Letter to the Editor

A concern has arisen amongst a number of physiotherapists recently amongst them Dr. Wayne Diesel, Jacqui McCord-Uys and myself, regarding our professional status. This was born out at All Africa Games in Johannesburg in September,1999, where Jacqui and I were the organising physiotherapists for the 5000 foreign athletes.

We are concerned that our field of expertise as physiotherapists is being eroded from all sides. The chiropractors are performing competent and effective manipulations and are also doing myofascial releases, trigger point therapy, P.N.F., exercise/rehabilitation and even acupuncture. The sports masseur is giving the sports people what they want ... hands on massage. They are also becoming more and more "knowledgeable "about sports injuries and expanding their advice and treatment.

The biokineticians are well into the

field of exercise and rehabilitation. They are energetically attending all the courses on pelvic stabilization, sports injuries etc. They too, have greatly expanded their field.

At the All Africa Games a multi disciplinary medical team attended to the "5,000 foreign athletes at the medical clinic in the Athletes Village. The core group consisted of 3 sports physicians and two physiotherapists. There was also an orthopaedic surgeon, general practioners, pharmacists and a pathology laboratory. The rest of the medical team comprised of 63 physiotherapists, 140 physiotherapy students, chiropractors - 150 and sports masseurs - 100 The biokineticians could not attend.

At the Africa Games we were sad to see a trend developing whereby the chiropractors and the sports masseurs were referring the athletes to physiotherapy for MACHINES!! The interaction between our disciplines was excellent and we have no problem with these professions. In that environment at the Games we could address this false perception. The worry is that this is happening OUT THERE!

The only solution is that we, as physiotherapists, MUST continue to raise our standards and provide the patients with consistently excellent treatment. We could not agree more with the letter from Brun Winter in the September edition that "to be successful you don't have to do extraordinary things, just do ordinary things extraordinarily well."

We have a wonderful profession, but we cannot sit back and presume that all will be well. We need to be involved with continuing education and research.

Let us strive to give our patients our absolute best at all times.

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