IFOMPT 2016 Conference Report – Jude O'Carroll

IFOMPT 2016 was an incredible conference attended by delegates from 59 countries, demonstrating its magnetism. Listening to world-class speakers disseminate their research was both humbling and inspiring. The number of parallel sessions meant that at times one suffered from *option paralysis* not knowing which seminar to attend for the best. For me, the highlight was listening to Lorimer Moseley, not only giving tips on how to secure a life partner with a pelvic tilt exercise demonstration, but also how placebo mechanisms are not inert. I was so impressed how generous speakers were with clinical tips, rather than purely delivering research, they made it clinically meaningful, for example a new favourite exercise of band side slides on a towel for lateral hip pain thanks to Alison Grimaldi.

What I have reflected on most since IFOMPT2016 is a theme from several speakers of individualised physiotherapy, which sounds like nothing new but I think is still lacking in practice and can continue to be reflected and improved upon. Rather than waiting for the next passive modality trend, how can we fine tune what we already do e.g. exercise, education etc? Jeremy Lewis referred to Brailsford's Aggregation of Marginal Gains by looking to improve even by 1% in every domain so that the cumulative result is an improvement in that person's life. Can we get that important first impression right (big smiles) and allow the person to tell their story without interruption (~92 seconds) (Roberts) and use this to help them understand their pain in a way that is meaningful to them (O'Keeffe), possibly by asking Kleinman's Questions and getting them to Teach Back in their own words what they will do at home (Wittink). We have to make our consultations truly 'personcentred', neatly summarised by Roger Kerry as N=1.