

Hand in hand

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Physiotherapist Aidan Rich describes GPs as 'the central part of the wheel' when it comes to general practice and physiotherapy working together for better patient outcomes.



GP Dr Stephanie Muller regularly refers patients to physiotherapists for many specific types of treatment, such as pelvic floor and continence issues.

Patients can benefit from a close working relationship between GPs and physiotherapists.

Physiotherapists use evidence-based care to assess, diagnose, treat and prevent a wide range of health conditions and movement disorders. However, other healthcare practitioners may not necessarily be aware of some of the specialties within physiotherapy, or some of the conditions for which patients can be referred to physiotherapists.

'The scope of physiotherapy is a wide one,' Aidan Rich, an APA (Australian Physiotherapy Association) Sports Physiotherapist, told *Good Practice*. 'We've got 22 national special groups and 19 different disciplines of physiotherapy.'

'The conditions people would liaise with their GPs about would vastly differ across those groups.'

These varied disciplines within physiotherapy include musculoskeletal, neurology, occupational health, sports, cardiorespiratory, paediatric, gerontology, and many others. (Refer to breakout one page 19 for more information.)

'There is often a physiotherapist who will be able to help with a specific type of medical condition,' Rich said.

Julianne Pegler, National Chair of the Australian Physiotherapy Association for

Paediatrics, has a passion for community education about physiotherapy.

'Sometimes people think that we just do things like massage and ultrasounds, but some physiotherapists have specialist training [and] are very well placed to provide evidence-based medicine,' she told *Good Practice*.

The relationship between GPs and physiotherapists is an important one that can result in improved continuity of care for individual patients.

'GPs are that central part of the wheel,' Rich said. 'Physiotherapists rely on GPs for a lot of our referrals, and we also utilise GPs in terms of asking their opinions about certain conditions or medications, prescriptions, radiology referrals, or referrals for other investigations.'

The APA is currently working on fact sheets to educate healthcare professionals, as well as the public, about physiotherapy's effectiveness in treating a broader range of conditions.

Benefits of partnership

Dr Stephanie Muller, a GP who previously worked as a physiotherapist, believes a strong relationship between these different

professions can be especially beneficial in terms of improved patient outcomes, particularly in the event treatment does not progress as expected.

'The physiotherapists I work with and refer to don't hesitate to communicate with me if they're not happy with how things are progressing, which is a really good thing for the patient,' she told *Good Practice*.

'Having a good relationship means that [the physiotherapist] is confident about feeding back to me – "This is not progressing well"

– and then I can take action on that. We trust each other to work that way.

'That's the informal team approach. If either party thinks something isn't making sense, perhaps we need to review the diagnosis and consider further investigations.'

Pegler takes the same type of approach with her referring GPs.

'I feel like GPs and physiotherapists are ideally suited for each other, to work together to get the best outcome for the patient,' she said.

'I never work in isolation; I try to correspond with whoever I receive the referral from. There's open communication.

'I'm never reticent about suggesting further investigation or specialist referral.'

Lesser-known conditions

Having spent four years working as a physiotherapist prior to beginning her general practice training, Dr Muller continued her physiotherapy practice until she graduated as a GP. >>

Specific interests

The Australian Physiotherapy Association (APA) features a range of groups dedicated to specific areas of the profession:

- Acupuncture and dry needling
- Animal
- Aquatic
- Business
- Cancer, palliative care and lymphoedema

- Cardiorespiratory
- Disability
- Educators
- Emergency department
- Gerontology
- Leadership and management
- Mental health physiotherapy
- Musculoskeletal
- Neurology
- Occupational health

- Orthopaedic
 - Paediatric
 - Pain
 - Rural
 - Sports
 - Student
 - Women's, men's and pelvic health
- Visit www.physiotherapy.asn.au for more information.



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Paediatric physiotherapist Julianne Pegler regularly works closely with GPs.

>> This experience means she is well placed to refer her patients to more specialised physiotherapists.

'Generalist physiotherapists, much like GPs, have a bit of knowledge about a lot of things, but there are physiotherapists who are experts in their fields,' she said.

The general practices at which Dr Muller works as a GP have created 'address books' to keep note of the specific interests of their consultant doctors, specialists and allied health professionals in order to aid in referring patients to the most appropriate healthcare provider.

'There are, for example, groups of female physiotherapists in Melbourne who do purely pelvic floor and continence, and that's their specialty. It's nice to know they exist and to understand what they do,' she said.

'And there's benign paroxysmal positional vertigo [BPPV], which is a condition that is really well treated by physiotherapists using ongoing vestibular rehabilitation exercises.

'There are also experts in vestibular rehabilitation specifically for this problem, which is treated with some simple manoeuvres.

Physiotherapy specialisation

The Australian Physiotherapy Association (APA) features a structured pathway towards specialisation as awarded by the APA:

- Tier 1 – A qualified physiotherapist who has completed an undergraduate degree, joins a relevant national group and undertakes professional development.
- Tier 2 – A physiotherapist who has undertaken a master's degree or equivalent in a specialty field, eg sports, and is then able to use the title 'APA Sports Physiotherapist'.
- Tier 3 – A physiotherapist who has been admitted to the Australian College of Physiotherapists as a Fellow after further training, research and examinations.

Only a Tier 3 physiotherapist may refer to themselves as a specialist as awarded by the Australian College of Physiotherapists (including the awarded year) and may use the designation 'FACP'.

Visit www.physiotherapy.asn.au for more information.



Aidán Rich (left) is recognised as an APA Sports Physiotherapist.

'The rehabilitation exercises are quite specific and I think people do better if they have an expert involved.'

Rich agrees that there are many more medical conditions that can be referred to physiotherapists than those with which other healthcare practitioners may be familiar.

'For example, people with neurological conditions such as multiple sclerosis or Guillain-Barré syndrome, or people who have survived a stroke, can benefit dramatically from physiotherapy intervention,' he explained.

'And people with chronic pain; there has been a huge amount of research into pain science and pain rehabilitation.'

Greater levels of education or updates for GPs about the scope of, and evidence for, physiotherapy would ultimately be beneficial for patients who require a referral.

'Both of the professions are always changing,' Dr Muller said.

'So we can always become better practitioners in the response to new evidence and new learning.' 🧠

Australian Physiotherapy Association

The Australian Physiotherapy Association (APA) is a national organisation that is the peak body representing the interests of more than 23,000 physiotherapists throughout Australia.

The APA offers its members and other healthcare professionals multiple resources for improved patient care.

GPs can locate different physiotherapists according to their specialties, interests, languages and geographical locations by using the 'Find a physio' tab on the APA website. Visit www.physiotherapy.asn.au for more information.