Notes and news

Current management of pregnancy-related low back pain: a national cross-sectional survey of UK physiotherapists

In early summer 2012, three professional networks (PNs) of the Chartered Society of Physiotherapy (CSP) participated in a research study that was undertaken by the Institute of Primary Care and Health Sciences at Keele University in Staffordshire, UK. Pelvic, Obstetric and Gynaecological Physiotherapy was one of the PNs that took part in this study, and a summary of the results of the research follows.

Information on the physiotherapy management of pregnancy-related low back pain (LBP) is scarce. As part of a developmental programme of work for a pilot trial, Evaluating Acupuncture and Standard care for pregnant womEn with low BACK pain (the EASE BACK trial), high-quality data on current UK care for this patient population were needed. The aim of the initial phase of the research was to describe current standard care and the acupuncture treatment provided by UK physiotherapists for the management of pregnancy-related LBP.

The EASE BACK team conducted a national cross-sectional survey of physiotherapists working in the UK from June to July 2012. At the time of mailing the questionnaire, no comprehensive sampling frame for UK physiotherapists was available. Therefore, the researchers selected three PNs with remits relevant to LBP, acupuncture and pregnancy, and a total combined membership of around 7000 physiotherapists in order to access a broad range of interests and expertise. The participating PNs were: the then Association of Chartered Physiotherapists in Women's Health (now POGP); Acupuncture Association Chartered the of Physiotherapists; and the McKenzie Institute Mechanical Diagnosis and Therapy Practitioners. A total of 1093 physiotherapists were contacted.

The questionnaire captured information about the respondents' demographic details and clinical practice, and investigated the management of pregnancy-related LBP using a patient case vignette of a specific "typical" presentation. If acupuncture use was reported, details of this form of treatment were also collected.

The overall response rate was 57.5% (n = 629), and 499 physiotherapists who had experience of treating women with pregnancy-related LBP were included in the analysis. The respondents were very experienced and had a mean time in practice of 22 years (SD = 10.4 years), and 92% were female. A total of 16 advice and 18 treatment options were reported for the management of the patient described in the vignette, and it was clear that packages of care were commonly used. The most frequently reported interventions were: advice on posture (98%) and work (88%); the use of home exercise programmes (94%), postural exercises (93%) and support belts (48%); and manual therapy (48%). A "typical" course of treatment for a woman with pregnancy-related LBP was comprised of three or four face-to-face sessions over 3-6 weeks, with the episode of care left "open" for the duration of the pregnancy. Seventy-five per cent of respondents were trained in acupuncture, and 24% reported using this form of treatment for pregnancy-related LBP. Most of the latter group used Western medical acupuncture (71%), but the choice of acupuncture points varied widely.

This study has provided high-quality data on the current management of pregnancy-related LBP by UK physiotherapists. Physiotherapists deliver a wide variety of management options for women with pregnancy-related LBP. These are predominantly based on exercise treatment approaches, but to a lesser extent, some also include acupuncture. Packages of care including several treatment and advice components are common.

For a full report on this study, see Bishop *et al.* (2015).

Annette Bishop

NIHR Research Fellow Arthritis Research UK Primary Care Centre Research Institute Primary Care Sciences Keele University Staffordshire UK

Reference

Bishop A., Holden M. A., Ogollah R. O. & Foster N. E. on behalf of the EASE Back Study Team (2015) Current management of pregnancy-related low back pain: a

national cross-sectional survey of UK physiotherapists. *Physiotherapy* pii: S0031-9406(15)03771-2. DOI: http://dx.doi.org/10.1016/j.physio.2015.02.003. [E-publication ahead of print.]

Physiotherapy seminar in the National Assembly for Wales

The Welsh Pelvic Health Physiotherapy Group, supported by the CSP, hosted a pelvic health seminar in the National Assembly for Wales in Cardiff, UK, on Tuesday 24 February 2015. This event was sponsored and chaired by David Rees AM, Chair of the Health and Social Services Committee (Fig. 1). Representing the POGP, Ruth Hawkes also supported the group by attending the seminar, and Doreen McClurg provided valuable information prior to the event.

The attendees, who included Alison Strode, the Welsh Government's therapy advisor, and a range of other key people from the National Health Service (NHS) in Wales, heard from physiotherapists Mair Whittal, Gillian McCabe and Ruth Emanuel, and from Professor Phil Reed from the Department of Psychology of Swansea University, Swansea, UK (Fig. 1).

The presenters used the opportunity to: educate the audience on current guidelines and examples of best practice; highlight the mental health problems that can be associated with pelvic health dysfunction; and promote the role of physiotherapists in offering treatment solutions. Ruth Emanuel concluded the session by illustrating how physiotherapy in this field met many of the requirements for demonstrating prudent healthcare.

During the question-and-answer session, Mr Preetkiron Bhal, one of the medical gynaecologists in the audience, described how his health



Figure 1. (Left to right) Ruth Emanuel, David Rees, Mair Whittal, Gillian McCabe and Professor Phil Reed at the National Assembly for Wales.

board had taken the decision to invest in physiotherapy, and explained the positive effects that this move had had on waiting times for gynaecology. Later, Claire Perkins, a patient who had received physiotherapy, described what the treatment had done for her, and how she had found it much easier to talk about the subject with friends and family because of what she had learned from her physiotherapist. Claire's contribution was very powerful, and David Rees AM, the chair of the event, highlighted how valuable it was to hear patients' views, and that services must be designed to ensure that they are able to make informed choices.

Professor Phil Reed has been working closely with the physiotherapy service in Singleton Hospital, Swansea, and is continuing to provide the women's health service with research support. His research has shown how psychology input can support physiotherapy in becoming even more effective in achieving good outcomes.

Pip Ford, CSP Public Affairs and Policy Manager for Wales, said:

"This event supported by the CSP brought physiotherapy to the politicians and key stakeholders in the National Assembly for Wales. The members used it as an opportunity to showcase how physiotherapy not only improves the lives of patients but also can save costs for organisations."

Gillian McCabe

Specialist Physiotherapist in Women's Health University Hospital of Wales Cardiff UK

Social media and POGP

The rebranding of the Association of Chartered Physiotherapists in Women's Health as POGP in 2014 has encouraged us to reach out to a wider audience of current and potential new members. With the current boom in technology, we thought that one of the best ways to do this was to launch POGP on social media.

Many websites now enable users to create content and share it with other participants or groups who use the Internet. The two best-known examples of social media are Twitter and Facebook. Rather than attempt to set up two accounts at the same time, we decided that we would start with Twitter, which seemed easier to operate.

Twitter allows users to send a short message of up to 140 characters called a "tweet". This message can be seen by anyone who chooses to

"follow" that user. We sent our first tweet from our POGP account on 18 March 2014. We are now able to provide people who follow us with regular updates about the rebrand, Conference, and other POGP events and courses. For the time being, the target readership of our Twitter account will be physiotherapists, namely our current or potential members, rather than patients.

Twitter enabled us to provide live updates from the 2014 and 2015 POGP conferences with great success. Since the launch of our account in March 2014, we have sent over 580 tweets, and more than 515 followers have seen these posts. We can directly message big names such as the CSP, Karen Middleton and other CSP PNs. Perhaps most excitingly, as well as physiotherapists, we can connect with students, or those not currently involved in women's and men's health who may go on to have an interest or become increasingly aware of what we do.

If you wish to become involved, then we advise you to read *Social Media Guidance for CSP Members* (CSP 2014) first. We are also currently writing our own social media guidance for POGP members, which will be published later this year.

Creating a Twitter account is easy. If you wish to do so, go to the website (www.twitter.com), and enter your name, e-mail address and password in the "Sign up for Twitter" box. You can then choose who to follow.

We are @thePOGP, so once you sign up – or if you are already a Twitter user – follow us, get in touch and keep up to date!

Rebecca Bennett

Website and Twitter Coordinator

Reference

Chartered Society of Physiotherapy (CSP) (2014) *Social Media Guidance for CSP Members*. [WWW document.] URL http://www.csp.org.uk/sites/files/csp/secure/social_media_guidance_for_physio_v1.3.pdf

Current and future POGP short courses

Pelvic, Obstetric and Gynaecological Physiotherapy currently delivers five short courses on various aspects of women's health and pelvic function. These vary in length from study days to an extended programme that includes attendance at a 3-day workshop. Our participants are assigned relevant pre-attendance reading and learning tasks to ensure that the best use is made of the contact time at the workshop. These courses

have been designed to provide a sound introduction to those who are new to the speciality, and also to update and refresh present members.

Physiotherapy Assessment and Management of Female Urinary Dysfunction

Endorsed by the CSP, this extended programme includes a 3-day workshop. It is an introductory course that will enable registered physiotherapists to assess and manage women with urinary dysfunction.

Physiotherapy Assessment and Management of Lower Bowel Dysfunction: A Practical Skills-Based Workshop

This 3-day workshop involves both theoretical and practical sessions. It is an introductory course that has been designed to enable registered physiotherapists to examine and manage individuals with lower bowel dysfunction.

Understanding Pelvic Organ Prolapse: Assessment and Conservative Management

A great follow-up course to the female urinary dysfunction programme described above, this theoretical study day provides participants with the opportunity to better understand pelvic organ prolapse.

Physiotherapy Assessment and Management of Pregnancy-Related Lumbopelvic Conditions. This 2.5-day workshop involves theoretical and practical sessions. The course is intended to help women's health and musculoskeletal physiotherapists to manage women who have been referred to them for pregnancy-related lumbopelvic problems.

Pregnancy, Birth and Beyond: An Introduction to Physiotherapy in the Childbearing Year

This is a new study day that will help women's health and musculoskeletal physiotherapists to understand how pregnancy, labour and birth may have an impact on women during the child-bearing year. It has been designed to provide physiotherapists with the knowledge and skills that they need to deliver perinatal physiotherapy care and promote healthcare.

The following POGP courses are in development and will begin this year:

 Advanced Pelvic Floor Course: In-depth Assessment, Differential Diagnosis and Advanced Treatment Techniques for Complex Female Pelvic Pain and Pelvic Floor Muscle Dysfunctions (2.5 days);

- Advancing Your Skills into Men's Health, Part
 1: Physiotherapy Assessment and Management
 of Urinary Incontinence (study day); and
- Physiotherapy Assessment and Management of Pregnancy-Related Musculoskeletal Conditions (advanced follow-up study day).

Further information about any aspect of these POGP programmes, including prices for purchasing a package of workshops and courses, is available from Karen Armitage, the POGP course administrator (e-mail: pandkarmitage@btinternet.com).

Camilla Lawrence Workshop Coordinator

Research Prize and poster competition

Research Prize

The 2015 Annual Conference in Harrogate (see pp. 64–65) was a showcase for all those who had been successful in the POGP research competition. The top four entrants were each given a 15-min slot to present abstracts describing their study, survey, trial or service evaluation. Congratulations go to all those who shared their work and contributed to a varied and interesting programme. They all spoke eloquently, many presenting for the first time at Conference.



Figure 2. Research Prize winner Clare Monaghan with her certificate.

Janette O'Toole investigated patient satisfaction with the information provided about major gynaecology surgery (see pp. 49–53). Ilana Kyte and Naomi Frankfurt jointly took to the stage to share their new physiotherapy service approach to managing lumbopelvic pain in pregnancy (see pp. 38–43). Professor Phil Reed presented the results of his team's randomized controlled trial (RCT) of the impact of a brief tele-support intervention on initial attendance at physiotherapy group sessions for pelvic floor problems.

Prior to Conference, one entry was judged to be the overall winner of the POGP Research Prize, an award that is only in its second year. The 2015 winner was Clare Monaghan, who presented her mixed-methods evaluation of a manual therapy treatment approach plus usual care versus usual care only for pelvic girdle pain (PGP). She was presented with her certificate and a £100 prize (Fig. 2).

We hope to print all these studies in the journal, and would like to thank all those who have so successfully shared their work. It is hoped that this will encourage delegates and POGP members to consider conducting research (e.g. a small, work-based audit, a service evaluation, a dissertation study or an RCT), and to aspire to speaking at Conference.



Figure 3. Alison Clarke standing beside her winning poster.

Poster competition

Two visually engaging posters (see pp. 61–63) were displayed at Conference. Delegates were able to read and discuss these with their designers, Alison Clarke and Doreen McClurg, and vote for the best poster. Many thanks go to both Alison and Doreen, as well as congratulations to Alison, who was presented with a certificate and a £50 prize for the best poster (Fig. 3). Her submission effectively presented a service redesign in the NHS Highland health board (Clarke *et al.* 2015). This was intended to improve women's access to high-quality continence physiotherapy services in this large geographical area. We look forward to seeing many more posters at future conferences.

Shirley Bustard Research Officer

Reference

Clarke A., Ferguson K. & Craine S. (2015) Promoting and developing a continence service in Highland. *Journal of Pelvic, Obstetric and Gynaecological Physiotherapy* **118** (Spring), 74–75.

Papers in other journals

This article highlights some papers of interest that have been published in other journals. A further selection can be found in the journal's extended online content.

Clarke (2015) addresses the necessity of collaborative working to end female genital mutilation in the UK. This comment piece includes a good list of resources, including websites and e-learning materials.

"Pelvic girdle pain: are we missing opportunities to make this a problem of the past?" (Fishburn & Cooper 2015) is a clinical practice article that addresses the current myths about PGP and its management.

In a systematic review of eight papers, Lin et al. (2015) demonstrate that pelvic floor muscle (PFM) training is associated with improvements in bowel function and health-related quality of life. However, none of the papers reviewed by the authors were RCTs, and more research is needed.

In a study involving 31 participants, Neumann *et al.* (2015) found that transperineal ultrasound can be used as an alternative to digital rectal examination in the assessment of PFM contractions in men, and that men given verbal instruction can correctly perform a PFM contraction.

Yuan et al. (2015) conducted an RCT involving 240 women that demonstrated that acupuncture

treatment brought about an improvement in the symptoms of overactive bladder.

Alison Clarke

Papers in Other Journals Coordinator

References

Clarke E. (2015) Working together to prevent female genital mutilation. *British Journal of Midwifery* **23** (11), 768–770

Fishburn S. & Cooper T. (2015) Pelvic girdle pain: are we missing opportunities to make this a problem of the past? *British Journal of Midwifery* **23** (11), 774–778.

Lin K.-Y., Granger C. L., Deheny L. & Frawley H. C. (2015) Pelvic floor muscle training for bowel dysfunction following colorectal cancer surgery: a systematic review. *Neurourology and Urodynamics* 34 (8), 703–712.

Neumann P., Fuller A. & Sutherland P. (2015) Verbal pelvic floor muscle instructions pre-prostate surgery assessed by transperineal ultrasound: do men get it? *Australian and New Zealand Continence Journal* **21** (3), 84–88.

Yuan Z., He C., Yan S., *et al.* (2015) Acupuncture for overactive bladder in female adult: a randomized controlled trial. *World Journal of Urology* **33** (9), 1303–1308.

Annual Conference 2016

We are proud to announce that the POGP Annual Conference will be held at the BT Convention Centre in Liverpool (Fig. 4) on Thursday 10 November 2016. This year, it will be a one-day

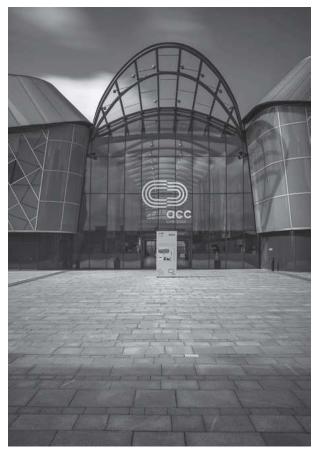


Figure 4. Liverpool BT Convention Centre.

event. This is because Conference will be run in affiliation with the CSP in order to link in with the Fourth European Congress of the European Region of the World Confederation of Physical Therapy (CSP 2016), which will be held at the same venue on 11–12 November 2016 (see pp. 72–73).

In keeping with the broad remit of the pelvic, obstetric and gynaecological physiotherapist, a wide range of speakers will cover a variety of topics. Kari Bø will discuss alternative exercises to pelvic floor muscle training for stress urinary incontinence. Carl Clarkson will talk about acupuncture treatment for PGP during pregnancy. There will be a total of eight key presentations.

Conference is intended to appeal not only to specialist physiotherapists from within the field, but also to colleagues who are considering a change of career direction or who have occasional contact with these patients. We hope to create a lively debate and showcase the latest research to support clinical practice.

We encourage members to submit posters for display at Conference 2016. The authors of the top four entries will also have the opportunity to speak about their work for 5 min, and there will be a prize of £100 for the best poster. This is a wonderful opportunity to showcase your work. Please go to the website (http://pogp.csp. org.uk/) for more details and the deadline for submissions. We look forward to receiving your posters.

Samantha Gillard

National Conference Organizing Committee Chairman

Reference

Chartered Society of Physiotherapy (CSP) (2016) *ER-WCPT Congress 2016*. [WWW document.] URL http://www.csp. org.uk/news-events/events/er-wcpt-congress-2016

Ann Bird Award

Anne Bird was chairman of the Association of Chartered Physiotherapists in Obstetrics and Gynaecology (now POGP) from 1985 to 1988. As a superintendent at Bristol Royal Infirmary, she created a centre of excellence for obstetric and gynaecological physiotherapy. The Anne Bird Award commemorates her life by encouraging and recognizing in others the qualities that she valued.

This prize is normally awarded annually to an individual, or individuals, who have shown overall excellence, professionalism and empathy



Figure 5. (Left to right) Anne Bird Award winner Camilla Lawrence is presented with her certificate by POGP Chairman Doreen McClurg.



Figure 6. (Left to right) POGP Secretary Irene Pullar, Anne Bird Award winner Julie Ellis and POGP Chairman Doreen McClurg.

in their educational development within POGP. The successful nominee(s) will also have made a special contribution to a POGP post-registration course, or to physiotherapy in women's health. Each candidate is nominated by three people, one of whom must be a POGP member. Nominations

are confidential, and are made using the application form on the website (POGP 2016). These must be submitted to the chairman by 1 July each year.

Last year, we were delighted to present the Anne Bird Award to Camilla Lawrence (Fig. 5) and Julie Ellis (Fig. 6) at Conference. Both members have made huge contributions to the work of the POGP Educational Subcommittee, and shown great personal commitment. Camilla has coordinated the development of new POGP workshops (see pp. 83–84), and Julie has developed the new online *Physiotherapist's Educational Handbook of Women's and Men's Health* (POGP 2015). These developments will greatly enhance the education of specialist physiotherapists working in these areas. Congratulations go to both Camilla and Julie on their success.

Shirley Bustard *Research Officer*

References

Pelvic, Obstetric and Gynaecological Physiotherapy (POGP) (2015) Physiotherapist's Educational Handbook of Women's and Men's Health 2015. [WWW document.] URL http://pogp.csp.org.uk/publications/physiotherapists-educational-handbook-women-menshealth-2015?destination=node%2F409036

Pelvic, Obstetric and Gynaecological Physiotherapy (POGP) (2016) POGP Anne Bird Prize Nomination Form. [WWW document.] URL http://pogp.csp.org.uk/documents/acpwh-anne-bird-prize-nomination-form

Team Squeezy innovation award

Many congratulations go to Myra Robson and her Squeezy team (Fig. 7) for winning a recent award. She received this for her hard work on



Figure 7. Myra Robson (centre) with Jonathan Waybell (left) and Wyc Slingsby (right).

the Squeezy pelvic floor mobile phone applications (apps) for women and now men.

Out of 78 abstracts, Myra was awarded third place at the Lewisham and Greenwich NHS Trust Research Innovation Day, an annual event that showcases research and innovation projects within the trust.

However, because she was busy promoting Squeezy in the exhibition hall at the 2015 POGP Annual Conference in Harrogate, Myra was unable to receive her award in person or do a presentation about her product.

Romy Tudor

Journal Subcommittee

Do you need a bursary? POGP can help

Did you know that POGP now has new bursary, courtesy of Dr Jo Laycock?

The Jo Laycock Continence Research Bursary will help members to fund attendance at a relevant conference, or undertake a small research project (e.g. a literature review, audit or survey). The closing date is 31 July 2016, and the winner will be announced at Conference on 10 November 2016.

More information is available on the website (POGP 2016a).

The Continence Subcommittee have also launched a new award (POGP 2016b). This is a legacy of Chartered Physiotherapists Promoting Continence, who joined with POGP in 2014. Awarded to members working in the area of continence, the closing dates for the Continence Subcommittee Bursary are 1 April and 1 October each year.

However large or small your project is, we are here to help you. Contact us if you need any further information.

Executive Committee

References

Pelvic, Obstetric and Gynaecological Physiotherapy (POGP) (2015) *Jo Laycock Continence Research Bursary*. [WWW document.] URL http://pogp.csp.org.uk/documents/jo-laycock-continence-research-bursary

Pelvic, Obstetric and Gynaecological Physiotherapy (POGP) (2015) Continence Sub-Committee Bursary Application Form. [WWW document.] URL http://pogp.csp.org.uk/documents/continence-sub-committee-bursary-application-form