital* OR AB hospital*) OR (TI ward* OR AB ward*) OR (TI "acute care" OR AB "acute care") OR (TI admitted OR AB admitted)) AND ((MH "Multidisciplinary Care Team") OR (TI "care team*" OR AB "care team*") OR (TI "team care" OR AB "team care") OR (TI Interdisciplinary OR AB Interdisciplinary) OR (TI multidisciplinary OR AB multidisciplinary) OR (TI multidisciplinary) OR (TI "health team*" OR AB "health team*") OR (TI "healthcare team*" OR AB "healthcare team*") OR (MH "Rehabilitation+") OR

(TI Rehabilitation OR AB Rehabilitation) OR (TI physiotherap* OR AB physiotherap*) OR (MH "Physical Therapy+") OR (TI "physical therap*" OR AB "physical therap*") OR (MH "Neurology") OR (MH "psychiatry+") OR (MH "behavior therapy+") OR (TI Neurology OR AB Neurology) OR (TI psychiatry OR AB psychiatry) OR (TI "psychological therapy" OR AB "psychological therapy") OR (MH "Psychotherapy+") OR (TI "model of care" OR AB "model of care") OR (TI "care model*" OR AB "care model*")) Database - CINAHL Complete 103,138

S1 (MH "Somatoform Disorders") OR (TI "functional neurological disorder*" OR AB "functional neurological disorder*") OR (TI FND OR AB FND) OR (TI "conversion disorder*" OR AB "conversion disorder*") OR (TI "functional neurological symptom disorder*") OR (TI "functional movement disorder*" OR AB "functional movement disorder*") OR (TI "dissociative seizure*") OR AB "dissociative seizure*") OR (TI pseudoseizures OR AB pseudoseizures) OR (TI PNES OR AB PNES) OR (TI "psychogenic nonepileptic seizure*") OR AB "psychogenic nonepileptic seizure*") OR (TI NES OR AB NES) OR (TI "nonepileptic seizures") OR (TI "somatoform disorder") OR (TI "somatoform disorder") OR (TI "somatoform disorder") OR (TI "somatic symptom disorder" OR AB "somatic symptom disorder") OR (TI neurasthenia OR AB neurasthenia) OR (TI "functional dissociative seizure*") OR (TI "Functional cognitive disorder") OR (TI "functional seizure*") OR (TI "functional seizure*") Database - CINAHL Complete 7,625

Embase (Elsevier) 214 results

('conversion disorder'/exp OR 'functional neurological disorder*':ti,ab OR fnd:ti,ab OR 'conversion disorder*':ti,ab OR 'functional neurological symptom disorder*':ti,ab OR 'functional movement disorder*':ti,ab OR 'dissociative seizure*':ti,ab OR pseudoseizures:ti,ab OR pnes:ti,ab OR 'psychogenic nonepileptic seizure*':ti,ab OR nes:ti,ab OR 'nonepileptic seizures':ti.ab OR 'non-epileptic seizures':ti.ab OR somatoform:ti OR 'somatoform disorder':ti.ab OR 'somatic symptom disorder':ti,ab OR neurasthenia:ti,ab OR 'functional dissociative seizure*':ti,ab OR 'functional cognitive disorder':ti,ab OR 'functional seizure*':ti,ab) AND (('hospital patient'/exp OR 'hospitalization'/exp OR inpatient* OR 'in hospital':ti,ab OR hospital*:ti,ab OR ward*:ti,ab OR 'acute care':ti,ab OR admitted:ti,ab) AND ('collaborative care team'/exp OR 'care team*':ti,ab OR 'team care':ti,ab OR interdisciplinary:ti,ab OR multidisciplinary:ti,ab OR 'inter disciplinary':ti,ab OR 'multi disciplinary':ti,ab OR 'health team*':ti,ab OR 'healthcare team*':ti,ab OR 'rehabilitation'/exp OR rehabilitation:ti,ab OR physiotherap*:ti,ab OR 'physiotherapy'/exp OR 'physical therap*':ti,ab OR 'neurology'/exp OR 'psychiatry'/exp OR 'rehabilitation medicine'/exp OR 'behavior therapy'/exp OR neurology:ti,ab OR psychiatry:ti,ab OR 'psychological therapy':ti,ab OR 'psychotherapy'/exp OR 'model of care':ti,ab OR 'care model*':ti,ab) OR 'neurorehabilitation'/exp) NOT ('infant'/exp OR 'child'/exp OR 'newborn'/exp OR infan*:ti,ab OR newborn*:ti,ab OR 'new born*':ti,ab OR perinat*:ti,ab OR neonat*:ti,ab OR baby:ti,ab OR baby*:ti,ab OR babies:ti,ab OR toddler*:ti,ab OR child:ti,ab OR child*:ti,ab OR children*:ti,ab OR adolescen*:ti,ab OR juvenil*:ti,ab OR youth*:ti,ab OR teen*:ti,ab OR pubescen*:ti,ab OR 'pediatrics'/exp OR pediatric*:ti,ab OR paediatric*:ti,ab OR prematur*:ti,ab OR preterm*:ti,ab) AND [embase]/lim AND ([article]/lim OR [article in press]/lim OR [review]/lim) AND [english]/lim AND [2014-2024]/py

Cochrane Library (Wiley) 36 results Date Run: 19/09/2024 06:42:57

ID Search Hits

#1 [mh "Conversion Disorder"] OR ("functional neurological" NEXT disorder*):ti,ab OR FND:ti,ab OR ("conversion" NEXT disorder*):ti,ab OR ("functional neurological symptom" NEXT disorder*):ti,ab OR ("functional movement" NEXT disorder*):ti,ab OR ("dissociative" NEXT seizure*):ti,ab OR pseudoseizures:ti,ab OR PNES:ti,ab OR ("psychogenic nonepileptic" NEXT seizure*):ti,ab OR "nonepileptic seizures":ti,ab OR "non-epileptic seizures":ti,ab OR somatoform:ti OR "somatoform disorder":ti,ab OR "somatic symptom disorder":ti,ab OR neurasthenia:ti,ab OR ("functional dissociative" NEXT seizure*):ti,ab OR "Functional cognitive disorder":ti,ab OR ("functional" NEXT seizure*):ti,ab OR

#2 ([mh inpatients] OR [mh hospitalization] OR inpatient* OR in-hospital:ti,ab OR hospital*:ti,ab OR ward*:ti,ab OR "acute care":ti,ab OR admitted:ti,ab) AND ([mh "Patient Care Team"] OR ("care" NEXT team*):ti,ab OR "team care":ti,ab OR Interdisciplinary:ti,ab OR multidisciplinary:ti,ab OR Inter-disciplinary:ti,ab OR multi-disciplinary:ti,ab OR ("health" NEXT team*):ti,ab OR [mh Rehabilitation] OR Rehabilitation:ti,ab OR physiotherap*:ti,ab OR [mh "physical therapy modalities"] OR ("physical" NEXT therap*):ti,ab OR [mh Neurology] OR [mh psychiatry] OR [mh "physical and rehabilitation medicine"] OR [mh "behavior therapy"] OR Neurology:ti,ab OR psychiatry:ti,ab OR "psychological therapy":ti,ab OR [mh Psychotherapy] OR "model of care":ti,ab OR ("care" NEXT model*):ti,ab) OR [mh "Neurological Rehabilitation"] 37013

#3 #1 AND #2 50

[mh Infant] OR [mh Child] OR [mh "child, preschool"] OR [mh "infant, newborn"] OR infan*:ti,ab OR newborn*:ti,ab OR ("new" NEXT born*):ti,ab OR perinat*:ti,ab OR neonat*:ti,ab OR baby:ti,ab OR baby*:ti,ab OR baby*:ti,ab OR babies:ti,ab OR toddler*:ti,ab OR Child:ti,ab OR child*:ti,ab OR children*:ti,ab OR adolescen*:ti,ab OR juvenil*:ti,ab OR youth*:ti,ab OR pediatric*:ti,ab OR pediatric*:ti,ab OR pediatric*:ti,ab OR prematur*:ti,ab OR preterm*:ti,ab OR pret

#5 #3 NOT #4 with Publication Year from 2014 to 2024, in Trials 35

PsycINFO (EBSCOhost) 97 results

Limited to English language & last 10 Years

Query Limiters/Expanders Last Run Via Results

S5 S3 NOT S4 Limiters - Publication Year: 2014-2024; English language Database - APA PsycInfo

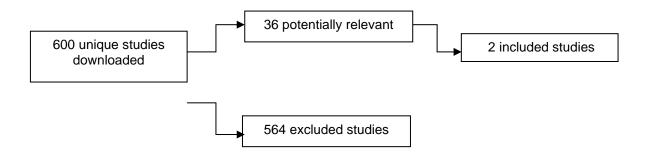
S4 ((DE "Child+") OR (DE "Infant+") OR (DE "Adolescence+") OR (TI infan* OR AB infan*) OR (TI newborn* OR AB newborn*) OR (TI "new born*" OR AB "new born*") OR (TI perinat* OR AB perinat*) OR (TI neonat* OR AB neonat*) OR (TI baby OR AB baby) OR (TI baby* OR AB baby*) OR (TI babies OR AB babies) OR (TI toddler* OR AB toddler*) OR (TI Child OR AB Child) OR (TI child* OR AB child*) OR (TI children* OR AB children*) OR (TI adolescen* OR AB adolescen*) OR (TI juvenil* OR AB juvenil*) OR (TI youth* OR AB youth*) OR (TI teen* OR AB teen*) OR (TI pubescen* OR AB pubescen*) OR (MH "pediatrics+") OR (TI pediatric* OR AB pediatric*) OR (TI prematur* OR AB prematur*) OR (TI preterm* OR AB preterm*)))

Database - APA PsycInfo 1,147,670

S3 S1 AND S2 Database - APA PsycInfo 287

((DE "Hospitalization" OR DE "Hospitalized Patients") OR inpatient* OR (TI in-hospital OR AB in-hospital) OR S2 (TI hospital* OR AB hospital*) OR (TI ward* OR AB ward*) OR (TI "acute care" OR AB "acute care") OR (TI admitted OR AB admitted)) AND (((DE "Interdisciplinary Treatment Approach")) OR (TI "care team*" OR AB "care team*") OR (TI "team care" OR AB "team care") OR (TI Interdisciplinary OR AB Interdisciplinary) OR (TI multidisciplinary OR AB multidisciplinary) OR (TI Inter-disciplinary OR AB Inter-disciplinary) OR (TI multi-disciplinary OR AB multi-disciplinary) OR (TI "health team*" OR AB "health team*") OR (TI "healthcare team*" OR AB "healthcare team*") OR (DE "Rehabilitation") OR (TI Rehabilitation OR AB Rehabilitation) OR (TI physiotherap* OR AB physiotherap*) OR (DE "Physical Therapy") OR (TI "physical therap*" OR AB "physical therap*") OR ((DE "Neurology")) OR (DE "psychiatry") OR (DE "behavior therapy") OR (TI Neurology OR AB Neurology) OR (TI psychiatry OR AB psychiatry) OR (TI "psychological therapy" OR AB "psychological therapy") OR (DE "Psychotherapy") OR (TI "model of care" OR AB "model of care") OR (TI "care model*" OR AB "care model*")) Database - APA PsycInfo (DE "Conversion Disorder") OR (TI "functional neurological disorder*" OR AB "functional neurological disorder*") OR (TI FND OR AB FND) OR (TI "conversion disorder*" OR AB "conversion disorder*") OR (TI "functional neurological symptom disorder*" OR AB "functional neurological symptom disorder*") OR (TI "functional movement disorder*" OR AB "functional movement disorder*") OR (TI "dissociative seizure*" OR AB "dissociative seizure*") OR (TI pseudoseizures OR AB pseudoseizures) OR (TI PNÈS OR AB PNES) OR (TI "psychogenic nonepileptic seizure*" OR AB "psychogenic nonepileptic seizure*") OR (TI NES OR AB NES) OR (TI "nonepileptic seizures" OR AB "nonepileptic seizures") OR (TI "non-epileptic seizures" OR AB "non-epileptic seizures") OR (TI somatoform) OR (TI "somatoform disorder" OR AB "somatoform disorder") OR (TI "somatic symptom disorder" OR AB "somatic symptom disorder") OR (TI neurasthenia OR AB neurasthenia) OR (TI "functional dissociative seizure*" OR AB "functional dissociative seizure*") OR (TI "Functional cognitive disorder" OR AB "Functional cognitive disorder") OR (TI "functional seizure*" OR AB "functional seizure*") Database - APA PsycInfo 7.000

Results



First Author, year and type of study	Population and setting	Intervention or exposure tested	Study results	Assessment of quality and comments
Jordbru, A. 2016 (RCT: waitlist control with 1-month and 1-year follow up). Intervention group n=30, WLC n=29, follow-up 1- month (n=46) and 1-year (n=40).	Population: adults aged 18-69 diagnosed with psychogenic gait disorder of duration less than 5 years. Setting: hospital outpatient clinic for gait disturbances	Inpatient elective admission for multidisciplinary rehabilitation incorporating adapted physical activity and education within a cognitive behavioural framework, including symptom explanation and positive reinforcement of normal function. Intervention duration was 3-weeks with patients informed the standard length of 3 weeks in hospital would be reduced if no improvement took place within one week.	There were statistically and clinically significant improvements in the intervention group compared to the WLC group in functional independence (mean difference 8.4 FIM, <0.001, CI 5.9-10.3), functional mobility (mean difference 6.9 FMS, p<0.0001, CI 5.5-8.3) and health-related QOL (mean difference 11.7 SF-12 physical, p<0.001, CI 7.2-16.1; mean difference 6.9 SF-12 mental, p<0.01, CI 2.1-11.8). Gains maintained at 1-month and 1-year follow-up with exception of SF-12 mental subscale.	Outcome assessor not blinded to treatment allocation. Target population did not represent other symptoms often seen in clinical practice (eg. psychological, speech), therefore findings not necessarily applicable to patients with mixed symptoms. Lacked power calculation. Small sample.
Polich, G. 2024 (Retrospective chart review)	Population: n=22 Acute-onset FND involving the motor system admitted to an inpatient rehabilitation facility. Majority had FND characteristics of limb weakness (86%) and gait disturbance (95%). Requirements for admission included ability to actively participate in and meaningfully benefit from 3 or more hours of intensive rehabilitation per day, all diagnostic testing completed before transfer. Those with functionally limiting pain or fatigue, unstable mental illness, lack of a viable home discharge plan and those in disagreement with the FND diagnosis were excluded	Inpatient multidisciplinary rehabilitation with 3 or more hours of daily therapy 5-6 days/week for 2 weeks then discharge home. The multidisciplinary team included physical medicine and rehabilitation, psychology, OT, PT, nursing, social work and case management. Psychiatry and SLP were involved on an as-needed basis. Some received SP (45%), music therapy (72%), aquatic therapy (72%), aquatic therapy (75%) and therapeutic recreation (90%). FND education and an individualised "FND toolkit" document was provided.	Statistically significant improvements pre-post rehabilitation in self-care, transfers, mobility and balance.	Retrospective cohort design with pre-post, small sample with stringent inclusion/exclusion criteria.

Note: FIM: Functional Independence Measure, FMS: Functional Mobility Scale, SF-12: Short-form Health Survey-12. QOL: quality of life; WLC: waitlist control

Summary

This rapid evidence review identified one randomised controlled trial (n=60) of an inpatient intervention for those with functional gait disorder referred to a hospital outpatient gait clinic. The intervention involved an elective admission for a 3 week multidisciplinary rehabilitation program involving education and adapted physical activity utilising a cognitive behavioural approach. This study demonstrated that the intervention led to improvements in independence, mobility and quality of life which were largely sustained at one year follow up. There is an absence of well designed, prospective, rigorous randomised controlled trials which trial the effectiveness of interventions on populations that are representative of all people with FND (patients with mixed symptoms and longer-term symptomology) or those who are admitted to hospital via the Emergency Department with acute FND symptoms. This rapid review identified several smaller heterogenous cohort studies, including the study by Polich and colleagues (2024) included in this review. The CAT group members felt that a co-ordinated approach to routinely capturing outcomes for this population across health services, including accurate coding of FND diagnoses, would be beneficial as this would enable research to be conducted on larger cohorts encompassing the broader range symptomology seen in clinical practice with people with FND diagnoses.

Implications for Practice/research

Inpatient rehabilitation comprising adapted physical activity with educational and cognitive behavioural intervention (symptom explanation and positive reinforcement) delivered by an interdisciplinary team is effective for improving independence, functional mobility and health related quality of life in people with functional gait disorder of less than 5 years duration presenting to a hospital-based outpatient gait clinic. Further controlled, rigorous research is needed to establish the effectiveness of interventions for people with broader symptomology commonly seen in clinical practice with people with FND, for those with chronic symptoms and for those hospitalised due to their FND- related disability.

What would you tweet? (140 characters)

One small RCT is current best evidence supporting elective, 3-week, inpatient, interdisciplinary rehabilitation for functional gait disorder (FND subset). More research needed.

Critical Appraisal Topic Group Team Members

Cindy James, Anh Nguyen, Scott Parkinson and Ben Hackwood (STARS Nursing)

Dharsha Petrie (STARS Physiotherapy)

Rodney Marsh (STARS Psychiatrist)

Julia McLeod (STARS Medicine)

Madeline Ratcliff (STARS Speech Pathology)

Ashlee Downs (STARS Occupational Therapy)

Emmaline Falconer (STARS, Neuropsychology)

Lars Eriksson (Librarian, The University of Queensland)

Lisa Wright (Research support officer, STARS Education and Research Alliance)

Lisa Anemaat (CCI Conjoint, STARS Education and Research Alliance)

Emmah Doig (Occupational Therapy Conjoint, STARS Education and Research Alliance)

Sarah Prescott (Post doctoral Research Fellow, STARS Education and Research Alliance)

References

Jordbru, A.A., Smestad, L.M., Klungsoyr, O., & Martinsen, E.G. (2014). Psychogenic gait disorder: a randomised controlled trial of physical rehabilitation with one-year follow-up. *Journal of Rehabilitation Medicine*, 46:181-187.

Polich, G., Zalanowski, S., Lewis, J.M., Sugarman, S., Chritopulos, K., Hebb, C., Perek, D.L., Baslet, G., Shah, P., & Herman, S. (2024). Inpatient rehabilitation for acute presentations of motor functional neurological disorder: a retrospective cohort study. *American Journal of Physical Medicine and Rehabilitation*, 103(2): 99-104.