Vitalizing Practice Through Research and Research through Practice

December 3, 2009

I am most honored to speak at this very special conference. Hopefully this select gathering will be recognized and remembered for having an unprecedented impact on the profession of physical therapy, specifically to expand upon research.

At the outset I would be remiss if I did not recognize and acknowledge the significant and enduring contributions made by many of you in attendance. You have elevated the research capabilities of physical therapy to an unprecedented level. Your work has reaffirmed the lofty status research holds along with education and practice in the lexicon of the physical therapy profession.
I have acquired the utmost respect and admiration for you in the research community for the countless hours you devote behind the scenes performing the numerous and indispensable works few of us are able to undertake. I am also acutely aware as a Foundation Trustee, of the inestimable value of the services you provide to our Foundation. Our obligation in return is that we not compromise the integrity of your research as we manage the business affairs of the Foundation.

I would be derelict if I were not to extol the virtues of APTA staff members who have developed and nurtured relationships with prestigious funding agencies in our country and opened doors to resources we never deemed possible to approach for assistance. Their efforts are an example of why we find ourselves here today exploring new horizons for physical therapy.

Having been a member of APTA since 1950 and an active participant in the affairs of our Association and profession, I can
recall when we first learned that we had better get on with the business of scientifically validating our existence as a profession.

To respond to this challenge, in 1957 the APTA Board of Directors under the leadership provided by President Jane Carlin, a Philadelphian, established the PT Fund. The purpose of that nonprofit corporation was to pursue scholarly activities on behalf of the APTA to elevate the status of physical therapy along with investigating the effectiveness of physical therapy services. Unfortunately, the PT Fund struggled for many years to meet the burgeoning demands being placed on the profession to satisfy requirements, which we refer to today as evidence based practice. For this reason, in 1979, the PT Fund was dissolved. Some of the former officers of the PT Fund helped formulate plans, they believed, would remedy the identified deficiencies of the Fund. It was this same group that made recommendations to the APTA Board of Directors to consider dissolution of the Fund, and the development of a new organizational structure to resolve the
lingering problems. This new organization was named the Foundation for Physical Therapy and was incorporated in 1979. The key reasons for the Fund’s demise boiled down to three issues: (1) failure of APTA members to acknowledge the importance of contributing to the case for developing scientific evidence to support our treatment interventions, (2) failure to recognize that we could not proceed in the absence of a cadre of physical therapy trained researchers, and (3) that a more substantial and sustainable source of financial assistance would be mandatory for success.

Once approval for the Foundation was granted, the first order of business was to present a motion to our House of Delegates requesting a $15 assessment for all active members of the Association with the proviso that failure to comply would result in termination of membership. In a relatively short period of time our House of Delegates gave their approval to enact this assessment. A sum of approximately $350,000 was raised. After the first year of operation, the Foundation for Physical Therapy awarded more
grants than the PT Fund had awarded in its 21-year history.

Through ensuing years, the Foundation demonstrated steady financial growth.

In 1979 the assets of the Foundation for Physical therapy were estimated to be $350,000. Today, our assets are in the neighborhood of $5 million. We should all have the good fortune of improving our personal investments similarly. Since 1979 the Foundation for Physical Therapy has awarded an estimated $12 million for research and scholarship grants to some 671 emerging and prepared physical therapist researchers. In addition, external funding sources have provided funding of $85 million for Foundation prepared researchers.

I view the members of APTA as quasi shareholders of the Foundation. You have contributed significantly to maintain and expand the financial stability of the Foundation. Steps have been taken to sustain the safety and soundness of the organization. One
such matter relates to our bylaws. A comprehensive revision of the bylaws to insure the transparency and independence of Foundation sponsored research was completed, and approved this year by both the APTA Board and Foundation Trustees. Coincidentally, soon after our revisions were completed, the IRS promulgated regulations, which in effect mandated this same purpose. Today we are in complete compliance with the rigorous standards for operation of non-profit corporations.

These regulations require that the Foundation for purposes of absolute independence of its research be organizationally separated from APTA. We will maintain, and APTA has concurred to continue working in a collaborative manner in order to insure that we best serve the interests of our members, donors and the profession. I have described this relationship as being one where the parties are organizationally separated but philosophically joined. A recent Editorial in our Journal very clearly documents the details of these bylaw revisions, which are available for review.
Even though we face challenges in the coming years to comply with the revolution that is going on in healthcare delivery systems, we in physical therapy must still confront and contend with some vexing matters pertaining to our research, which no longer can be resolved by postponement. In my opinion, we remain vulnerable in some areas because of the many differences and inconsistencies that exist in our interventions, related to both patients and providers. We must be more cognizant of these differences and assess them more precisely. I know from my discussions with many colleagues that you are aware of this daunting problem. However, it must be better understood in order to more accurately assess our research findings. Another matter of equal importance contributing to some of the imponderables related to our research has been our inability to establish dosage parameters for many of our interventions.
On another subject, I have been somewhat disappointed in my fellow clinicians and their reluctance to become more involved with research that might have a direct impact on practice. I recall from my days in practice how often I wished I had someone with expertise in clinical research to answer questions related to the efficacy of our interventions. I have been pleased to see that clinically relevant data concerning the practice of physical therapy is originating from centers with large captive patient populations. Data that enables them to scientifically direct patient care and also enables them to extrapolate supportive information to provide more informed answers to impending questions. The potential these delivery models have for the establishment of sound Health Policy decisions related to how and when physical therapy services are delivered is substantial. I recognize the importance of such data and I believe it should be forthcoming in greater amounts from many sources. I do not wish to imply that centers like the University Pittsburgh and the Inter Mountain Health Care System of Utah whose work has been presented at this meeting should be
the only centers from which data of this type should originate. The opportunity to develop a consortium of smaller centers in various regions of the country may offer intriguing opportunities.

A recent article appearing in our Journal, “The Responsibility to Put Health Policy in Perspective”, provides an excellent source of information on this subject.

Over the years I have heard criticisms from the practice community that not enough of our research is directed to those more commonly encountered diagnostic conditions seen in practice. Hopefully this concern will be investigated further and addressed. Fortunately, the Foundation’s Scientific Review Committee reports that the trend for both the quantity and quality of grant requests are increasing in a very desirable manner. Perhaps it would be timely to revisit our research agenda and consider some serious priority decisions about where our research dollars should best be spent. It has been my observation when
seeking solutions to complicated problems confronting APTA that collaboration between disciplines is the most efficient and practical way to commence. In those instances where we have failed to do so, in my opinion has worked to our detriment.

I hope you understand that my opinions and remarks are being expressed in the language of a clinician and not as a scientist’s. It has been my tendency in life to try to simplify overly complex issues. Borrowing from Occam’s Razor, I believe, in the principle that the” simplest explanation or strategy tends to be the best one.”

I trust the essence of what I was hoping to communicate survived my simplification.

Experience, dictates to me, that the numerous and noteworthy events and contributions of past and present years, in concert with proceedings from this Conference bodes well for the future of the profession of physical therapy.
Thank you for your indulgence, I am truly excited about what lies ahead for our profession. If I have learned anything about our profession as it relates to the consumers we serve, it is to propagate and support with unmitigated tenacity those practices that we know to have proven value, and which will be of benefit, first and foremost to the patients we serve and secondarily to our profession.

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