

*Message
from the
President*

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During my training as a clinical psychologist in the 1970s I was introduced to neuropsychology by Tony Buffery, a brilliant teacher and a comic genius. During a six month placement with Tony, I developed what has become a life-time interest in neuropsychology. The relationship between brain and behaviour, the mixture of normality and abnormality seen in the survivors of brain injury, the excitement of trying to figure out what the strengths and weaknesses are of these people and the puzzle of how to help them overcome or at least reduce their problems intrigued me then and continues to intrigue me now.

From a commonsense point of view it does not seem possible that someone with good eyesight, good language and good intellectual functioning cannot recognise her husband or thinks that an onion is a ball. Yet this behaviour is seen in people with prosopagnosia and visual object agnosia. Why do some people ignore things on the left side of space or find they can read nouns but not adjectives? In neuropsychology

we are constantly faced with problems to solve and hypotheses to test out. This is intellectually exciting.

I fear, however, that too many neuropsychologists fail to go one step further and try to find ways to overcome or reduce the problems of those people with neuropsychological difficulties to enable them to survive better in their own environments. I see rehabilitation as an integral part of neuropsychology and urge those who see it as less important than neuroimaging or less scientific than model building to think again. There can be a rich partnership between theory and practice in neuropsychological rehabilitation. We can apply scientific methodology to practical real life problems; we are rewarded by a sense of achievement when we apply our psychological and scientific expertise to helping patients and families with neurological impairments and we can make a difference to society.

*Pediatric
Neuropsychology:
A Cross-cultural
Challenge in Brazil*

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Brazil has the 14th largest economy in the world, with industrial and technological strengths as well as natural resources such as rainforests, rivers, petrol, agriculture, and dairy farms. In spite of this, the nation has millions of people living in a state of extreme poverty and 14% of them are illiterate. The first government was a monarchy (1500-1822), which then became a republic, followed by 33 years under dictatorship and since 1985 it is a consolidated Democratic Republic. Diversity is an appropriate word to describe Brazil: exotic animals, different values and manners expressed by music, food, dance, handicraft, etc. across the 26 States. Most of the natives (the 'Ameríndios') kept their habits and traditions but the demography reveals a miscellany: colonization from Portugal, immigration (Italian, Spanish, German, Japanese, Arab), invasions (French, Dutch), slavery (African); and boundaries with other South American countries. All these cultures, races and ethnic groups have together built the Brazilian personality. Surprisingly, even with so many influences, Portuguese is the language spoken by all 185 million Brazilians, as a mother tongue (IBGE, 2000).

The field of Neuropsychology has been developed in this scenario beginning in the 1950s. Considering the multiplicity of schooling conditions, socioeconomic status and environmental features, its cross-cultural nature cannot be denied. The physician Antônio Frederico Branco Lefèvre (1916-1981) wrote the first

Brazilian handbook of pediatric neurology. In the 1980s the psychologist Beatriz Lefèvre edited the first Brazilian book of pediatric neuropsychology (Lefèvre, 1989); after this the term "neuropsychology" became frequently used. However, it was only in 2004 that the Brazilian Council of Psychology regulated diagnosis, follow up, rehabilitation and research in neuropsychology as a Specialization in Psychology. Nevertheless, the formation in neuropsychology was not homogeneous. The first generation of physicians and psychologists within neuropsychology had split knowledge in the field; biological background for the former and psychometric stand for the latter; the focus was assessment based on international models. The second generation had two possible formations in neuropsychology: *latu sensu*, Specialization (clinical) and/or *strictu sensu*, Masters and Ph.D. (research). In both cases, the spotlights were the interdisciplinary status and the rehabilitation programs. The current generation is having the opportunity to learn the basics of neuropsychology during their graduation degree in psychology (Santos, 2005; 2006).

As a professor of Neurophysiology at the University of São Paulo State (UNESP, Assis campus), I teach the neurobiological bases of behavior. It has motivated undergraduate students to accomplish scientific initiation projects or clinical training at the Laboratory of Neuropsychology. We have carried out successful projects in cooperation with other Brazilian universities and with international colleagues. One example is the cross-cultural study of the Zareki-R and Zareki-K. These neuropsychological batteries were designed to examine the progress of basic skills for calculation and arithmetic and to identify and characterize the profile of mathematical abilities in children with dyscalculia.

Professor Michael von Aster published the ZAREKI (Neuropsychologische Testbatterie für Zahlenverarbeitung und Rechnen bei Kindern) in 2001.



Its development had a cross-cultural perspective from the beginning; for instance, comparative studies between German and French children (von Aster, 1997) and between Brazilian, French and Swiss children (Dellatolas et al., 2000). The Zareki was translated into different languages, including in Greek (Koumoula et al., 2004), and has revealed developmental aspects of biological and educationally based skills. Recently, the revised version, the Zareki-R (von Aster, Dellatolas, 2006) was released. It has 11 subtests, such as reverse counting, number reading, dictating, visual estimation of quantities, etc. The Zareki-K (Kindergartenversion) designed for preschool children (Weinhold-Zulauf, Schweiter, von Aster, 2003), has a structure similar to Zareki-R, and encloses 9 subtests -- for instance: counting addition, subtraction, transcoding, comparison of quantities, etc. Both batteries contain a digit span task, since the relationship between dyscalculia and working memory is established (Noël, 2005).

Our cross-cultural study assessed 160 normal children from both genders, aged from 5 to 12 years, and divided into two groups, rural and urban. The research was sponsored by FAPESP, Fundação de Amparo à Pesquisa do Estado de São Paulo, case 04/11067-0 and granted 5 undergraduate students. The preliminary results of the validation study (Santos, Paschoalini, Molina, 2006) were described in the book: *Neuropsychology and Inclusion*.

As for the Zareki-K, 42 children from 5 to 6 years old from urban and rural areas of São Paulo State with similar socioeconomic level and ability level at the 54,75 percentile \pm 14,18 (Raven Progressive Colored Matrices), were examined. No gender or group effects were found. The differences were age-related and specific for quantitative abilities dependent on schooling, such as counting, solving problems, transcoding and comparison of quantities. A cohort of 39 children aged between 9 to 10 years, VIQ=106,43 \pm 12,47 (WISC-III) was assessed with the Zareki-R. Differences were group-related; rural children had lower scores in dictating, mental calculation, and written and oral comparison of numbers. It is partially due to the better socioeconomic level of urban children.

Normative data will be concluded in 2007 and it will be useful for all Portuguese speaking countries. Additionally, we are assessing the ZAREKI-R in a sample of 40 children with learning difficulties, 40 children with epilepsy and 40 children with ADHD. A cross-cultural study between Brazilian, German and Swiss children will also be carried out in collaboration with Dr. von Aster from the Universities of Zurich and Berlin.

Current Projects

1. Investigation of developmental aspects, quality of life, and mathematical skills (Zareki-R and Zareki-K) in children with Epilepsy, is a study in collaboration with Dr. Georges Dellatolas from INSERM, Institut de la Santé et de la Recherche Médicalé, France, and Dr. Eliana Garzon and Professor Orlando Francisco Amodeo Bueno from Universidade Federal de São Paulo, Brazil.
2. Validation of the AWMA, the Automated Working Memory

Assessment. The Zareki-R scores will be contrasted to investigate the relationship between different components of working memory and mathematical skills. This is a study in collaboration with Professor Susan Gathercole from the University of York, England.

The number of Brazilian research studies in neuropsychology has increased along with clinical trials of neuroimaging, pharmacological and neuropsychological assessment, rehabilitation experiences, theoretical, normative studies and single case studies. At the moment, there are some excellent centers dedicated to teaching, research and clinical work in neuropsychology, most of which are placed at government universities. The challenge is to expand these services and make them more accessible within all of the Brazilian Health System.

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First ILC Teleconference Connects Argentina and USA

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On October 20, 2006, the ILC organized a teleconference on "Geriatric Neuropsychology," linking Córdoba (Argentina) and Virginia (U.S.A.).



The teleconference was coordinated by Lic. Alberto Fernández, who is the Regional Representative of the ILC for South America. Dr. Bernice Marcopulos, in Staunton, Virginia,

was the main speaker. Her talk comprised a general view of the different diagnostic categories in dementia, covering its epidemiology, diagnosis, and clinical presentation. Lic. Fernández, acting as a local speaker, completed the program lecturing on cognitive rehabilitation in dementia.

This experience was conceived as a way to make possible the participation of people from other parts of the world in INS scientific events. Usually, most of the participants at INS meetings are from the USA and Europe. For people from other continents, South America, Asia, and Africa, for instance, it is not easy to attend these meetings because of distances and the costs associated with such trips.

Furthermore, organizing INS conferences in these continents is not always easy for several reasons. Thus, a teleconference was thought to be a way to bring together presenters at INS meetings with an audience from these other continents. Its advantages are: it is easy to organize, it is cheaper and it allows the participation of many people.

The experience of this teleconference was highly positive. Most of the participants were psychologists recently graduated (59%) and psychology students (41%). Results of a feedback form stated that 76% of the participants rated the content of the conference as very good and excellent. Eighty-six percent of the participants rated the quality of the technology used as very good or excellent. Finally, 100% said they would like to participate in future tele-conferences.

Larger audiences might be achieved as people get used to these events. Please contact Dr. Fernández if you have ideas or suggestions for future teleconferences.

***Report from the Danish
Neuropsychological
Society***

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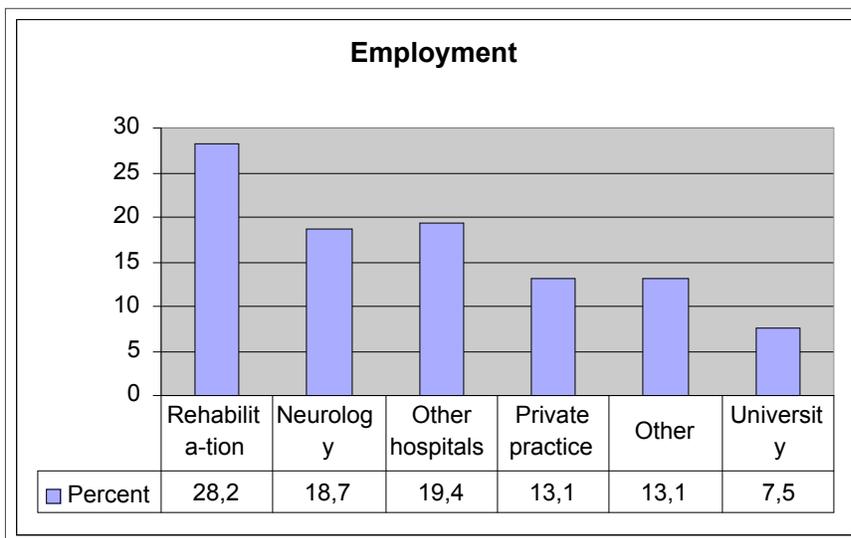
The Danish Neuropsychological Society was founded in 1988 after a series of preliminary and informal meetings. The initial group of neuropsychologists from the neurological departments at hospitals in three of Denmark's largest cities was gradually supplemented by colleagues with a primary interest in neuropsychology. In 1988, when the formal structure of the Society was determined, the group had grown from a few to over 50 members.

In 1985 Anne-Lise Christensen founded the Center for Brain Injury in Copenhagen, and during the last twenty years rehabilitation centers have been established in all parts of the country. From the beginning, neuropsychologists were key members of the staff, which not only meant that the number of neuro-psychologists at these centers increased, but also that the number of neuropsychologists at neurological and neurosurgical departments rapidly grew larger.

Today the number of society members

approaches 300. As the figure shows, most members are employed at rehabilitation centers and the number of members at neurological departments is about the same as the number of neuropsychological employees in other hospitals (e.g., psychiatric, gerontological hospitals, hospitals for specific neurological diseases). A considerable number have substituted a private practice for a hospital appointment, and a minority are affiliates to a university. Only the university in Copenhagen has a chair of neuropsychology and offers some specialization within the field as part of the Masters program.

After graduation, psychologists can systematically qualify for the title of specialist in neuropsychology over a minimum period of five years. During this specialization, candidates must work within neurology, psychiatry as well as rehabilitation, must receive supervision and complete a comprehensive course program. The postgraduate study program is administered by the Danish Psychological Association and is currently undergoing a major revision. The Neuropsychological Society organizes four yearly meetings. Three are held at neuropsychological work places around the country. In addition, a two-day annual meeting is held yearly, with lecturers from within the Society as well as from abroad.



Good contacts have been established among the neuropsychological societies in the Nordic countries, and this has resulted in several conjoint arrangements. Every two to three years, a Nordic Meeting is held where members of the different societies present their research. These meetings also include workshops and invited lectures from experts both from within Scandinavia as well as from “abroad.”

Also this year (2006), a joint Nordic meeting on neuropsychological assessment of people from different cultural backgrounds was held in Copenhagen with participants from the three Scandinavian countries as well as Finland, Estonia, and Iceland.

Neuropsychology in Sweden

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Training to be a psychologist in Sweden involves a five year master level educational program offered at seven of our universities. To become a licensed psychologist you also have to fulfill a one-year supervised internship. A specialist training program is then available and one of the subfields of specialisation is neuropsychology.

The Swedish Neuropsychological Society was founded in 1989 and has at present about 800 members. The society is associated with (but organizationally independent from) the Swedish Psychological Association. Ordinary members of the society are about 700 licensed psychologists, professionally active within the field of neuropsychology or interested in this area. We have in addition about 100 supporting members, consisting of professionals from other disciplines with interest in the field of

neuropsychology.



The society has four regional chapters, which regularly offer local neuropsychological seminars and workshops. Each year one of our regions is responsible for organizing the Annual Meeting of the society, which offers a high level scientific and educational program during 2-3 days. At this time we also have our annual business meeting. Every second year we have a special event called “Distinguished Lecturer of the Year”. A highly qualified international scientist is selected and honoured with a prize. The prize winner then gives lectures when visiting our four geographically rather widespread regions. The society also has a membership journal *Svensk Neuropsykologi*, which is published with four issues per year. Commonly, one of the annual issues is written in English with distribution to members

of all four Nordic neuropsychological societies. The web site of our society (www.neuropsykologi.org) offers continuously updated information (mainly in Swedish) about the activities of the society, including PDF-files of the membership journal.

In 2007 our society will be hosting the **Ninth Nordic Meeting in Neuropsychology**, which will take place in Göteborg (Gothenburg) August 19-22. The meeting is organized in collaboration with the other Nordic Neuropsychological Societies and with support from INS. The venue of the meeting is the Göteborg Convention Centre, located centrally in the beautiful city of Göteborg. The conference language is English. This series of meetings started in 1982, initiated by Finnish neuropsychologists. The following seven meetings have all reflected the tremendous progress that has been made in brain research including neuropsychology. This ninth meeting follows this tradition and will offer a varied scientific and educational program of interest for clinical and research-oriented psychologists as well as other professionals interested in the relation between brain and behaviour. Contributions within all fields of neuropsychology are welcome, but we encourage especially submissions related to the main theme of the meeting: **ON SPEAKING TERMS WITH THE BRAIN - Mechanisms and Disorders of Communication**.

The backbone of the meeting is a series of state-of-the-art lectures given by twelve internationally-renowned scientists. We have also invited several leading scientists from the Nordic countries to organize symposia covering front-line research. Details are given on the meeting web site at (www.neuropsykologi.org/nordic2007) Here you can also find information about the educational workshops as well as on-line registration and submission of abstracts of free communications. On behalf of the Swedish Neuropsychological Society, I welcome you to Sweden and Göteborg!

Neuropsychology Research in New Zealand

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New Zealand, or Aotearoa to give the country's Maori name, has a long tradition of research in Neuropsychology. A survey of research in our country can conveniently begin in Auckland at the top of the North Island, where the practice in clinical neuropsychology owes much to the pioneering work of the late Dorothy Gronwall, who had a long association with INS. Jenni Ogden is well known for her work on hemi neglect and her recent series of studies on the treatment and outcome of unruptured cerebral aneurysms.

There is also an active research group working with EEG and fMRI procedures to explore cognitive deficits in a range of neurological conditions. Mike Corballis, for example, is looking at interhemispheric transfer of information in patients without a corpus callosum, either as a consequence of surgery or agenesis.

Another interesting project in Auckland is the Stroke Attention Rehabilitation Trial, in which Suzanne Baker-Collo is collaborating with a number of investigators in a trial of Attention Processing Training with stroke patients. Auckland Medical School has considerable strengths in clinical research involving neurodegenerative disease, which includes the work of Lynette Tippett and her collaborators on the semantic processes in dementia and the relationship between specific cognitive deficits and regional atrophy in Huntington's disease.

In Wellington, at her base on the Massey University campus, Janet Leatham has been prominent in the study of the effects of traumatic brain injury. Her colleague Duncan Babbage has also been involved in research on the use of ecologically valid methods of assessing and delivering remediation programmes to persons with head injury. At Victoria University John McDowall has been conducting studies on implicit learning and memory in a range of persons with neurological and psychiatric disabilities. There is also an active research programme, led by Caroline Wilshire, on language deficits in persons with aphasia. This programme is aimed at understanding phonological errors.



Moving to the South Island, John Dalrymple-Alford and a group of researchers in Christchurch have extended their work on the neural basis of memory to include studies of executive deficits in patients with Parkinson's disease and mild head injuries.

In the far south, at the University of Otago in Dunedin, there is a range of ongoing neuropsychological research. This includes studies of bimanual control of movement in Parkinson's disease led by Liz Franz, and Liana Machado's work on strategic attentional processes in persons with frontal lesions. Nick Titov and Bob Knight are currently working on an attempt to build an ecologically valid procedure, the virtual street, for the assessment and rehabilitation of memory and attention deficits in persons with traumatic brain injury. In the school of Physical Education, Motohide Miyahara is conducting studies investigating the roles that attention, motor inhibition and extraneous movement play in manual coordination in developmental disorders.

There are a number of local conferences at which findings are presented. These include the annual Australasian Winter Conference on Brain Research (AWCBBR). The AWCBBR meetings are held every year at New Zealand's most popular winter resort, Queenstown.

Founded over 20 years ago, these conferences feature multidisciplinary research structured around early morning, late afternoon, and early evening presentations, leaving the rest of the day free for skiing, bungee jumping, and other activities. The 2006 programme featured symposia on motor control, brain and behaviour, neurological disorders and disease and nervous system plasticity. So if you are thinking of exploring this part of the world, the next conference is the 25th and will be held from 25 to 29 August, 2007.

Neuropsychology in Croatia

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The practice of neuropsychology in Croatia can be traced back to 1963, when Dr. Jelena Turdiu-Simunec brought to Croatia a wide range of psychological and neuropsychological experience. Throughout her career, Dr. Turdiu-Simunec had the opportunity to train and collaborate with colleagues such as D. Rapaport, T. Kohlmann, B. de Ribeaucourt, J. Perce, H. Baruch, P. Kerchbaum, A. Leischner, O. Spreen, A. L. Benton, R. M. Reitan, M. F. Beauvois, and H. Goodglass in hospital clinics and university centers located in Boston, Paris, Vienna, Bremen, Köln and Bonn. Upon her return to Croatia, she headed the first neuropsychology service within the Department of Neurology and Neuropathology at Zagreb University Medical School.

Over the years, this service also expanded into a laboratory for the research of neuropsychological, neurologic, and psychiatric disorders. This not only provided the opportunity for students to train with Dr. Turdiu-Simunec, but also a chance for neuropsychology to proliferate throughout the country, as many psychologists began to carry their neuropsychology training outside of the capital and into other cities of Croatia.

Others, such as pediatrician and psychologist Dr. Nevenka Cuturic,

helped to expand the field of pediatric neuropsychology. After the establishment of the Clinic for Pediatric Disorders in Zagreb in 1964, increasing numbers of pediatric psychologists began to evaluate, assess, and treat children with various developmental, neurologic, and psychiatric disorders from a neuropsychological perspective. Then in 1979, the 2nd International Neuropsychological Symposium was held in Dubrovnik, Croatia, where professionals from the United States and Europe collaborated in expanding the practice of neuropsychology across the globe.



Today, students enrolled in general psychology doctoral programs in Croatia have the opportunity to take courses in neuropsychology and the physiologic basis of behavior. Typically, these courses are offered through the country's main universities in Zagreb, Zadar, Osijek, and Rijeka. Students, as well as professionals, typically utilize and expand their neuropsychological skills alongside the practice of clinical psychology.

Practical experience in externship and internship settings is available in both hospital and clinical settings. The demand for such services within the country has increased amongst pediatric, adult, and geriatric populations. Through such didactic clinical experiences, students are able to collaborate not only with other colleagues within the field of psychology and neuropsychology, but

with other professionals in areas of neurology and psychiatry. As a result, Croatian professionals typically possess an eclectic approach to the assessment and treatment of their patients.

While Croatian neuropsychologists are certainly influenced by the work and approaches of such established leaders in the field as Luria, Benton, Reitan, Goodglass, and Kaplan, it is not to say that only one predominating orientation exists. Due to differences in the generalization of certain tests (i.e., language of the test and normative sample), as well as a somewhat different standard of living than in countries such as the United States, neuropsychological test materials are often difficult to obtain. Therefore, most Croatian neuropsychologists typically consider each individual patient's needs and take both a qualitative and quantitative approach to assessment.

Opportunities for the proliferation of neuropsychology within Croatia have particularly increased over the past several decades. In 2006, the Croatian Neuropsychology Group ([CNG](http://tech.groups.yahoo.com/group/cronpsych/)) was formed by professionals of Croatian descent from across the globe. The CNG is recognized by both the International Liaison Committee of the International Neuropsychological Society (INS), as well as by the Croatian Psychological Assoc. (CPA) (www.psihologija.hr).

Through organizations such as the CPA and the Croatian Institute for Brain Research amongst others, Croatia also hosts several conferences a year within the fields of psychology and neuroscience at which professionals from various countries present on issues related to various areas of psychology, neuroscience, and neuropsychology. Such opportunities to further clinical and research expertise are available through annual meetings such as the Conference of Croatian Psychologists

(http://www.psihologija.hr/konferencija_najava.asp), the International Neuropsychiatric Pula Conference (<http://www.pula-symp.com/>), and the Mind & Brain Conference (<http://www.brain.hr/>). We hope to be able to continue this professional growth through such conferences, as well as through international collaborations in both the clinical and research domains of neuropsychology.

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***The First International
Russian Children's
Health Forum
dedicated to ADHD***

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On April 13-14, 2006 "The First International Russian Children's Health Forum on ADHD" took place in Moscow. This forum was organized by the Vnimanie Foundation. The non-profit Vnimanie Foundation (Vnimanie is Russian for "attention") has been formed to assist Russian society in realizing the potential of children and young adults affected by ADHD. The Program focuses on educating Russian doctors, teachers, parents, government officials and lawmakers who are responsible for health and education. The Program's mission is to ensure that Russian children affected by ADHD are properly diagnosed, treated, educated, protected, respected and supported so that they may reach their full potential in life. The Program receives funding from private sources and multilateral agencies.

Over 500 professionals in the field of education, psychiatry, pediatrics and neurology worked together with

Russian and international scientists (including Professors Russell Barkley and Robert Barnett), representatives of the Ministry of Education and Science, Ministry of Healthcare and Social Development, Ministry of Justice, Ministry of Defense, and regional governmental bodies.

The leading Russian experts presented alarming information about the ADHD problem in Russia. According to the latest census, Russia has 30,5 million children under the age of 18. It is estimated that approximately one to two million Russian children and adolescents suffer from ADHD. This is a conservative estimate, which equals 3-7% of Russia's child population. Leading Russian doctors believe this figure may be substantially higher.



ADHD is included in the International Classification of Diseases, and is officially recognized in Russia as a Hyperkinetic disorder with attention deficit. However, Russian children are rarely diagnosed and treated specifically for ADHD due to the following factors: (1) professionals who work with ADHD have different views on the causes of the disorder, its diagnostics, correction and treatment; (2) there are some centres for ADHD diagnostics and treatment working according to their own methods, but the official methodology of ADHD diagnostics and treatment has not been developed in Russia thus far; (3) new graduates in psychology (who are employed by Russian schools and kindergartens) are often not exposed to ADHD during their training; (4) the majority of average pediatricians, neurologists, psychiatrists and psychologists have no access to up-to-date information on ADHD; (5) most

educators and parents are not aware of ADHD; (6) a vast majority of parents in Russia believe ADHD is a discipline problem rather than a medical condition. Children often cannot receive a thorough medical evaluation which could detect ADHD.

In arriving at a final diagnosis, Russian doctors often attribute ADHD to prenatal/perinatal exposure to harmful factors, brain injuries, or other environmental causes. The genetic factor is often ignored. Public opinion tends to seek the causes of ADHD in parental oversights and a poor educational system. Various methods of ADHD treatment and correction have been developed in Russia including medicinal treatment and psychological and educational correction. Research is being done into a biofeedback method. Alternative methods of treatment (osteopathy, homeopathy, food additives, etc.) that may be skeptically received by the medical community are also being developed.

Nootropics are mostly used in pharmaceutical treatment of ADHD in Russia. There is data on using a domestic psychostimulant (Sydnocarb: the generic name is mesocarb) in ADHD therapy. One of the approaches to ADHD treatment involves taking vitamins, trace elements, fatty acids, etc.

Russian doctors, educators, parents and relevant government agencies are generally unaware of or misinformed on the validity of the disorder and the existing diagnostic procedures, treatment methods, as well as the safety and efficiency of medications used in Russia and in Western countries. Most medications used in Western countries are not registered or are prohibited in Russia.

As a result of the discussion between the leading Russian and international experts as well as the presentation of the Program Expert Commission's Report on ADHD, the Forum adopted a Resolution on the importance of the

ADHD problem in Russia and basic steps towards its solution.

The Forum participants agreed that the common goal of doctors, educators and parents was to help ADHD children become valuable members of society rather than social outcasts. Sergey Filatov, The Vnimanie Foundation Program Expert Council Chairman, summarized the results of the Forum: "The Forum has become an important part of the Program's activity. It has demonstrated that in order to ensure a general reconstruction of the healthcare system, the Government will need supporters who will tackle the most vital, socially important issues, some of which are new to Russia, such as the ADHD problem. The Forum is the Vnimanie Foundation Program's first contribution to the Russian medical and educational communities and to society in general."

Report from Estonia

In a short note from Estonia, Liina Vahter reports that Estonian neuropsychologists got an acceptance for the professional standard for specialization in neuropsychology. They also continued their meetings, courses and seminars, and the collaboration with the colleagues abroad, especially from Finland. They hope to get some neuropsychological test batteries adapted into Estonian soon.



Book Review— A Festschrift Celebrating the Centennial of the Birth of Luria

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A. R. Luria and Contemporary Psychology. A Festschrift Celebrating the Centennial of the Birth of Luria. Edited by T. Akhutina, J. Glzman, L. Moscovich and D. Robbins, with a preface by J. Bruner. (2004). Nova Science Publishers.

The authors of this volume represent a group of researchers who can be called Luria's pupils. In the first part of the book, Homskaya, Zinchenko, Bratus and Amano share their memories about Luria's personality. The second section focuses on Luria's cultural-historical approach which was started by his friend and teacher L.S. Vygotsky. Among the authors a reader will find Cole, Asmolov, Davydov, Kotik and Ardila.

The third section titled: *Luria's School of neuropsychology* presents the chapters about traditional and new topics in neuropsychology: executive behavior (Glozman, Levin, Tupper), hemispheric asymmetry (Moscovich), child neuropsychology (Polykov, Semenovich), and neuropsychology of psychiatry (Korsakova). The next section deals with the problem of neuropsychological help to children with learning disabilities (Akhutina, Mikadse, Pylaeva).

The methodology and methods of Lurian neuropsychological assessment are the topic of the last section of the book including three articles by Akhutina and Tsvetkova, Glzman and

Tupper, and Agranovich. The book also has a biographical note about Luria and a glossary of Lurian terminology

Book & Journal Depository News

William Seidel, Coordinator
Book & Journal Depository
E-mail: wtswts5@yahoo.com

The Book & Journal Depository Program, coordinated by William Seidel, has established a contact to the Croatian Psychological Association and has sent several shipments of books and journals for distribution to programs in need within Croatia.

The Book and Journal Program has also purchased its first new materials for distribution (5 copies of *Neuropsychological Assessment*, 4th Ed.), as an initial step toward providing a core library to selected programs. The program has also received additional donations of materials and is updating the inventory accordingly. Please contact William Seidel if you are able to donate neuropsychological books and journals that are less than five years old.

Forthcoming Conferences

30th Annual Brain Impairment Conference

May 3-5, 2007

Brisbane, QLD, Australia

Sponsored by the Australian Society for the Study of Brain Impairment

E-mail: ndarc21@unsw.edu.au

Web site: www.assbi.com/

9th Annual Genes, Brain and Behavior Meeting

Organized by IBANGS

May 21-25, 2007

Doorwerth, The Netherlands

Website www.ibangs.org:16080/portal/index.php

Vocational Outcomes in Traumatic Brain Injury

2nd International Conference
May 24 - 26, 2007

University of British Columbia
Vancouver, BC, Canada
E-mail: dennism@intergate.ca
Web site: www.tbicvancouver.com/

X European Congress of Psychology

June 3-7, 2007
Prague, Czech Republic
<http://www.ecp2007.com>.

7th World Congress on Brain Injury

June 17-21, 2007
Jerusalem, Israel
<http://www.kenes.com/ibia07/>

INS 2007 Mid-year meeting

July 4-7, 2007
Bilbao, Spain
www.the-ins.org/meetings



4th Satellite Symposium on Neuropsychological Rehabilitation

July 9-10, 2007
San Sebastian, Spain
mperdices@nscahs.health.nsw.gov.au
Web site:
www.koenigundmueller.de

IBRO World Congress of Neuroscience

July 12-17, 2007
Melbourne, Australia
<http://www.ibro2007.org/index.html>

Würzburg Summer Academy Neuropsychology in the Community

August 8-12, 2007
Würzburg, Germany

akademie@koenigundmueller.de
koenigundmueller.de/pdf/kurs/FB070809A.pdf

Progress in Motor Control VI

August 9-12, 2007
Santos, Sao Paulo, Brazil
Web site: pmcvi.iv.fapesp.br/

9th Nordic Meeting in Neuropsychology

ON SPEAKING TERMS WITH THE BRAIN
August 19-22, 2007
Göteborg, Sweden
www.neuropsychologi.org/nordic2007/

39th EBBS meeting

September 15-19, 2007
Organized by the European Brain and Behaviour Society
Trieste, Italy
<http://www.ebbs-science.org/>

For more conference information see the ILC web site
Conferences Page at:
www.ilc-ins.org/news.shtml

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