European – level analysis of invasive physiotherapy scope of practice and regulation

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Relevance: Invasive Physiotherapy (IP) includes techniques that entail the use of a needle to the application of physical agents. There are different methods and techniques under this scope, such as the dry needling and EPI® (electrolysis percutaneous intratisular) or more traditional ones as Acupuncture.

More and more physiotherapist (PTs) all around the world are using IP in the treatment of musculoskeletal disorders but the regulation for their practice and the specific nature of the techniques included under the scope of IP in each country remains unknown.

Purpose: To map the use of IP in the member organizations (MOs) of the European Region of the World Confederation for Physical Therapy (ER-WCPT).

Approach/evaluation: A descriptive study was conducted. In May 2014, all MOs engaged in the ER-WCPT General Meeting (GM) were invited to complete an "ad hoc" questionnaire. Data were analyzed using descriptive statistics package.

Outcomes: 36 MOs attended the GM. 33 answered the questionnaire (response rate 91.66%). Two questionnaires were withdrawn due to inconsistency in the answers.

The use of IP by PTs was reported in 54.8% of MOs. The existence of regulation in the country for the use of invasive techniques was reported by the same percentage.

National competent authorities for health were the entities responsible for IP regulation most frequently (14 countries (82.4%)), followed by the MO (2 countries (11.8%)) and the competent authority for PT (1 country (5.9%)).

The most frequent invasive techniques used were dry needling (48%) and acupuncture (38.7%), following by aspiration (32.3%) and injection (16.1%). Three responders reported using EPI®. Other techniques reported by the countries where urogenital exploration and Dry Needling for Hypertonia and Spasticity.

Discussion and conclusions: More than half of the ER-WCPT MOs (54.8%) informed that the PTs are using IP in their countries. Although this ratio is consistent with the percentage of countries with regulation for the use of IP techniques that does not imply that the use of this practices by PTs is regulated. In some countries, the regulation does not allow the IP practice, limiting their use to other health professionals. In others, despite of the fact PTs are using IP, there are not specific regulations for that.

Dry needling and acupuncture are the most frequent techniques used by PTs in Europe. However, they are not as extended as it could be presumed (only in PEDro database we can find >3000 records for the keyword acupuncture). A small number of countries have reported the use of EPI® or probes for incontinence. This fact, adding to the lack of regulation, could suggest the need of clarification about what kind of techniques are under the scope of IP.

This is a first intent to map the situation of IP in Europe. Future work needs to consider analyze the role of MOs as regulator, the relationship with other health professions, and research if additional educational requirements or accreditation are needed for their use.

Impact and implications: The fact that IP techniques are a common practice for EU PTs, involves the development of European Standards to limit the framework and to define the educational requirements.

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