

FOREWORD

The incidence of traumatic brain injuries in this country has reached epidemic proportions, having risen in recent years to its present annual level of about 400,000. During this same period, well-trained paramedics, with state-of-the-art life-support systems, have become increasingly able to arrive within minutes of the occurrence of head injuries and quickly transport those who have been injured to specialized trauma centers. As a consequence, there has also been a dramatic increase in the survival rate of those individuals who have received severe head injuries and who are left with permanent physical, emotional, and/or psychosocial disabilities. Many, perhaps as many as 50,000 each year, will never be able to live independently again. Most are teenagers or young adults.

Few of those who survive traumatic brain injuries are left unchanged. Long-term disruptions in the quality of their lives are common; lifelong disruptions are not uncommon. Impaired cognitive and communication functions, which may deteriorate further under the stresses and demands of everyday living, frequently persist, thereby preventing those who do survive a serious head injury from successfully resuming their pre-injury educational, vocational, and social roles and activities. As a result, recoveries are often measured in years rather than months. Within the past 10 to 15 years, increasing numbers of speech-language pathologists have joined rehabilitation teams that have been formed to help head-injured patients regain lifestyles of quality and personal meaningfulness.

This issue of *Seminars in Speech and Language*, which is the first of two issues on traumatic brain injury, is edited by Dr. Mark Ylvisaker of the College of Saint Rose in Albany, New York. He and his colleagues critically examine the role of impaired executive functions, which often accompany prefrontal injuries to the brain, in the assessment and treatment of this diverse, heterogeneous clinical population. These contributors have an enormous reservoir of clinical and research experiences with the traumatic brain injury population to share with you. They write with sensitivity, authority, and insight on the challenges that face clinicians and head-injured patients during the long rehabilitation process.

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