

SOME IMPRESSIONS OF THE WORLD CONFEDERATION FOR PHYSICAL THERAPY

By FRED A DE BRUIN

THE WORLD CONFEDERATION FOR PHYSICAL THERAPY was held in New York from 17th—23rd June. The C.S.P. charter plane left London on 12th June and returned on July 2nd, so that time was allowed for hospital visits and sightseeing, and I tried to get to as many hospitals and institutions as possible. It proved to be a very hectic but enjoyable and stimulating visit.

The American Physiotherapists went out of their way to make the overseas visitors at home, their friendliness, hospitality and helpfulness made the visit a very pleasant one and we soon cottoned on to "Americaneese".

I left the U.S.A. determined to do all in my power to see that the South African Society of Physiotherapy is adequately represented at the World Conference to be held in Paris in September 1959. Our Society is rapidly expanding, physiotherapy is gradually making progress in South Africa and it is most important that we be fully represented in Paris. At this Confederation countries with a smaller membership than ours, and some even further away from New York than we are, sent more representatives than we did. Thirty-nine countries were represented and the total attendance was 2,486.

U.S.A.	1,733	representatives.
Canada	196	" "
Britain	99	" "
Australia	30	" "
Denmark	12	" "
Germany	13	" "
Holland	10	" "
New Zealand	3	" "
Norway	16	" "
Sweden	25	" "
France	9	" "

Algeria, Argentine, Austria, Belgium, Brazil, British Guiana, Columbia, Cuba, Egypt, Eire, Finland, Haiti, India, Indonesia, Iran, Israel, Kenya, Korea, Malaya, Mexico, N. Rhodesia, Portugal, Russia, Thailand, Trinidad, Turkey and Venezuela were also represented and it was a truly international conference.

Despite the differences of language and race we found that we had a common ground in physiotherapy and the treatment and well-being of the patient. It was most interesting to find that other physiotherapists have the same problems of state registration, training and shortage of trained personnel as we do.

During the Conference concurrent sessions were held, sometimes four at the same time. There was also an excellent programme of films in the film theatre and a crowded display of scientific and professional exhibits. It was impossible to attend the official meetings as well as all the lectures and I felt that at least to do full justice to all the lectures and functions that were organized—how I wish that you could all have been there.

I regret to state that I heard some most peculiar and distorted opinions about S. Africa and S. African physiotherapy and spent some time on propaganda, yet another reason for adequate representation at the next Congress.

As far as physiotherapy in New York and Boston is concerned I feel very reluctant to state my views—I was only there for 3 weeks and it is not easy to form an impression in such a short time. Rehabilitation is *the* keyword for American Physiotherapy and I visited the Kessler Institute and the Institute of Physical Medicine and Rehabilitation in New York "the largest centre of its kind in the world offering complete and integrated services in physical medicine and rehabilitation to both in-patients and out-patients." This was an experience which I shall never forget, *all* the departments and services necessary for rehabilitation under one roof—an ideal which we hope will one day be realised in South Africa.

A feature of all the hospital departments which I visited was the complete co-operation between the members of the rehabilitation team and a basic "getting down to brass tacks" in treating the patient as a person. At an evaluation clinic which I attended, 15 persons were present:—a physical medicine specialist, an orthopaedic surgeon, a physician, a psychologist, an intern, a nursing sister, a physiotherapist, a speech therapist, an occupational therapist, an orthopaedic technician, a social worker, a home visitor, a vocational guidance expert and a "job placement" officer. Before the patient came in, his case history was read and discussed and the probable trend which his treatment would take. When the patient came in he was met with the words "What would you like us to do for you?" and then a complete and co-ordinated programme was mapped out.

The rehabilitation of paraplegics, hemiplegics, spastics, amputees and polios is excellent and the patient is truly rehabilitated in that he can take his place in society and hold down a job of work. It was not uncommon to find doctors and interns, themselves ex-patients, carrying out the work from a wheel-chair. Disabled persons are accepted by the public as equals in the labour market.

Training in the U.S.A. differs radically from the English and South African. The emphasis is on rehabilitation and not so much on the relief of pain. Ante and post natal work, chest work and electrotherapy are not emphasized as much as in our training. The training is shorter.

Speaking amongst the other overseas visitors nowhere did we find a department comparable to a general hospital department as we understand it. Nearly all the electrotherapy is left to the doctor and whirlpool baths and hydro-colators (wet packs) appear to be very popular. American patients have to pay for their treatment, unless covered by an insurance scheme, and treatment is very expensive by our standards. It may cost \$20—25 per day to remain in hospital (board and lodging alone not including doctors' fees and treatment) and half an hour's physiotherapy costs from \$3—5. The rate of exchange is \$2.80 to £1. I felt that expense may be one of the factors in not seeing, what to us is all too common, patients with backache, stiff neck, fibrositis, painful joints and flat feet receiving treatment.

I tried to discover as far as possible the various trends in the treatment of poliomyelitis and saw the conservative method, the Sister Kenny method and the proprioceptive neuromuscular facilitation technique. All these methods have their staunch supporters.

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BRANCH NEWS

Miss Lovely, of the staff of Addington Hospital, Durban, is at present on leave in England. Meanwhile, Mrs. P. Pilkington and Mrs. Greenway have taken up posts at Addington.

The members of the Natal and Zululand Branch offer their condolences to Miss Cherrington (Addington Hospital), on the occasion of the death of her father, who died on August 28th after a long illness.

Miss Coreen Knox-Perkins (Addington Hospital) is on a trip to visit friends in the U.S.A.

Mr. A. D. Moig has taken up a post at Edendale Hospital, Pietermaritzburg.

Miss J. Thomas-Davies, from the United Kingdom, and Miss J. Roberts, from New Zealand, have joined the staff of the King Edward VIII Hospital, Durban.

NORTHERN CAPE BRANCH NOTES

Members are delighted to hear that Miss D. Tredrea returns to S.A. in September after successful eye operations in London.

News of Mr. E. J. Nicholson is that he has been appointed to the Rehabilitation Orthopaedic Hospital, Stanmore, England.

The Helen Bishop Orthopaedic After-Care Home is at present without a permanent Physiotherapist. Miss Setzer and Mrs. Yeowart are doing part time work there to help bridge the gap a little.

WESTERN PROVINCE BRANCH

We wish Mr. MacMurray well in his new office as Examiner to the Royal College of Surgeons. He has always been a good friend to Physiotherapists.

Mr. Hodges has left a well functioning workshop in Cape Town and has gone to Rhodesia to bring to that community his able help in the shape of Taylor's Braces, Gorman Springs and Camp Corsets, etc. He was a tonic to know and he made it his business to be *au fait* with the latest trends from overseas.

Mr. Bill Woodgate. We wish happiness in his new post at the Lady Michael's Orthopaedic Home, Plumstead.

Mrs. Sweet. We wish her joy in her new home at Tokai. Miss J. Goldman. We trust her semi-retirement is happy and with the better weather we hope to see more of her.

Mr. K. Nicol. It is no longer necessary to read Prof. Spock, as he has gained a wealth of experience looking after Junior whilst Mrs. Nicol was overseas.

Our General Meeting on July 22nd with Miss J. Blair as guest speaker was a pleasure. We were able to learn at first hand what C.E.C. were doing for us. It is a pity there cannot be more migration and interchange of Physiotherapists.

Change of address:

Mrs. E. Myer, 7 Oakley Court, Protea Rd., Claremont.

SOUTHERN TRANSVAAL BRANCH NEWS

On July 12th, Dr. Jack Gear gave the branch a very stimulating and interesting talk on "Some Pitfalls in the Evaluation and Medical Treatment". The talk was thoroughly enjoyed by all members present.

A Film evening was held on August 21st. A disappointingly small audience saw three very good films. Two of which were of general interest and one of "Short-wave Technique."

MARRIAGES

Miss S. Levitt to Mr. J. Halpern, August 5th, 1956.

Miss Eileen Booth—Medway. Mrs. Medway is still at Wynberg Hospital.

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It was only possible to attend about a quarter of the lectures. The complete proceedings are to be published in January so that you will be able to read them then. One of the most helpful and stimulating lectures discussed the method of using "tonic neck reflex" in the treatment of hemiplegia.

Amongst the tips that I picked up was glosso-pharyngeal breathing or frog breathing. Patients with respiratory paralysis are taught to "gulp" air into the lungs, so that they become filled after 10 "gulps" and therefore can build up their vital capacity.

In conclusion I must say how much I enjoyed the conference and how grateful I am that I had the opportunity to attend it as the representative of the South African Society of Physiotherapy. Let us do everything in our power to see that South Africa is fully represented at the next World Confederation in Paris.

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The colour photographs (Figs. 1—36) were taken by the author and they show the various activities of the Physical Medicine Department.

I wish to thank Dr. H. Moross, Medical Superintendent of Tara, for his very kind advice and co-operation in making this presentation possible.

FOR SALE

PRIVATE PRACTICE in East London. Fully equipped treatment rooms in new Medical Centre. Owner wishes to retire for domestic reasons. For further particulars apply: P.O. 25, Physiotherapy Department, General Hospital, Johannesburg.

PHYSIOTHERAPIST required, full-time or part time from 1st January, 1957, for Private Practice in Germiston. For further particulars please write to Mr. J. M. Botha, 203 Medical Centre, Germiston, or Phone 51-1933.

LOCUM wanted to take over Private Practice at Durban North, Natal. Owner going overseas in March. Locum required January 1957 to September 1957. Locum not required on Salary basis, but to take over all profits and pay expenses. Car a necessity. For further particulars apply: P. Uniacke, Rooms 16/17, 11, Broadway, Durban North.

ESTABLISHED PRIVATE PRACTICE in Educational City for immediate sale. For further particulars apply: P.O. 28, Physiotherapy Department, General Hospital, Johannesburg.

1 MAINS OPERATED PORTABLE UNIT in black case giving galvanism and sinusoidal, in perfect condition. Makers: Medical Supplies Association, Model 0. £20. Apply: Mrs. A. Close, P.O. Box 355, Livingstone, Northern Rhodesia.

OLD ESTABLISHED PHYSIO PRATICE for sale in Southern Rhodesia. Domestic reasons for sale. For further particulars apply:—P. 027, Physio Dept., General Hospital, Johannesburg.

SITUATIONS VACANT

VACANCY occurs for a part time fully qualified physiotherapist. Hours: 9 a.m.—1 p.m. Mondays to Fridays. Apply: Secretary, United Cerebral Palsy Association of South Africa, P.O. Box 10398, or Phone 33-3367/8.

LOCUM PHYSIOTHERAPIST required for private practice for November or December, 1956. Direct enquiries to—13, Bright Street, Somerset West, Cape.