NEWS BULLETIN 物理治療 PHYSIOTHERAPY 資訊

Volume 22 No. 2
MAR 2018 to APR 2018

Content

Theme of the Coming Issue
Scoliosis

Editorial

Scoliosis

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Scoliosis is a three-dimensional spinal deformity. It is often characterized by the lateral curvature of the spine with greater than 10 degrees and a vertebral rotation. The prevalence of females is higher than males, and females may have a relatively higher risk of curve progression. About 2 to 4% of adolescents are affected with scoliosis in the primary health setting [1]. The majority of cases are idiopathic. Body structures and functions, the levels of activity and participation, and the quality of life in people with scoliosis may be affected by this spinal deformity. Whilst the underlying causes, pathophysiological mechanism and the best treatment of scoliosis have yet been confirmed, proper and early screening and management of scoliosis remains beneficial to the patients.

Physiotherapists play an important role in the assessment, management, prevention, education and research of various scoliosis. In this issue, we have included topics of the management of adolescent idiopathic scoliosis in a local hospital and scoliosis-specific physiotherapy exercises. The recent publications [1,2,3] listed below can provide further information on the updated evidence and recommendations on clinical practice for scoliosis and its related conditions.

In addition, we are delighted to have an interview with Ms. Priscilla Poon (the immediate former HKPA President). She shared with us her life in serving the HKPA, her vision for the future of the physiotherapy profession, and her inspirations from and advice to the profession.

Finally, in the NGO corner, we have a review of physiotherapy services in relation to the ageing challenges in long-stay care homes. This provides us with recent information and insights about the development of physiotherapy service for the ageing residents in the long-stay care home environment.

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Physiotherapy Scoliosis Specific Exercises for Adolescent Idiopathic Scoliosis

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Adolescent idiopathic scoliosis (AIS) is a three-dimensional deformity of the spine, including lateral shift and vertebral rotation that affect healthy children during rapid growth at the age of 10 or later in adolescence [1,2]. In the general population, the prevalence of AIS is approximately 2 – 3% [3] and it is more commonly found in females (female/male ratio = 7:1) [3,4]. AIS is presented as unleveled shoulders, asymmetrical waist, and a visible rib hump during forward bending. The curvature is determined by measuring the Cobb angle on a standing spinal radiograph (X-ray) showing a lateral curvature of the spine exceeding 10° [3,4]. Although the etiology is still unknown, predisposing factors include hereditary and genetic factors [5] and skeletal, muscular and neurological disturbances during growth [4].

Typically, adolescents with mild curvatures do not have any symptoms, but the resulting spinal deformity has a negative impact on adolescents' self-esteem and body-image [6]. When the curvatures progress and exceed a critical threshold of 30° Cobb angle, the risk of health and social issues during adulthood increases significantly [7]. When the spinal curvatures exceed 45° in growing adolescents, surgery is generally indicated [8]. Untreated idiopathic scoliosis will progress during the growth period and even after skeletal maturity. This condition will alter the spinal mechanics and degenerative changes that lead to pain, loss of spinal mobility and functional limitation, and may result in reduced quality of life and disability [10,11]. Approximately 10% of the patients with AIS require conservative treatment and approximately 0.1-0.3% require operative correction of the deformity [3].

Physiotherapy Scoliosis Specific Exercises (PSSE) and bracing are therapeutic interventions recognized by The Society of Scoliosis Orthopaedic Rehabilitation and Treatment (SOSORT) that connect all the scoliosis approach or 'school' around the world for treating AIS patients with mild and moderate curves [11]. PSSE consist of a program of curve-specific exercise protocols which are individually adapted to the patients' curve site, magnitude and clinical characteristics [9]. These exercises are very different from generalised physiotherapy that consists of low-impact stretching and strengthening exercises only [9]. The seven major schools and their approach to PSSE were summarized in **Table 1**. They include the Lyon approach from France, the Katharina Schroth Asklepios approach from Germany, the Scientific Exercise Approach to Scoliosis (SEAS) from Italy, the Barcelona Scoliosis Physical Therapy School approach (BSPTS) from Spain, the Dobomed approach from Poland, the Side Shift approach from the United Kingdom, and the Functional Individual Therapy of Scoliosis approach (FITS) from Poland [11]. The standard features of PSSE interventions are: 1) 3-dimension self-correction; 2) Training activities of daily living (ADL); and 3) Stabilization of the corrected posture. According to the SOSORT guidelines, PSSE can be recommended as a first step to treat AIS and to prevent/limit curve progression [3]. Recent systematic reviews have shown the possible effects of PSSE interventions on reducing the Cobb angle in patients with AIS, [12-15] and two randomized controlled trial (RCT) studies have shown significant reduction in spinal deformities and improvement in self-image and quality of life [16,17]. According to the current evidence, PSSE can be used to treat AIS. However, we need more high quality research to determine the effectiveness of the various school and to determine which methods and which exercises are most beneficial for patients with AIS.

(Continued on Page 3)

School name	Principles of correction	Breathing technique	Mobilization & flexibility	Brace used	Evidence
Lyon (France)	Focus on physiotherapy exercises in preparation for brace wearing and in brace	Rotational angular breathing	Encouraging thoracic kyphosis and lumbar lordosis	3D Asymmetrical rigid torsion brace	Prospective results of 148 scoliosis cases treated with brace: effective for Cobb angle is ≥20° [18]
Schroth (Germany)	Reshape the thorax through isometric muscle activation around the prominences (the convexities) and a specific breathing technique in the collapsed areas (the concavities)	Rotational angular breathing	Rib cage, spine mobilization and lower extremities flexibility	3D Chêneau brace	RCT of 50 patients with AIS showed significant improvement in self-image and quality of life. [16]
Scientific Exercise Approach to Scoliosis (SES) (Italy)	Educate and train patients to actively self-correct their posture and to incorporate that self-correction into functional exercises	Rotational angular breathing	Pre-bracing mobilization	3D Sibilla brace (Cobb <30°) Sforzesco brace (Cobb 30°–50°)	RCT of 110 patients with AIS showed significant reduction in spinal deformities and improve quality of life.[17]
Barcelona Scoliosis Physical Therapy School (BSPTS) (Spain)	Based on the original principles of Schroth approach. The school's aim to improve the scoliotic posture via muscle activation and the RAB technique mentioned above.	Rotational angular breathing	Rib cage, spine and lower extremities flexibility	3D Rigo Chêneau brace	Case series of 50 scoliosis showed reduction in spinal angle, improved vital capacities, muscle strength and posture.[19]
Dobomed (Poland)	Mobilization of the primary curve toward curve correction with a special emphasis on 'kyphotization' of the thoracic spine and/or 'lordotization' of the lumbar spine in closed kinetic chains	Specific Rotational angular breathing in a 'phased-lock' respiration technique	Increase thoracic spine kyphosis and lumbar lordosis	3D Cheneau brace	Case series of 48 scoliosis showed reduction in Cobb angles and vertebral rotation.[20]
Side-Shift (United Kingdom)	Built on the theory that a flexible curve can be stabilized with lateral movements and that repetitive side movements of the trunk will correct the lateral deviation of the trunk along with the coronal plane	Rotational angular breathing	Principles of Maitland and myofascial release techniques	Unspecified	-
Functional Individual Therapy of Scoliosis (FITS) (Poland)	Based on a number of physiotherapeutic techniques that were selected and adapted specifically for the treatment of scoliosis. E.g. Proprioception Neuromuscular Facilitation (PNF) and myofascial release techniques	3D corrective breathing into the concavitie	Mobilization and myofascial techniques to eliminate myofascial restrictions	3D Cheneau brace	Best spinal reduction was obtained in 10-25° scoliosis.[21] Case studies of 41 with AIS showed significant decrease of Cobb angle and angle of trunk rotation was observed in close to 80 % of the subjects.[22]

Table 1. Summary of the seven major schools and their approach to PSSE (Adapted from Berdishevsky et al., 2016) [11]

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Management of Adolescent Idiopathic Scoliosis in The Duchess of Kent Children's Hospital

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Introduction

Scoliosis refers to a lateral curvature of the spine. It can be structural or non-structural. The common causes of structural scoliosis are idiopathic scoliosis, congenital scoliosis, and neuromuscular scoliosis. Idiopathic scoliosis is the most common type of scoliosis. The etiology is unknown. It is most commonly seen in the adolescent population. Scoliosis is four times more likely to find in girls than boys. It is a three-dimensional deformity of the spine with lateral curvature combined with vertebral rotation. It may be detected as a cosmetic problem because it may cause uneven shoulders, rib hump over the back, listing of the trunk, asymmetry of the waist, or un-leveled pelvis.

Different patients may present with different severity of the curve. The chance of deterioration also varies. In general, those who are skeletally immature, who have shown rapid deterioration and who have a deformity of larger curvature will have a higher chance of deterioration.

School Screening for Adolescent Idiopathic Scoliosis (AIS) in Hong Kong

This program was started in 1995 as a part of the national health services. It is administered by the Department of Health of the HKSAR using a standardized protocol designed by the Department of Orthopaedics and Traumatology of The University of Hong Kong. School children in primary five, or aged 10 years or above are eligible for joining the screening voluntarily. The screening is a 2-tier process. The first-tier is performed in Student Health Service Centers using the forward bending test and measurement of the angle of trunk rotation as the screening tools. The school children will be referred to the second-tier Special Assessment Centers if the screening result was positive in the first-tier assessment. The Duchess of Kent Children's Hospital at Sandy Bay is one of two specialized assessment centers in Hong Kong to receive referrals from this screening program.

Adolescent Idiopathic Scoliosis Management Program

A special clinic armed with orthopaedic spine specialists, pediatric surgeons, physiotherapists, orthotists, and medical social workers is regularly held to see all the new and follow up cases. Every patient will be followed up regularly at a 3- to 6-month interval until they reach skeletal maturity. Physical examinations of the spine include assessing the amount of listing, shoulder tilting and truncal shifting, the rib hump upon forward bending, the ability to perform side bending, the spinal flexibility and curve pattern, and the presence of neurological deficits. For X-ray interpretation, an increase in Cobbs angle of 5 degrees or more will be considered as significant deterioration of the curvature. The increase in truncal off balance will also be considered for customizing treatment.

The management pathway for both skeletally immature and mature scoliosis are summarized in Fig. 1. In general, bracing will be required for patients with a spine Cobbs angle within 30 to 45 degree and operation will be considered for patients with a Cobbs angle greater than that.

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Bracing will be applicable to patients with flexible scoliosis of moderate severity in deterioration. It is not applicable to patients with a severe or rigid curve. Patients will need to wear the brace for 23 hours daily until they reach skeletal maturity. Regular exercise is important to maintain and improve the flexibility of the spine in both the bracing and non-bracing groups.

Physiotherapy Management for Non-surgical AIS

Approximately 400 to 500 new cases are referred to the physiotherapy out-patient department in the DKCH annually. All these new referrals will be triaged into either the bracing or non-bracing groups. The non-bracing group will further be subdivided into the skeletal immature or the skeletal mature group.

For the non-bracing group, group education and exercise classes will be arranged. Our structured scoliosis classes consist of two sessions. The first session involves assessment, an introduction of the general concepts and management of idiopathic scoliosis, and exercise demonstration and practice. The second session involves a reassessment of their condition with a revision of the exercise and home program (Fig.2). For the group with bracing, individualized exercise session will be arranged using the named therapist approach. They will receive continuous exercise monitoring and follow up until they off bracing.

Physiotherapy assessments include postural assessment in two planes in different positions, spinal mobility, flexibility, trunk muscle strength, ligamentous tightness and neurological examinations. Examples of exercise to improve trunk flexibility include humping in 4-point kneeling, side bending in side sitting, lumber rotation in step standing and thoracic rotation in 3-point kneeling. Other examples of exercise for improving trunk muscle strength are sit up in crook lying, back extension in prone and trunk rotation in supine. Stretching of the hamstring, psoas, and iliotibial band are also taught for improving soft tissue flexibility of the peripheral joints. Selected cases will be recruited for exercise training using the 3-dimensional scoliosis specific exercise technique, which has growing evidence for its effectiveness in managing the scoliosis curve (Fig.3).

Physiotherapy for AIS requiring surgery

For cases with a curve progression despite bracing or skeletally mature cases with a spinal curvature of 45 degrees or above, surgical operation will be considered. Pre-operative physiotherapy program is important to improve and maintain the spinal flexibility to enhance better correction of deformity in the surgical intervention. It is also important to improve and maintain pulmonary function to prevent post-operative chest complications especially for cases requiring anterior spinal fusion. We will perform lung function assessment for selected cases with a substantial risk of pulmonary complications after surgery. A structured clinical pathway for AIS requiring posterior spinal fusion is recently implemented in our hospital with an emphasis on early mobilization and ambulation starting from day one post operation. They will continue to have follow-up in the physiotherapy out-patient department until the consolidation stage.

To conclude, physiotherapy plays an important role in the management of AIS by providing comprehensive services throughout their disease courses. With a growing service demand, our service scope is now expanding to cover adults with scoliosis problem as well.

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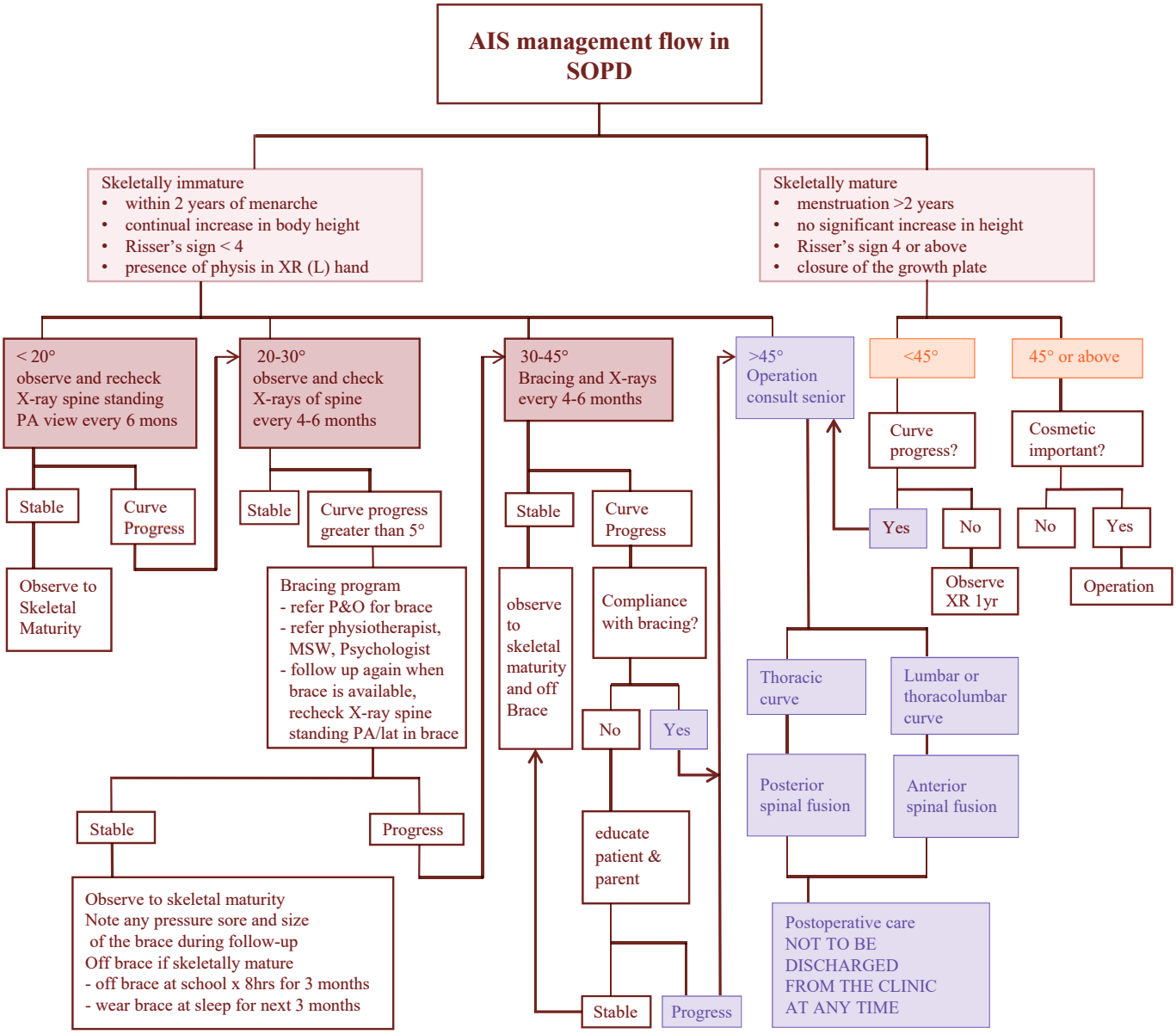

Fig.1 AIS management flow in Specialist Out-patient Department (SOPD)

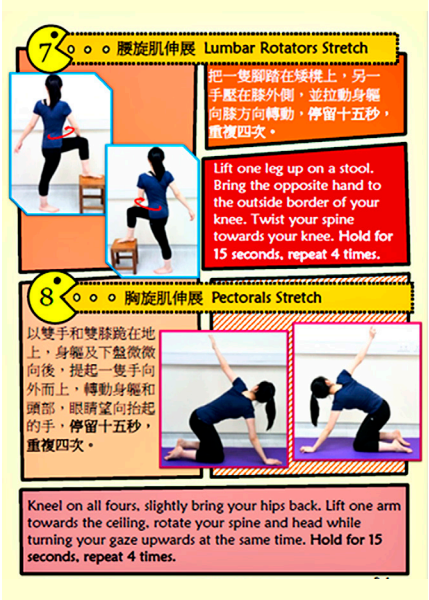

Fig.2 AIS Exercise Booklet

Fig.3 Demonstration of the three-dimensional scoliosis specific exercise

Review of Physiotherapy Service in Facing Ageing Challenges in a Long Stay Care Home

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Tuen Mun Long Stay Care Home

Tuen Mun Long Stay Care Home (Home) is a residential home specially designed to provide long term residential care and recovery oriented services to people in recovery who possess chronic mental conditions that require continuous support and rehabilitation. The main goal of the Home is to enable the residents to lead a more independent living in the community and to enhance their physical and psychosocial well-being and ultimately quality of life.

Challenge on Ageing

The Home is the first of its kind which commenced service since 1990, thus more than half of the residents are aged over 60 and the eldest resident has reached 96. Due to normal ageing, the elderly residents are noted to have different degrees of functional impairment including mobility. 13% of the residents are chair-bounded and 25% of them are even wheelchair-dependent. Foreseeing that the frails and elderly residents would become less ambulatory in the course of ageing while the facilities and the physical environment of the Home could hardly meet the needs of the ageing and frail residents, the Association solicited financial support from the Hong Kong Jockey Club Charities Trust (Trust) to commence a Home Facility Enhancement Project (Project) in 2013. Taking this opportunity, the physiotherapy service of the Home was able to further enhance to meet the increasing demand of the residents.

Enhancement of the Physiotherapy Department Services

Upon reviewing the physical conditions of the residents, it was paramount to implement measures to reduce fall risk of the ageing residents and the frails that were especially prone to fall. The Department actively participated in enhancement measures including the physical design of the living area to improve safety of the Home environment and permit independent functioning of daily activities as far as possible including adequate lighting, barrier-free access and assisted-living facilities providing an environment which ensures that quality of life is optimized in advancing age. Besides, a new Physiotherapy Treatment Room inside the new Psychogeriatric Unit is established to facilitate provision of services to the frail. With the support of the Trust, the Department is also equipped with renowned facility and equipment to enhance service quality on fall prevention and treatment to residents with mobility difficulty.

New Facility and Equipment

Engaging the residents in participating regular training programmes is always a challenge to the Department as some of them claim exercise is monotonous. New technology providing sensory stimulation can motivate them in joining the training programmes. With the commencement of the new Physiotherapy Treatment Room in 2017, several new devices equipping with virtual reality technology (Fig.1), or built-in computer interactive games (Fig.2) and motorized exercise equipment (Fig.3) are introduced into the service to engage residents and motivate them to participate in the training programmes. The equipment is effective to arouse interest of the residents with increasing attendance observed. They articulate the training activities of the new devices are stimulating. Apart from these, the newly installed ceiling hoist system linking between bedroom and bathroom in the Psychogeriatric Unit is proved to be a safe and effective facility to assist transfer of the residents, caring staff echo that the device greatly facilitates their daily works and is able to protect them from getting injury in transferring the frails. Another

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function of the ceiling hoist which can greatly benefit the residents is to provide mobilization training for them who are prone to fall or recovering from lower limbs fracture (Fig.4). Four residents have resumed independent mobilization after two months of training with this facility which is noted to be effective to speed up their rehabilitation. Other than the equipment and facility for mobilization training, the Department also equips with updated model of conventional physiotherapy instruments such as interferential therapy (IFT) and ultrasonic therapy unit which are frequently used to meet the increasing demand from the frail.

Conclusion

Comparing the number of fall incident after operation of the enhanced physiotherapy services for a year, it is encouraging to note that the improved environment and addition of equipment can reduce 14.3% of fall incident. Last but not the least, in addition to the hardware support, the Department is reviewing the assessment tools and schedule to upkeep the residents' mobility information for service planning and exploration of effective means in meeting the needs of the residents upon ageing.

Fig.1 E-Link systems adopt virtual reality technique to stimulate client to perform strengthening exercise.

Fig.2 Cyber Recumbent Bike provides a safe and comfortable platform to motivate cyclers through virtual reality interactive games.

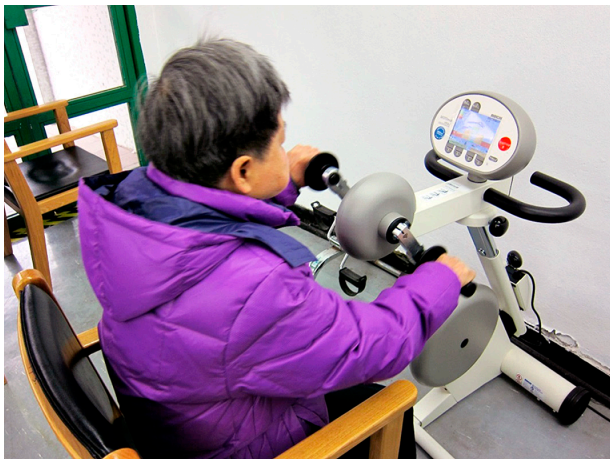

Fig.3 Motorized exercise-cycle provides assisted-active, strengthening and endurance exercise training, which is good for relieving syndrome of muscular tension and spasm.

Fig.4 A client with impaired dynamic balance is receiving walking exercise with ceiling hoist and harness system.

Disregard of Professional Responsibilities towards Patients

Bronco BUT
Honorary Legal Advisor of HKPA

Assumed Scenario

Julia was a Part Ia registered physiotherapist and member of Hong Kong Physiotherapy Association. She had practised physiotherapy in a public hospital for many years. Many of her physiotherapy classmates have gone into private practice. Last year, some orthopaedic doctors encouraged her to set up her own physiotherapy clinic and promised that they would refer patients to her, rely upon the representation and promise of the orthopaedic doctors, she set up her own physiotherapy clinic known as "Julia's Physiotherapy Clinic" in Wan Chai.

After Julia Physiotherapy Clinic was opened for business, Julia found that the orthopaedic doctors only referred a few patients to her. As a new start-up physiotherapy clinic, she did not have a broad base of patients. She found it difficult to earn sufficient fees to cover the overhead expenses of Julia Physiotherapy Clinic. She therefore adopted the strategy of prolonging the treatment sessions.

In June 2017, a patient known as Peter was referred to her for physiotherapy treatment of tennis elbow. After having provided physiotherapy treatment including ultrasound, stretching exercise, strengthening exercise for 10 sessions, Peter has shown significant improvement and he had no residual disability or symptoms. In order to keep the patient and earn fees, she continued to provide ultrasound treatment for 5 more sessions and charged Peter for ultrasound treatment.

One day, she received a Notice of Inquiry from Physiotherapists Board saying that: "Julia, being a Part Ia physiotherapist, disregarded your professional responsibility to treat or care for a patient known as Peter or otherwise neglected your professional duties and responsibilities by continuation of physiotherapy services beyond the point of possible benefit contrary to Section 2 of Part II of the Code of Practice and in relation of the facts alleged, you have been guilty of unprofessional conduct.

Code of Practice

The Physiotherapists Board has promulgated the Code of Practice for physiotherapists to observe and follow. The purpose of the Code is to provide guidance for conduct and relationships in carrying out the professional responsibilities consistent with the professional obligations of the profession.

A registered physiotherapist should observe the basic ethical principles outlined in Part I of the Code; understand the meaning of "unprofessional conduct" explained in Part II; and be aware of the conviction and forms of professional misconduct detailed in Part III which may lead to disciplinary proceedings.

A person who contravenes any part of the Code of Practice may be subject to inquiries held by the Board but the fact that any matters not mentioned in the Code, shall not preclude the Board from judging a person to have acted in an unprofessional or improper manner by reference to those matters.

Section 5 of Part III of the Code of Practice

By Section 8 in Part II, the Board has made known that disciplinary proceedings may be instituted in any case in which a physiotherapist appears to have disregarded his professional responsibility to treat or care for a patient or otherwise to have neglected his professional duties and responsibilities. For guidance purpose, the Board would consider the following example as constituting the offence of disregarding professional responsibilities towards patients.

"Continuation of physiotherapy services beyond the point of possible benefit."

Discussions

Julia could not justify why she continued providing ultrasound treatment although tennis elbow had already resolved and there was no indication to continue with ultrasound treatment. Under such circumstances, Julia pleaded guilty to the charge.

Physiotherapists should make sure that they are fully conversant with the Code of Practice and double check the Code of Practice so as not to put themselves at risk of contravening the Code of Practice. No matter how busy they are, they should double ensure that they did not breach the Code of Practice.

An Interview with Priscilla POON

Interviewee : Ms. Priscilla POON
Interviewer : Ms. Winnie LEE and Ms. Wing Hei HUI (Physiotherapy Year 2 Students)
Venue : PolyU GH014

An Unexpected Path to be a Physiotherapist

Having been the President of the Hong Kong Physiotherapy Association (HKPA) for 10 years, Priscilla is apparently born to be a professional physiotherapist. However, Priscilla once decided to be a company secretary in secondary school owing to her mother's will. In fact, the hospitals were involved in money laundering in that generation. Finally, thanks to Priscilla's Form 6 class teacher who persuaded her to pursue the road of healthcare professional, which made her determined to use her knowledge to contribute the society. Priscilla revealed that studying Physiotherapy (PT) was never an easy road. Priscilla did not get results with flying colours, but her supervisor inspired her the most and brought her potential to the full. It was her supervisor in MacLehose Medical Rehabilitation Centre (MMRC) who made her realizes what she wanted to do the most and encouraged her to take part in the HKPA in addition to teaching her hardware skills.

Life in the HKPA

Time flies. Priscilla has already been in the HKPA for two decades and has been the President for 10 years. She stated initially she refused to join the HKPA as she had no interest and was busy with her master studies. Eventually, she had been the secretary of the HKPA and started to be intrigued by the interests and paramountcy of conferences as she was more familiar with the physiotherapy profession. She was impressed by the previous presidents and Executive Committee members who were very devoted to the work in HKPA. Thus, she wanted to take up the role of President to lead and work with the enthusiastic colleagues. She recalled few memorable moments in the HKPA including the issue of opening classes for the master programme when the colleagues could not reach a consensus and it ended up in a dilemma.

However, considering that there is a blistering programme for non-JUPAS students and funding from Non-Government Organization (NGO), they finally conceded to try. The most remarkable memory is the issue of human anatomy laboratory at the room Y1444. Not until this did she realize private clinicians, Hospital Authority (HA) and schools are indivisible, and every stakeholder have to put our heads together to strike a balance. She sincerely hoped that all PT graduates can be more dedicated to the HKPA and our Physiotherapy society.

Priscilla is very open-minded. Even though Priscilla's presidency has come to an end and she needs to hand over to the next generation, she believes that only through this process the next generation can make a breakthrough. It is high time she relaxed and went on vacation during holidays, which was impossible when serving in the HKPA. However, she is always willing to provide support and help to the next generation in terms of holding activities, human resources, lobbying and connection.

Seeing Physiotherapy in the Foreseeable Future

Regarding to the prospective future of physiotherapy profession, Priscilla thinks that owing to the aging population, there would be many opportunities for physiotherapists to widen our horizon. It is regrettable that we still do not have open access for physiotherapists as there

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would be a great implication if referral is always needed. To strike for the open access for our profession, we also need open-minded politicians who are more willing to accept new changes and challenges to fight for it apart from us, the physiotherapists. However, Priscilla did not believe that as soon as we, the physiotherapists, will dominate the market after open access is approved since she believed that we are able to interpret what we can handle and whether the cases should be referred to other medical professionals. The market will not be dominated but be expanded. This will create a win-win situation.

When being asked about the opinions on the opening of Physiotherapy programme in Tung Wah College, Priscilla tended to view this issue from different aspects. She stated that in nowadays community, people are becoming increasingly familiar with the PT profession. Owing to the aging population, the public and private demands for physiotherapists is increasing rapidly. Moreover, more senior physiotherapists are retiring, combined with the extra beds in HA which means more physiotherapists are constantly needed for the field. Opening a new PT programme in Tung Wah College can indeed nurture more physiotherapists to alleviate the manpower shortage problems, whereas she worried that the teaching quality would be jeopardized in view of the students' quality and the shortage of professors. She suggested solving the problem by employing more professors from overseas and clinically experienced tutors to teach for the new programme.

Words to Readers

Having been a physiotherapist for so many years and has been working in several hospitals, Priscilla got lots of inspirations to life from her career. She remembered that she had treated a female patient with meningioma who was at similar age as her when she was young in the spinal cord injury unit in MMRC. The patient lost everything without experiencing university life when she saw all the others alongside were experiencing the normal life. Priscilla learnt that happiness is not granted, which inspired her to treat her patients well with the best or she herself does not deserve the happiness.

Working in different hospitals gave her different lessons. For instance, she learnt different manual handling skills under the open-minded supervisor in MMRC and learnt how to set up and run a department from different exposure in the acute setting in Alice Ho Miu Ling Nethersole Hospital. So far, she has been working for 5 different posts in Tuen Mun Hospital with different devoted colleagues and this allows her to accumulate different valuable experiences in her career.

Priscilla concluded that the profession of Physiotherapy brings a lot to us, such as a stable career, considerable income and a good social status. Because of this, she hopes all of us can be proud of ourselves and we utilize our knowledge to help the needy people with our best. Meanwhile, we have to strike to contribute back to our profession.

WCPT Corner

Congratulations to Dr. Shirley Ngai (The Hong Kong Polytechnic University) as one of the selected members in the World Confederation for Physical Therapy (WCPT) Awards Committee from 2018 to 2019.

The roles of the committee members

- Oversee the awards programme so that it fulfils the objectives agreed by the WCPT Executive Board
- Review and advise on award descriptions and materials
- Assess current awards and advise on the maximum number of recipients per award
- Consider and review each nomination on merit and in an unbiased manner and present recommendations to the WCPT Executive Board
- Provide advice and guidance to the WCPT Executive Board on the future direction and development of the awards programme.

CPD News

Enquiry of CPD News and Activities

Please Visit

http://www.hongkongpa.com.hk/cpd/doc/CPD%20All.xls

Position Statement

HONG KONG PHYSIOTHERAPY ASSOCIATION LIMITED
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Position Statement: Entry-level Physiotherapy Education

Over the past few years, there has been a substantial imbalance between the demand of physiotherapy service and supply of new physiotherapy graduates, leading to a severe shortage of physiotherapists across different health care sectors and a large number of vacant positions.

According to the Strategic Review on Healthcare Manpower Planning and Professional Development Report released by the Government in 2017, it is projected that there will be a shortage of more than 900 physiotherapists (PT) by the year of 2030.[1] To alleviate projected shortage, it is recommended in the Report that "*The Government should encourage the self-financing sector to offer physiotherapy programme….., in addition to increasing publicly-funded training places*."[1] The Hong Kong Polytechnic University (PolyU) has been the sole provider of entry-level physiotherapy education in Hong Kong. In light of the current shortage of physiotherapists, which will become even more critical in the near future, it is foreseeable that other institutions may seize this opportunity to develop and implement their own self-financed entry-level physiotherapy education programs.

The Hong Kong Physiotherapy Association (HKPA) does not object to the idea of having other institutions provide entry-level physiotherapy education, because the issue of manpower shortage has to be resolved, and there are many examples of having more than one institution providing physiotherapy training within the same city in other parts of the world. However, HKPA maintains that the government should shoulder the responsibility of ensuring adequate manpower supply of physiotherapists by increasing the publicly funded training places in universities, rather than solely relying on the self-financing sector to fill the gap between supply and demand. In addition, the quality of the new entry-level physiotherapy programs is of utmost importance. Nowadays, physiotherapy training in Hong Kong and other developed countries takes place in a university setting, where research is the mandate, rather than in a vocational school or technical college. Teaching should always be informed by the latest research discoveries. We expect the graduates to demonstrate not only proficiency in entry-level physiotherapy practice skills, but also critical thinking and ability to use research evidence to drive their clinical decision making. The days when physiotherapists are seen as someone who merely deliver "prescribed therapy" are long gone. Only by having quality entry-level physiotherapy education can we provide quality physiotherapy service to the public. Producing graduates that are below the acceptable practice standard would also jeopardize our professional standing and tarnish our professional image, which has taken so many years of tireless work of our current and previous colleagues to build. So the issue at hand is not only an education one, but one that has major ramifications for our professional development, and health and welfare of the public.

To ensure program quality and accountability, for academic institutions that offer entry-level physiotherapy education programs, there should be an external advisory body made up of physiotherapists, employers from different sectors and representatives of professional bodies. The advisory body should be informed of important matters pertinent to the program including but not limited to student admissions, operational issues, finance, staffing and academic performance of students.

(Continued on Page 15)

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For quality assurance purpose, having a comprehensive accreditation system is crucial. The Physiotherapists Board (PT Board) cannot shy away from its responsibility to ensure that whatever new entry-level physiotherapy education programs are developed are of acceptable standard. While there is a current system in place adopted by the PT Board for accrediting local programs other than the BSc (Hons) Physiotherapy Program at PolyU (e.g., Master in Physiotherapy (MPT) Program at PolyU) and programs offered by overseas institutions, there is much room for improvement. Several years ago, when the Master in Physiotherapy (MPT) Program at PolyU had to go through the accreditation process, the Definitive Document of the PolyU BSc (Hons) in Physiotherapy Program curriculum was used as the basis of their accreditation document. The subject areas and hours allocated to each subject in the new program basically had to exactly match those described in the BSc (Hons) in Physiotherapy Program. Such an accreditation framework is not desirable. Firstly, the BSc (Hons) in Physiotherapy Program curriculum of PolyU is also subject to change itself. Indeed, it has undergone several significant changes in the past few years. Secondly, different programs should have their own unique structure and characteristics because of the difference in student background, mission of the institution, and societal needs. Without lowering the demand for quality of the program, the accreditation system should allow more flexibility when considering the differences in curriculum design and teaching methodology across different physiotherapy education programs. The most important issue is whether all essential subject areas pertinent to entry-level physiotherapy practice are adequately covered, whether the intended learning outcomes are appropriate, well defined and properly assessed, rather than imposing the same program structure and the same number of teaching hours for each subject as in PolyU. Apart from the curriculum design, other important issues including the student admission criteria, qualifications of teaching faculty, and quality of clinical education should be addressed in the accreditation. There should also be sufficient provision of space and state-of-the-art equipment, library facilities and an appropriate student-staff ratio to enable successful delivery of quality teaching.

The PT Board may take reference from international standards to formulate its own accreditation framework, such as the guidelines formulated by the World Confederation for Physical Therapy (WCPT) or the accreditation systems used by developed countries such as Australia and New Zealand. In particular, WCPT has a policy statement on education[2] and also well-established guidelines for (1) physical therapist professional entry level education,[3] (2) standard evaluation process for accreditation/recognition of physical therapist professional entry level education programmes,[4] (3) the clinical education component of physical therapist professional entry level education,[5] and (4) qualifications of faculty for physical therapist professional entry level programmes.[6] In any case, threshold for what is considered to be an acceptable standard should be clearly defined for different aspects of the program. And the same standard should be applied to all entry-level programs, regardless of the academic institutions involved.

In summary, concerning the matter related to new entry-level physiotherapy education programs, HKPA maintains that:

(Continued on Page 16)

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1. Having academic institutions from self-financing sector offer entry-level physiotherapy education programs is a possible solution to tackle the problem of shortage of physiotherapists in the workforce;
2. The government should shoulder the responsibility of ensuring adequate manpower supply of physiotherapists by increasing the publicly funded training places in universities, rather than solely relying on the self-financing sector to fill the gap between supply and demand;
3. The quality of the physiotherapy education program should be the most important consideration;
4. The PT Board should develop a comprehensive accreditation system by taking reference from international standards.

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1. Food and Health Bureau, Hong Kong Special Administrative Region Government. Strategic Review on Healthcare Manpower Planning and Professional Development Report, 2017.
2. World Confederation for Physical Therapy. WCPT policy statement: Education. London, UK: WCPT; 2017. http://www.wcpt.org/policy/ps-education (Access date 6th January 2018)
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(Continued on Page 17)

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香港物理治療學會對開辦物理治療課程的立場

在過去數年，社會對物理治療服務的需求日益增大，惟物理治療畢業生的供應卻嚴重不足，導致不同醫療界別的物理治療師嚴重短缺，出現龐大的職位空缺。

根據香港特區政府於二零一七年發佈的「醫療人力規劃和專業發展策略檢討」，預計到二零三零年，市場上將會有多達九百多名的物理治療師空缺[1]。有見及此，為了紓緩物理治療師短缺的情況，「醫療人力規劃和專業發展策略檢討」建議香港特區政府應增加政府資助的物理治療學位，同時鼓勵及支持自資院校開辦物理治療課程，以培育更多的物理治療人才[1]。現時，香港理工大學是香港唯一一所開辦物理治療課程的大專院校。有鑑於物理治療師短缺的情況將會愈趨嚴重，可以預期將來會有其他大專院校陸續開辦物理治療學科的自資學士學位課程。

香港物理治療學會〔本會〕並不反對增加開辦物理治療課程的大專院校，因為解決物理治療師短缺的問題是刻不容緩。於世界各地，在同一城市內擁有多於一間學術機構提供物理治療師的培訓課程亦很普遍。但是，本會認為政府應積極考慮增加大學內物理治療學科的政府資助學額，而不是單純依賴自資學術機構來改善物理治療師人手短缺的情況。此外，物理治療課程的質素最為重要。如今，香港和其他已發展國家的物理治療課程都是在大學內進行，當中的專業培訓著重精密及系統化的科學研究，教學內容亦會根據最新的科研證據而作出調整，並非一般職業學校或技術學院能提供這樣的訓練。我們期望本科畢業生不僅能夠熟練掌握物理治療的相關臨床技巧，同時能積極運用批判性的思維和科研證據來推動臨床決定。物理治療師僅僅被視為提供“處方療法”的技術人員的日子早已不存在。要為社會大眾提供優質的物理治療服務，優質的物理治療專業培訓是不可或缺的。培育出不符合基本專業水平的畢業生，會危及物理治療師的專業地位，糟蹋了不少同業和前輩多年來努力不懈的成果。所以，這不單是一個教育問題，而是足以影響物理治療的專業發展，以及對市民的健康和福祉造成重大影響的一項議題。

為確保物理治療課程的質素和問責性，物理治療專業培訓的學術機構應設立由物理治療師、不同醫療界別以及專業團體的代表所組成的諮詢組織。有關的學術機構必須向諮詢組織報告任何與物理治療課程有關的重要事宜，包括收生，課程運作，財務，教學人員配置以及學生的學習成績。

(Continued on Page 18)

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為了保證課程的質素，全面的認證機制尤其重要，確保所有新開辦的物理治療課程符合認可標準，物理治療師管理委員會是責無旁貸的。雖然物理治療師管理委員會已有相關的課程認證機制，並且應用於本港以及外國的物理治療課程認證上，包括香港理工大學物理治療學〔榮譽〕理學士學位以外的物理治療課程〔例如香港理工大學物理治療學碩士學位課程〕。儘管如此，本會認為其認證機制仍有很大的改善空間。數年前，香港理工大學物理治療學碩士學位課程必須經過認證程序，物理治療師管理委員會接納以當時香港理工大學物理治療學〔榮譽〕理學士學位課程作為認證機制的基礎。分配給每個學科的學習內容和時數基本上必須與香港理工大學物理治療學〔榮譽〕理學士學位課程所描述的資料完全一致，本會認為這樣的認證框架並不是完全可取的。首先，香港理工大學物理治療學〔榮譽〕理學士學位課程的內容並非恆常不變。事實上，過去幾年間它的課程內容已經歷了數次重大的變化。其次，由於學生背景，院校使命和社會需求的差異，不同的物理治療課程應具備其獨特的結構和特點。在不影響課程質素的前提下，認證系統需要更彈性處理這些不同院校的物理治療課程和香港理工大學物理治療學〔榮譽〕理學士學位課程在課程設計及教學方法所存在的差異，才能作出有效的評估。必須慎重考慮的問題是：課程是否完全包含了物理治療學科必須涵蓋的重要學術範疇？學習的目標成果是否恰當、其定義是否清晰、其對學生是否達致學習目標成果的評核過程是否正確？本會認為一套完善的課程認證機制絕不能單純複製香港理工大學物理治療學〔榮譽〕理學士學位的課程結構和教學時數。除了課程設計的考量，完善的認證機制還須加以審視其他重要的因素，包括學生錄取標準，教師資格和臨床教育質量。另外，提供物理治療專業培訓的學術機構應具備足夠的空間和先進的設備、圖書館設施和確保學生與教學人員的比例保持於適當水平，以促進優質的教學。

物理治療師管理委員會可參照國際標準來制定課程認證框架，例如世界物理治療聯盟〔World Confederation for Physical Therapy〕所制定的指引或澳洲、新西蘭等已發展國家所使用的認證制度。其中，世界物理治療聯盟針對[2] 1) 物理治療專業培訓[3]，2) 物理治療課程之認證機制的評估[4]，3) 物理治療課程的臨床教育[5]，以及 4) 提供物理治療培訓教學人員的資格審核[6]，皆提供了明確的指引。不論什麼情況，一套可以被廣泛接受及認可的課程認證標準是必要的，任何學術機構的物理治療課程皆需在同樣的認證標準下得到公平公正的評核。

(Continued on Page 19)

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總括而言，本會對新開辦的物理治療自資學士學位課程，立場如下：

1. 如有其他自資學術機構能開辦物理治療學科的準入學位課程，是解決物理治療師人手短缺問題的可行方案之一；
2. 政府應積極考慮增加大學內物理治療學科的政府資助學額，而不是單純依賴自資學術機構來改善物理治療師人手短缺的情況；
3. 物理治療課程的質素是最為重要的考慮因素；
4. 物理治療師管理委員會應參照國際標準制定全面的課程認證機制。

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1. Food and Health Bureau, Hong Kong Special Administrative Region Government. Strategic Review on Healthcare Manpower Planning and Professional Development Report, 2017.
2. World Confederation for Physical Therapy. WCPT policy statement: Education. London, UK: WCPT; 2017. http://www.wcpt.org/policy/ps-education (Access date 6th January 2018).
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The Hand Therapy Specialty Group Biennial General Meeting

Date : 5 January 2018

Venue : Queen Elizabeth Hospital

Physiotherapists : Mr. Kenneth Chi Hong CHUNG, Ms. Polina Lai Ching YEUNG, Ms. Lan Fong CHIANG, Ms. Joanna Mei Shan WONG, Ms. Jocelyn Sau Yee CHO, Ms. Yvonne Po LAM, Ms. May Lai Mei LUK, Ms. Connie Ying Fong LY, Mr. Ming Chung POON, Mr. Raymond Chi Chung TSANG

The positions of the new EC members are listed below:

Chairman:
- Kenneth Chi Hong CHUNG (NGO)

Vice-chairman:
- Polina Lai Ching YEUNG (Private)

Treasurer:
- Lan Fong CHIANG (PYNEH),
- Daisy Mei Ting NG (QEH)

Secretary:
- Joanna Mei Shan WONG (AHNH)

Other EC members:
- Jocelyn Sau Yee CHO (QEH)
- Yvonne Po LAM (UCH)
- May Lai Mei LUK (QEH)
- Connie Ying Fong LY (TMH)
- Ming Chung POON (QEH)
- Raymond Chi Chung TSANG (MMRC)
- Jimmy Pui Man YUEN (PMH)

A group picture of the EC members

Vision:

Hand in hand. Physiotherapy for better health.

Planned activities in 2018:

We will organize a series of lectures about "Fracture distal radius and carpal instability ---- Surgical management, radiological imaging and physiotherapy management".

Tentative dates:

July to September, 2018. Speakers and venues are pending. More information about the lectures will be announced soon.

Dialogue with Principal Official - Professor Chan Siu Chee, Sophia

Date : 1 February 2018
Venue : Auditorium, Duke of Windsor Social Service Building, Wanchai
Physiotherapist : Prof. Marco PANG

This event was organized by the Hong Kong Council of Social Service. It provided an opportunity for Prof. Chan (Secretary of Food & Health Bureau) to explain the policy ideas and plans as well as respond to recommendations and opinions raised by the stakeholders in the welfare sector.

Prof. CHAN Shi Chee, Sophia (Secretary of Food & Health Bureau) and Mr. Chua Hoi-Wai (Chief Executive of the Hong Kong Council of Social Service)

長者友善行人坊

Date : 4 February 2018
Venue : Sheung Wan Promenade
Physiotherapists : Prof. Marco PANG, Mr. Steven CHEUNG, Ms. Angela LEE, Mr. Brian WONG, Ms. Ann LI, and physiotherapy student volunteers

HKPA was invited by "Golden Age Foundation" to participate in the event "長者友善行人坊". Geriatrics Specialty Group (GSG) represented HKPA to join this event. Ms. Angela Lee, and physiotherapy student volunteers demonstrated dance exercise, "黃金操" to the public. HKPA President, Professor Marco Pang delivered talk to public about, "How to maintain physical healthy and fit for Golden Age people".

Professor Marco PANG represented HKPA to receive "Appreciation certificate" from organizing committee

Dance exercise "黃金操" demonstration

Promotional Seminar for PT Students

Date : 5 February 2018, and 27 March 2018
Venue : The Hong Kong Polytechnic University
Physiotherapist : Prof. Marco PANG

Prof. PANG delivered two promotional seminars to Year 1 and Year 4 BSc (Hons) in PT students respectively. We hope to raise the number of our student members and engage our students in our various initiatives.

Prof. PANG was delivering the seminar to PT students

Elite Alumni Seminar cum Kick-Off Ceremony of RS 40th Anniversary

Date : 7 February 2018
Venue : Royal Garden Hotel, Kowloon
Physiotherapists : Prof. Marco PANG, Mr. Charles LAI, Dr. Ivan SU, Mr. Alexander WOO, Dr. Shirley NGAI, Dr. Billy SO, Dr. Arnold WONG

This was the kick-off event to celebrate the 40th Anniversary of the Department of Rehabilitation Sciences (RS) at PolyU. Prof. PANG was invited as a guest to attend the Ceremony in the capacity of the President of HKPA.

The Head Table

Prof. PANG signing his name

Prof. PANG and Prof. Hector TSANG (Head of Department of RS)

HKPA EC members with Prof. TSANG

Open Forum "Navigating Physiotherapy in Hong Kong: Our Challenges Ahead"

Date : 10 February 2018
Venue : The Hong Kong Polytechnic University
Physiotherapist : Prof. Marco PANG

This forum was organized by the Hong Kong Physiotherapists' Union. Prof. PANG was invited as a guest speaker in the capacity of the President of HKPA. He delivered a talk titled "The International Status of Hong Kong Physiotherapy". Very good feedback was received. There was a general consensus that we need to do more to promote the international standing of the physiotherapy profession in Hong Kong.

Oxfam Trailwalker Prize Presentation Ceremony

Date : 23 February 2018
Venue : Auditorium of The Hong Kong Federation of Youth Groups Building, North Point
Physiotherapists : Prof. Marco PANG, Mr. Willis CHAN

HKPA has been supporting organization of the Oxfam Trailwalker event for many years, providing on-site physiotherapy service to the event participants.

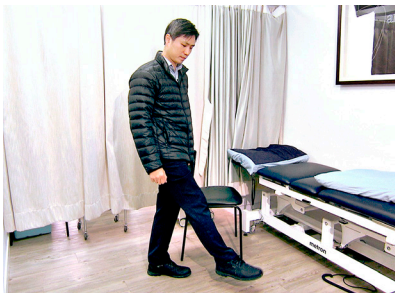
Prof. PANG and Mr. Willis CHAN from Sports SG at the event

Prof. PANG and Mr. CHAN receiving a gift of appreciation from Mr. Bernard CHAN, JP

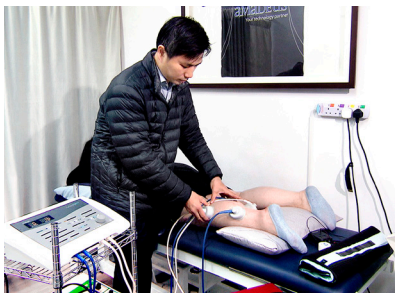
最強生命線 TVB Shooting：靜脈曲張

Date : 23 February 2018 (Broadcasted at 2 April 2018)
Venue : Private Clinic
Physiotherapist : Mr. Gorman NGAI

This program was about to causes and management of varicose vein. It included interviews of a doctor, a podiatrist and a physiotherapist. The physiotherapy part mainly focused on the demonstration of electrical modalities and exercises to relieve the signs and symptoms of varicose vein, and ways to promote circulation and venous return.



An exercise to improve blood circulation of the lower leg



Use of an electrical modality to alleviate symptoms

The World Rare Disease Day 2018 Symposium

Date : 25 February 2018
Venue : Lecture Hall II, Centennial Campus, HKU
Physiotherapist : Dr. Ivan SU

The event was jointly organized by the Hong Kong Alliance for Rare Diseases and School of Biomedical Sciences, University of Hong Kong with the theme of "From Policy to Daily Living: A Wide Angle on Rare Disease". The aim of the Symposium was to raise awareness and concern on the needs of people with rare diseases in Hong Kong for the purpose of improving the caring and community support from daily living perspective both in aspects of resources and policy development.

Lunch Meeting with Delegates from the University of South Australia

Date : 25 February 2018
Venue : Lecture Hall II, Centennial Campus, HKU
Physiotherapists : Prof. Rachael GIBSON, Ms. Maria STARVRINAKIS, Mr. Charles LAI, Dr. Shirley NGAI, Dr. Arnold WONG

During this lunch meeting, we enjoyed an informative sharing of some common concerns (e.g., undergraduate training, PT registration requirement through accreditation or an universal licensing examination), and possible collaborations of short courses for local PTs. Future reciprocal visits and sharing could be further explored.

From right to left: Maria STARVRINAKIS, Prof. Rachael GIBSON, Arnold WONG, Charles LAI, Shirley NGAI

Meetings for Setting up a Trust Fund of Work Rehabilitation and Compensation (OSHRSG)

Date : 28 February, 16 and 28 March 2018
Venue : Legislative Council
Speakers : Mr. Alexander WOO and Dr. Billy SO

HKPA was invited by Dr. Ka Ki KWOK to discuss setting up a trust fund of work rehabilitation and compensation. The OSHRSG represented HKPA to discuss the abovementioned issue. The meetings involved Legislative Council Members (Dr. Ka Ki KWOK, Mr. Felix Kwok Pan CHUNG and Dr. Fernado Chiu Hung CHEUNG), representatives from various professional bodies (Hong Kong Association of Occupational Health Nurses, Hong Kong Physiotherapist Union, Hong Kong Occupational Therapy Association, etc.), as well as different labour unions (Neighbourhood and Worker's Service Centre, Hong Kong Catholic Commission for Labour Affairs, Association for the Rights of Industrial Accident Victims, Alliance of Self Help Groups for the Occupational Injuries and Diseases, etc.), The discussion topics encompassed the current situation of work rehabilitation and compensation in Hong Kong, an establishment of a trust fund and a central governing body for work rehabilitation.

Hong Kong Physiotherapy Concern 19th Annual General Meeting and Forum

Date : 2 March 2018
Venue : The Hong Kong Polytechnic University, Hong Kong
Physiotherapist : Mr. Charles LAI

During this meeting, our vice president delivered a talk regarding the opportunities and challenges faced by physiotherapists and physiotherapy students. Mr LAI had genuine discussion with Physiotherapy students and guests from different sectors.

Charles LAI was answering a qusetion from the audience.

Charles LAI and other speakers in the forum

老年學會評審部審查院舍評審公平性報告

Date : 6 March 2018
Venue : Hong Kong Association of Gerontology
Physiotherapist : Prof. Marco PANG

Prof. PANG was invited to examine the selected evaluation reports under the Resident Aged Care Accreditation Scheme 2017. This exercise was to ensure that the evaluations of the old age homes that participated in the Accreditation Scheme were performed in a fair and transparent manner.

SG meeting and Spring Dinner of Hong Kong Physiotherapy Association

Date : 9 March 2018
Venue : Eaton Hotel
Physiotherapists : HKPA EC (2017-19),
HKPA SG Chairpersons and EC representatives

A constructive SG meeting was held in which the SG guidelines were revised and endorsed. The meeting was followed by the Spring Dinner, where the HKPA leaders shared a night of joy and celebration.

HKPA EC (2017-19), SG Chairpersons and EC representatives

Hong Kong Alliance of Patients Organizations Ltd. and Hong Kong Society for Rehabilitation 新春團拜

Date : 10 March 2018
Venue : Hospital Authority Building
Physiotherapists : Prof. Marco PANG and Mr. Charles LAI

In this dinner, Prof. PANG and Mr. LAI met with different delegates including the Chief Executive of Hospital Authority, Dr. LEUNG.

Prof. Marco PANG, Charles LAI and YUEN Siu Lam, Chairperson of the Hong Kong Alliance of patients Organizations Ltd.

Charles LAI and Dr. P. Y. LEUNG, Chief Executive of Hospital Authority

Dialogue with the Secretary of Food and Health Bureau Organized by Office of Prof. Joseph LEE

Date : 12 March 2018
Venue : Central Government Offices, Tamar
Physiotherapists : Prof. Marco PANG and Dr. Arnold WONG

The meeting involved the professional associations of different allied health disciplines. We expressed our concerns to Prof. Sophia CHAN on physiotherapy education, licensing examination, and the lack of access to the electronic health record sharing system by physiotherapists working in NGO settings.

Prof. Marco PANG and Arnold WONG was ready for the meeting

Prof. Sophia CHAN, Dr. TY CHUI, Prof. Joseph LEE and different allied health representatives

Meeting with PT Board Chairman

Date : 15 March 2018
Venue : PT Board Office, Wu Chung Building, Wanchai
Physiotherapists : Prof. Marco PANG, Ms. Annbella SUEN, Mr. Alexander WOO

A meeting with the new PT Board Chairman, Mr. Philip TSAI Wing-Chung, was held. We expressed our views on several issues, including accreditation of new physiotherapy education programs, licensing examination, and open access of physiotherapy. We also requested to have regular meetings with him so that we can follow up on the important issues.

Mr. TSAI and all PT representatives

「健康齊FUN享」嘉年華及主持專題講座

Date : 17 March 2018
Venue : Quarry Bay Park
Physiotherapists : Ms. Mandy MAK and Ms. Annie WU

Mental health is a popular health topic in Hong Kong. Baptist Oi Kwan Social Service organized a funfair related to mental health on 17 March 2018 at the Quarry Bay park. Ms. Wu (a representative of our Geriatrics Specialty Group) and Ms. MAK (our executive committee member) represented HKPA to deliver an education talk on "Exercise and Mental Health" and a role-play to highlight the benefits of exercise on mental health. They also demonstrated proper warm-up and cold down exercises, as well as dancing exercises. The energetic participants danced with our speakers and actively participated in our prize quiz.

A representative of the organizing committee presented a souvenir to Ms. WU and Ms. MAK

Ms. WU and Ms. MAK danced together with participants

Promotional Seminar: Shatin Hospital

Date : 20 March 2018
Venue : Physiotherapy Department, Shatin Hospital
Physiotherapist : Prof. Marco PANG

A seminar on stroke rehabilitation was given to the PT colleagues based in Shatin Hospital. Prof. PANG was also given the opportunity to promote HKPA to the audience.

RTHK Radio 1 and TV 31 Healthpedia interview: 四大痛症：背痛、頸膊痛、關節痛、膝痛

Date : 21 March 2018
Venue : RTHK
Physiotherapist : Mr. Gorman NGAI

This live program was about the most common musculoskeletal disorders that general public might be suffered, the usual medical management, and physiotherapy treatment that could help those disorders. It also included a phone in session for the audience to ask their questions.

Gorman NGAI was in the studio with anchors

Spring Dinner, The Association of Hong Kong Health Care Professionals

Date : 23 March 2018
Physiotherapist : Prof. Marco PANG

Prof. PANG was invited to attend the Spring Dinner organized by the Association of Hong Kong Health Care Professionals. It was a good opportunity to get acquainted with the key figures in other health care disciplines.

Prof. PANG with Ms. SONG Wei (Deputy Director-General, Coordination Department of the Liaison Office of the Central People's Government in the Hong Kong SAR) and Mr. JIANG Zhiwen (Director, Coordination Department of the Liaison Office of the Central People's Government in the Hong Kong SAR)

A Visit to Tung Wah College

Date : 27 March 2018
Venue : Tung Wah College King's Park Campus
Physiotherapists : Prof. Marco PANG, Mr. Charles LAI, Mr. Alexander WOO, Mr. Sam WAN

HKPA was invited to pay a visit to the Tung Wah College. In the meeting, we were introduced to the proposed BSc (Hons) in Physiotherapy curriculum and their teaching facilities. We expressed our views on the program and stressed the importance of quality assurance.

RTHK Radio 1 and TV 31 Healthpedia Interview: 中風復康

Date : 28 March 2018
Venue : RTHK
Physiotherapist : Dr. Wingson CHAN

This live program was talking about the most common post-stroke complications, the importance of early physiotherapy interventions, and physiotherapy therapeutic means on stroke rehabilitation. Moreover, the most contemporary rehabilitation approach in upper limb rehabilitation (e.g. Mirror Therapy, Transcranial Direct Current Stimulation, Transcranial Magnetic Stimulation), and lower limb rehabilitation (e.g. Robotic gait training were introduced. Real-time Mirror Therapy) were demonstrated. More importantly, Ms Li (a client recovered from a stroke) was invited to share her rehab journey. The sharing was very encouraging.

Ms Li (a client recovered from stroke) and Dr. Chan

Dr. Wingson Chan was in the studio with anchors

HONG KONG PHYSIOTHERAPY ASSOCIATION LIMITED
香港物理治療學會有限公司

中國香港特別行政區 九龍佐敦德興街12號興富中心9樓901室
Room 901, 9/F Rightful Centre, 12 Tak Hing Street, Jordan, Kowloon, HKSAR
www.hongkongpa.com.hk Tel: (852) 2336 0172 Fax: (852) 2338 0252

Dear members,

1st Announcement: HKPA CONFERENCE 2018 cum 55th Anniversary Celebration
"Unity Makes Strength"

I am pleased to inform you that the HKPA is going to organize the **HKPA Conference 2018 cum 55th Anniversary Celebration at Eaton Hotel, Jordan, Kowloon,** with a main theme of ""**Unity Makes Strength**" in 2018. **The conference will be held on 6th October 2018 (Saturday).**

Free paper (traditional and 5x5) and poster presentation sessions will be scheduled for peer colleagues to share the expertise and research findings. **A set of documents containing the abstract submission form and other related information is enclosed for your reference**. The abstract submission deadline is **15th July 2018**. **Two post-conference workshops** will also be organized on 7th October 2018 (Sunday)**. A conference dinner** will also be organized on 6th Oct 2018 (Saturday) **at Eaton Hotel** for celebrating HKPA's 55th Anniversary.

You are able to enjoy an **early-bird registration for both the conference and workshop on or before 15th July 2018**. The background of the keynote speakers, content of workshops and registration form will be announced in the website of HKPA in May 2018.

Do grasp the chance to enhance our professional knowledge and share our happiness by joining the HKPA Conference 2018 and the 55th Anniversary Dinner.

Yours sincerely,

Professor Marco PANG

President, Hong Kong Physiotherapy Association Ltd.

Announcement

Apology Message

HKPA

We sincerely apologize to all members who opted for the mailing of course information. We had received feedback from a number of members that the postage for the package sent out in January 2018 was insufficient. After our investigation, it was found that we had overlooked the increase of postage fee, which became effective starting from 1 January 2018. We took remedial action by revising the postage rate record. Again, we apologize for all the inconvenience caused.

Special Announcement

HKPA

The second Executive Committee meeting was held on Feb 3, 2018. The Committee unanimously agreed to invite Ms. Carmen CHOW, Mr. Ryan CHOI and Ms. Horsana CHIU to join the EC as co-opted members. The appointments of Ms. CHOW and Mr. CHOI were effective on March 1, 2018, while Ms. CHIU's appointment was effective on April 9, 2018.

VCARE 香港痛症學院

Course 1 (VE181013)

推拿理筋文憑 COMT technique Diploma (Conceptual Oriental Manual Therapy):

課程背景：

古時之中國醫術普遍是以口傳心授形式傳授給弟子，並非像現今般公開於書本中。本課程之內容正是源自道家口傳心授之理筋按穴手法。重點內容包括過去未公開之開氣場手法、開穴手法、開關手法、上下肢撥筋手法、胸腹背撥筋手法。而各種手法均能疏通經洛，促進氣血運行，激發元氣，達到防治疾病之果效。所有內容均是道家口傳心授之絕密內容。這是一套能高效針對多種專科之手法治療。

Course background:

In ancient times, Chinese medicine was generally imparted to disciples in the form of oral traditions, not in the books as it is today. The content of this course is derived from the heart of Taoist medicine. The main contents of COMT including Qi activation technique, point activation technique, open gate technique, upper and lower limb releasing technique, back and abdominal releasing technique. All these techniques can promote Qi energy flow so as to achieve the effect of disease prevention. All content is derived from top secret of Taoist content. This is a set of techniques that can be effectively targeted at a variety of specialties.

日期：13/10/2018 - 23/2/2019 (逢星期六)	時間：2:00PM - 6:00PM	講師：陳國正中醫師
地點：九龍旺角彌敦道625&639號雅蘭中心辦公樓一期12樓1208室		
全期學費：$21000	名額：30 額滿即止	CPD Points：15 (**待定**)	對象：適合對高效手法治療有興趣之人士

Course 2 (VE181010)

Diploma in Acupuncture for physiotherapy 2018 (autumn)
2018 秋季物理治療針灸學文憑課程

內容：

第一部份：

1) 中醫學基礎課程　2) 中醫診斷學課程　3) 針灸學課程

日期：10/10/18至13/2/19 (逢星期三晚上7時至9時30分)

第二部份：

針灸手法學；常見物理治療病案及專題講座

日期：20/2/19至24/7/19 (逢星期三晚上7時至9時30分)

1) 針灸手法學 (各式補瀉手法；頭針及耳針操作；拔罐操作；括痧操作；取穴思路)

2) 常見物理治療病案及專題講座
常見物理治療病案 (中風，貝爾氏麻痺，彈弓手，頸背痛，關節痛，三叉神經痛，大腦性麻痺，肩周炎等)

第三部份：臨床實習

日期：31/7/19至11/9/19 (逢星期三晚上7時至9時30分)
(獨立運用針灸方法處理真實病人)

講師：
陳國正(註冊中醫、註冊物理治療師、中國認可針灸師)
英國威爾斯大學痛症醫學碩士
香港大學醫學院針灸學碩士
香港大學中醫學院中醫全科學士
香港中文大學中西結合醫學學區研究所專業顧問(名譽)
香港理工大學物理治療專業文憑
東華三院痛症及復康名譽顧問

全期學費：$21000	
2018年6月30日前報讀為 $19000	名額：30 **額滿即止**
對象：對針灸有興趣之人士	CPD Points：15
地點：九龍旺角彌敦道625&639號 雅蘭中心辦公樓一期12樓1208室 (鄰近旺角港鐵站E1出口)	

以上上課日期、時間、地點及講師可能有所更改，將另行通知。
除了本學院取消課程外，其他情況概不退回已繳學費。

報名方法請參照報名表格及須知

1. 請填妥以下報名表格，連同劃線支票（抬頭請註明 CHAN KWOK CHING」）寄交九龍觀塘巧明街117號港貿中心3樓303室。
2. 如報名人數不足，本公司有權取消課程，並將會另行通知受影響學員。

學員姓名		職業及畢業年份	
身份證號碼		工作機構	
聯絡地址		針灸學歷及主辦單位	
電郵地址		課程編號	
聯絡電話		總費用	
日期		支票號碼	

課程查詢 2345 5099　　**Email: vcareintl@gmail.comm**

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Correspondence of HKPA Executive Committee Members (2017-2019)

Post	Name	Working Place	Contact No.
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Honorary Secretary	Ms. Anna Bella Mei Yee SUEN	Physiotherapy Department, TSWH	9360 9144
Associate Secretary	Mr. Sam Sung WAN	Physiotherapy Department, TMH	9234 2430
Honorary Treasurer	Mr. Clement Kin Ming CHAN	Physiotherapy Department, RH	9277 0427
Associate Treasurer	Ms. Judy Wan Loon WONG	Physiotherapy Department, RH	9230 2624
International Affairs and Publications Subcommittee Chairperson	Dr. Shirley Pui Ching NGAI	Dept. of RS, PolyU	2766 4801
International Affairs and Publications Subcommittee Member	Dr. Arnold Yu Lok WONG	Dept. of RS, PolyU	2766 6741
Membership Subcommittee Chairperson	Mr. Brian Fat Chuen MA	Physiotherapy Department, TMH	2468 5215
Membership Subcommittee member	Mr. Gorman Chi Wing NGAI	Private Practice	9759 0823
Membership Subcommittee member	Mr. Harry Ka Man LEE	TWGHs Jockey Club Rehab Complex	2870 9218
Professional Development Subcommittee Chairperson	Mr. Raymond Chi Chung TSANG	Physiotherapy Department, MMRC	2872 7124
Professional Development Subcommittee member	Ms. Mandy Man Yu MAK	Physiotherapy Department, TMH	9624 2701
Professional Development Subcommittee member	Mr. Ivan Ngai Chung YEUNG	Physiotherapy Department, YCH	2417 8214
Professional Development Subcommittee member	Ms. Horsana Pik Yin CHIU	Physiotherapy Department, UCH	3949 4650
Promotion and Public Relations Subcommittee Chairperson	Mr. Alexander Chuen Hau WOO	Dept. of RS, PolyU	2766 5386
Promotion and Public Relations Subcommittee member	Dr. Ivan Yuen Wang SU	SAHK	3965 4026
Promotion and Public Relations Subcommittee member	Dr. Billy Chun Lung SO	Dept. of RS, PolyU	2766 4377
Promotion and Public Relations Subcommittee member	Ms. Carmen Ha Yan CHOW	Po Leung Kuk	2551 3302
Promotion and Public Relations Subcommittee member	Mr. Ryan Ka Wai CHOI	Private Practice	9259 8935

Editorial Board

The Editor welcomes letters, articles and other contributions from readers. The Editor reserves the right to make cuts to articles as necessary.