

IFOMPT 2016 Conference Report - Ben Fisher.

The IFOMPT conference was an interesting mix of the old and new 'era's' of physiotherapy, and these blended well, albeit with some friction at times. From the modern pain scientists, through to the ardent manual therapists like Brian Mulligan, there was a smorgasbord of events to attend. The plenary session by Gwen Jull and Anne Moore was especially interesting, and almost summarised, for me, the flavour of the conference. Gwen explained that low back and neck pain are considered in the top 10 of 301 conditions affecting human beings. They emphasized the requirement for clinicians to operate within the bio-psycho-social framework- but that each element will have different emphasis for different patients. I also liked Gwen's determination that we better extract the meaning and definition of chronic pain.

Of particular interest was the focus by a number of speakers on appropriate outcome measures for patients- and not just researcher imposed measures. This blends nicely with the wider question of 'what are we trying to achieve with rehabilitation?' Gwen and Anne explained that we may be over-focused on the analgesic effect of our rehabilitation (e.g. a reduction in pain), and this may be too uni-dimensional. Of course, this was a complete contrast to the break-out session I attended with Mulligan, where the focus was very much about reducing pain- and doing this fast and with some theatre too. Mulligan acknowledged the bio-psycho-social aspect, though to be honest it was just a 'nod' (albeit a pain-free and well manipulated 'nod').

I think Joel Bialoski highlighted very well the challenges that manual therapy faces- the disconnect between research and interventions. Specifically, the effectiveness of manual therapy has been shown in research to be not better (or worse) than many other interventions. However, Joel highlighted the issues with research and manual therapy well; that in RCT's for example, everyone has the same intervention. Yet this is not how clinical treatment is delivered in reality- there is no 'one size fits all' approach. His explanation of how this may be researched and implemented going forward provided plenty of future discussion areas, for both clinicians and researchers.