**President’s Message**

**IOPTWH Moving Forward**

*Rebecca Stephenson*

*IOPTWH President*

rgspt@comcast.net

It was wonderful to reconnect with many of you at the 16th International Congress of the WCPT in Amsterdam. Congratulations to our new member countries Nigeria, Saudi Arabia, Croatia, Bermuda, Finland and Turkey and to new Friends of IOPTWH from India and Chile.

All of our programming was a success from the IOPTWH Business Meeting to the satellite program and the early A.M. round table discussions. Many thanks to Marijke Sliker-ten Hove from the Dutch pelvic physiotherapy group (NVFB) and Gill Brook from the IOPTWH Executive for the planning and implementation of a well-attended program. I am grateful to the Dutch Physiotherapy Association for the entire Congress that provided a wonderful place to gather and learn from a diverse array of programming.

*Continued on page 2 ...*

**FALL, 2011**

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**Editor:**

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President's Message  
(Continued)

Currently the executive is putting the final touches on the new design of the website that was presented at the business meeting, which is now up and live. We are working on plans for a one to two study day that will be held in two years as well as long term planning for a study day in Singapore in 2015.

On behalf of the executive committee, thank you for your confidence in us and your votes that re-elected us for office for the next four years. Rebecca Stephenson president, Meena Sran vice president, Gill Brook secretary, Ros Thomas treasurer, and Darija Šćepanović as member at large.

We are very proud of Jill Boissonnault, our founder and first president for her WCPT International Service Award that she received in Amsterdam. As many of you know Jill created the International Organization of Physical Therapists in Women’s Health (IOPTWH), which was recognized as a WCPT subgroup in 1999. Jill served as president of IOPTWH between 1999 and 2007 and has inspired physical therapists in women’s health around the world, helped develop programmes, made international visits, established many key papers and policies and established membership.

Congratulations Jill and a much-deserved award.

Please feel free to contact me with any suggestions or thoughts concerning IOPTWH.

Rebecca Stephenson  
rgspt@comcast.net

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Acknowledgment
Many thanks to Raafea Al-Juraifani from Saudi Arabia who provided reports on IOPTWH sessions at WCPT conference
Secretary’s Report
Gill Brook
IOPTWH secretary
gill.brook@lineone.net

Since I last wrote, much of my Organization time has been spent in preparation for IOPTWH involvement with WPT2011, and the ‘aftermath’ of our time in Amsterdam which has included minutes from our various meetings and sessions, and other action points which I, and the rest of the executive committee, have been set. It was a pleasure to meet so many IOPTWH delegates at our general business meeting, and again at a reception which we co-hosted with the other WCPT sub-groups. Although this reception was a great success, several members told us that they were sorry that we did not hold an IOPTWH reception as we have done at previous Congresses. This is something that we shall reconsider in 2015.

WPT2011 - satellite programme on anorectal dysfunction

The Organization co-hosted this very successful satellite programme of the WCPT Congress with Marijke Slieker-ten Hove (Dutch chief delegate to IOPTWH) and the Dutch pelvic physiotherapy group (NVFB). The day was attended by more than 100 delegates, making it the most well supported programme at Congress. Delegates have been encouraged to complete an online evaluation via SurveyMonkey and a preliminary analysis of data from the people who have completed it to date shows that over three quarters were satisfied. The programme was aimed at physiotherapists who were generally familiar or had detailed knowledge of the topic and 86% of delegates felt it fulfilled this. There were also many useful comments and suggestions which we shall consider when organizing future programmes.

Thank you again to the groups which supported this programme - TENA, NEEN Primal Pictures and NVFB.

IOPTWH presence at WCPT exhibition stand

Many thanks to the IOPTWH delegates who volunteered to man the WCPT stand in the exhibition hall in Amsterdam. We were able to display a range of photographs of our members at work, show examples of documents such as our Scope of Practice, and distribute IOPTWH bookmarks displaying our website address so I am sure that there will be an increased awareness of our group amongst the general international physiotherapy community. In the few hours I spent at the stand, I had the opportunity to talk to physiotherapists from a multitude of countries, many of whom expressed an interest in women’s health.

WCPT confirmation of sub-group status

We are asked to submit information about the Organization to WCPT every four years, to confirm our sub-group status. I was able to provide evidence of the work we have undertaken since 2007, and am pleased to say that this process was successful.

Friends of IOPTWH

Individuals from countries not currently members of IOPTWH can become members of our friends group. We currently have 25 friends from 21 countries, the most recent additions living in India and Chile.

Please email me at gill.brook@lineone.net if you have any comments or questions about the Organization.
Treasurer’s Report

Ros Thomas
IOPTWH Treasurer 2011
ros.thomas@virgin.net

A copy of the accounts had been circulated to all chief delegates prior to the meeting (further copies are available on request from ros.thomas@virgin.net)

Expenditure (2007-11)

Expenditure over the four years has predominantly been on conferences (2007 in Vancouver B.C., 2009 in Lisbon, Portugal); executive expenses (for attendance at the general business meeting in 2007, and executive committee meetings in 2007 and 2009); website management and upgrading; PayPal services, fees for Survey Monkey, newsletter production and honorarium.

Income (2007-11)

Income has come from member country annual dues, conference sponsorship and bank interest.

Ongoing expenditure

Regular anticipated outgoings include newsletter production, website maintenance and development, executive expenses (e.g. for attendance at the biennial executive committee meeting) administration costs, Survey Monkey fees and Bursary grants.

Regular income

This can be expected from member dues payments and bank interest. At the end of June the IOPTWH statements showed:

- Current account £5,386
- Higher Interest account £10,050

A full report of the post congress (Amsterdam June 2011) statement of accounts will appear in the next newsletter.

Thanks expressed to the chief delegates for arranging prompt payment of annual dues.

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Summary

- Over the past four years, the balance within the IOPTWH account has continued to rise year on year. However, interest rates have dropped alarmingly and costs have risen globally so we cannot rely on the differential being as healthy in the future.

- The two conferences have been largely self-financing (delegate fees and sponsorship).

- Some of the Organization’s funds have been transferred to a higher interest earning account.

- Internet Banking facilities have been set up.

- A Bursary Award scheme has been set up to assist with attending IOPTWH study days/conferences.
Networking Session

The session started in the very early morning with about 50 physical therapists welcomed by Rebecca Stephenson (the chair) and Gill. The participants had the choice of joining 1 out of 5 discussion tables moderated by Gill Brook, Rebecca Stephenson, Ros Thomas, Darija Šepeanović and Meena Sran. The topics laid out for discussion were:

- Most important challenges in obstetric clinical practice.
- Most important changes in pelvic floor practice
- Priority action terms for IOPTWH
- High risk pregnancies and variations in treatment
- Women’s health research database

Participants spent 15 minutes discussing the topic of choice then had the choice of staying in the same station or move to another station with another topic.

Satellite Programme

IOPTWH and the Dutch Association for pelvic physiotherapy organized a one day Education session that was held at the Novotel Amsterdam. The session was titled: Physiotherapeutic management of anorectal dysfunction in adults and children. The first impression of the day was the light spirit of the organizers that was captured by the colorful tulip bags and the tulip umbrellas distributed to the participants. The course used a multidisciplinary approach to present the dysfunction in women, men and children. This approach provided a model that many can relate to in clinical practice.

Variation in expertise and background of the audience generated discussions and debates. One of the most interesting presentations was by Dr. Sliker-ten Hove; she explained the relationship of pelvic organ prolapse with anorectal dysfunction in women. This talk stirred up heated discussion about the use of curl ups or sit ups in a post- partum abdominal strengthening program and its potential contribution to pelvic organ prolapse. The debate revolved around the level of certainty that the therapist can have about whether or not the pelvic floor muscles could sustain the increased intra-abdominal pressure generated by the curl up. Dr. Bø, a participant, believed that the level of intra-abdominal pressure produced by curl-ups is much less than that of other activities that a therapist should advise against during treatment of pelvic floor dysfunction. On the other hand, Dr. Sliker-ten Hove questioned the ability of postpartum women’s pelvic floors to withstand the pressure generated and therefore this might put them at the risk of pelvic organ prolapse. Although there was no consensus, this debate highlighted important factors to be considered with post-partum abdominal exercise prescription.

Moreover, networking between the attending physical therapists is anticipated to be the essence of such specialized educational sessions. During the breaks it was clear that therapists where very keen to share and compare their experiences; the conversations got louder and more intense as the day progressed. No matter what your level of experience, this educational session was an informative one. The Dutch association for pelvic physiotherapy did a tremendous job co-hosting this event and those efforts were greatly appreciated by the participants.
Platform Presentations

Pelvic Floor Dysfunction: Theme of Women’s Health Platform Presentations in Amsterdam 2011

The second day of the WCPT conference was an exciting one for women’s health physical therapists. Research in the field was celebrated with a remarkable eighteen presentations from nine IOPTWH member countries. Sweden, Canada and Norway had the lion’s share. Eleven papers shared a common theme: pelvic floor dysfunction. This homogeneity in subject triggered exciting discussions challenging the research methodology that produced the results presented. Reported randomization for some RCTs was questioned by some members of the audience many times; the strict use of the term was verified by the presenters. Also under methodology, it was pointed out by a member of the audience who is a Cochrane reviewer, that longer contact with a therapist may inflate the results towards the positive. This was pointed out when the effect of two pelvic floor exercise methods were compared during a discussion.

Ruth Broom’s paper titled Female genital mutilation and physical therapy: a survey report was one highly anticipated. The study showed that there is a great lack in awareness by women affected by this practice with regards to seeking help. Broom emphasized that physical therapy is likely to have a positive impact on those women’s lives. Finally, a paper from Oman caught the attention of the attendees with the traditionally dressed speaker and great deal of work in the paper. Kauther Al Busaidi investigated the prevalence of urinary incontinence in Oman through a laborious door-to-door survey. The study revealed a high prevalence of 43% with only 20% seeking help. The speaker also noted that a disturbing number of females underwent genital mutilation and that the practice is very common. Kauther presented the study with great passion that was felt by many therapists who were keen to talk to her and discuss the results of the study further. By the end of the day, being exposed to this number of research papers, left every attendant with a great rush and a lot to think about!

Facts

18 platform presentations in 3 sessions

Second day of the conference

Countries: Norway, Sweden, Canada, USA, UK, Australia, The Netherlands, Ghana, Israel, New Zealand, and Oman

Interesting papers from Oman, and from New Zealand on Female genital mutilation
IOPTWH MEMBER REPORTS

Canada
From
The “Women’s Health Division” of the Canadian Physiotherapy Association

Year 2010-present 2011 – We have had an exciting year of events at Women’s Health Division (WHD).

Student executive project
Staff changes to more involvement from our student executive project. The student project was to collect information and produce an online document to inform all PT students interested in women’s health of the specific practice requirements in each province/territory. Our student member is also publishing some articles in our newsletter and is our official student contact on our student facebook page.

National Congress
We had a successful national Congress in July 2011- there was 1 pre-congress course that was well attended: Chantale Dumoulin hosted a 2 day course on treatment of the pregnant and post-pregnant client. Then we had 2 divisions hosted sessions: 1) Evelyne G. Saulnier “Vestibulodynia- update on etiology, assessment and treatment” and 2) Chantale Dumoulin topic “ Levator Ani Avulsion injury : can we ‘feel’ with our fingers as well as we “see” with ultrasound?” Our 2011 Eye Opener was also a success and was well attended. Cindy Auchincloss and Linda McLean hosted “ The use of EMG in pelvic floor muscle rehabilitation: what are we doing?” Again, initial feedback was that it was really informative, great presentation of what is available presently, but moreover it was the networking and find out what is common practice for Physiotherapists dealing with Pelvic floor issues at present in Canada. There were topics on: lymphedema, falls across the lifespan, whiplash in healthy women, and eating disorders.

Continued on page 8...
Canada Report
(Continued)

Teleconferences ranging in topics from the role of a Physiotherapist in a Primary Prevention program by Debbie Childerhose to women with chronic pain. We hope to be joining with some of the other divisions this year to do some combined educational courses or teleconferences – specifically with the Pain Division and to look at women suffering post-mastectomy pain as well as with the oncology division and hosting a course on lymphedema care with women.

Education Project

We have been working on an education project with the CPA and Chantale Dumoulin to translate her book into an English version. Our public relations executive posts monthly eblast to our members. We have 4 newsletters a year that come out. Topics over the past year have been on:

Summer 2010 - Lesbians and Physiotherapy

Fall 2010 - Breast Cancer and Environment
Winter 2011 - Women and Respiratory; Sleep and the female

Spring 2011- Diabetes Mellitus and Women

Research Endeavors

We have developed a grant with the Physiotherapy Foundation Of Canada (PFC) to offer $7500 CDN every 2 years to successful applicants.

We participated in the INTERDIVISIONAL REVIEW – Topic for 2011 was on Health Promotion and we had a great article on: “The Role of the Physiotherapist in Preventing Postpartum Complications” submitted by Penny Wilson, BSR, BA, Pat Lieblich, BPT, Carolyn Cossenas, BA(Hons)PE, BSc(PT), Dipl. Sport Physio, Stella Burgi, BSR, and Susannah Britnell, BSc(Hons)PT, FCAMT.

Information

We have a ‘FIND A WOMEN’S HEALTH PHYSIOTHERAPY LIST’ that we updated July 2011 and it lets people from across Canada look for PTs that work in the world of Women’s Health.

Main goals for the members’ organization for the year 2012

- Development of a “Women’s Health Division” strategic plan for the next 5-10 years.
- Education – continuing to offer entry level courses to Physiotherapist in Pelvic Conditions, and hosting conferences throughout the country on a variety of topics.
- Sub committee working on the Specialization in Women’s Health. Allison Francis has been pivotal in working on this group to develop a manuscript “Survey on Canadian Physiotherapist: Entry-Level and Post Professional Education in Women’s Health.” We are hoping for publication in the national journal PHYSIOTHERAPY CANADA.

Updates of website

Our “Women’s Health Division” is still view our through the Canadian Physiotherapy Association website <http://thesehands.ca/>. And we are hoping to launch a new website of Women’s Health in the January 2012. We will keep you posted. For now, you can reach me thru the email: womenshealth@physiotherapy.ca
SLOVENIA

From
The Slovenian Section of Physiotherapists
on Women’s Health

The current year’s schedule of past and upcoming activities and events of the Slovenian Section of Physiotherapists on Women’s Health (SSPWH) is extremely rich. As several past years in a row, we organized and implemented two 30-hour spring courses entitled ‘Physical activity in pregnancy’ and two 12-hour courses entitled ‘Therapeutic exercise for spinal segmental stabilization in low back pain’. The total number of participants, predominantly physiotherapists and nurses, amounted to nearly 200.

On request of the Croatian association of physiotherapists in women’s health, we gave a three-day course on ‘Therapeutic exercise for spinal segmental stabilization in low back pain’.

Again this year the SSPWH closely cooperated with the following societies and associations: Slovenian Menopause Society, Slovenian Continence Association - INKO, Association of Patients with Osteoporosis, Slovenian Urogynecological Society and Nurses and Midwives Association of Slovenia.

In June three delegates of SSPWH attended a IOPTWH General meeting in Amsterdam. At the end of August two members attended a conference organized by Association of Chartered Physiotherapists in Women’s Health in Glasgow, UK.

In autumn, we are planning to organize one-day refreshment workshops dedicated to ‘Therapeutic exercise for spinal segmental stabilization in low back pain’ and a two-day seminar on ‘Physiotherapy for quality of life in old age’.

Reported by: President of the Slovenian Section of Physiotherapists on Women’s Health
Darija Ščepanović
darija.scepanovic@guest.arnes.si

I, personally, have continued to participate in the working group at the Ministry of Health, Republic of Slovenia in order to plan, implement and evaluate the Strategy of the Government of the Republic of Slovenia for promoting physical activity to enhance national health for the period 2007-2012 (HEPA national programme). Their primary responsibility lies in the promotion of health enhancing physical activity during pregnancy, the provision of a uniform and accessible ‘Fit pregnant women’ programme at the national level, education and training of staff to manage physical activity during pregnancy at the undergraduate and graduate levels. In August I was nominated a representative of the Slovenian Association of Physiotherapists in the Expanded Professional Board of Physiotherapy at the Ministry of Health, Republic of Slovenia.

Our plans for the future:
- Raise awareness of the need for women’s health physical therapy curricular content in professional education
- Foster research related to women’s health physical therapy
- Offer financial assistance to physiotherapy students who participate in the research on women’s health as part of their diploma work, especially when the research results might influence the development of women’s health physical therapy
- Update the website
- Recruit new members
The Saudi Physical Therapists in Women's Health (SPTWH) interest group has recently joined the IOPTWH in Amsterdam last June. Our young group has formed earlier this year in the capital of Saudi Arabia, Riyadh. The few women's health physical therapists in Saudi Arabia are not recognized for what they do. The consultant based system usually fails to include the therapists in patient management, whether it is in lymphedema, pelvic floor rehabilitation, osteoporosis...etc. Most importantly, women are not getting gender specific treatment when necessary because of the lack of therapists and poor knowledge of the referring sources. Therefore, when eight women's health physical therapists met last January, they had a big agenda and an even bigger challenge.

The main goal of SPTWH for this year is to increase public and professional awareness about the role of women's health physical therapists (WHPT). So far it has been a challenge. However, we strongly believe that women empowered with the right information about their bodies will demand WHPT service and therefore get the attention of the referring source.

Joining the IOPTWH had the greatest impact on the morale of SPTWH members. They expressed, on many occasions, that they feel supported now that they belong to a larger community. Another aspect that the therapists were happy about, is the new opportunity for networking with others around the world. This will allow better chances to know about specialized training and will provide them with access to expert opinion when needed. As a group, SPTWH recognizes that women's health specialty within Saudi physical therapy is in its very early phases. For that, we are very excited to join IOPTWH and base our standards of practice on international guidelines.

* From
The “Saudi Physical Therapists in Women’s Health” of the Saudi Physical Therapy Association
CROATIA
From
The “Croatian Organization of Physiotherapists in Women’s Health”

CROATIAN ORGANIZATION of physiotherapists in women’s health has 10 members and we are very proud to be IOPTWH members as from this year. Our delegates in IOPTWH are: Nataša Kos, Maja Maržić and Kristina Vidan. Our mission is to improve women’s health through all stages of life and promotion, implementation and training of physiotherapists involved in care for women’s health. In Croatia we are responsible for organization of life long learning program of physiotherapists.

We are also working on promotion of the involvement of physiotherapists in the teams and programs that deal with preventive and curative health needs of women in Croatia. Our long term goal is to inform and sensitize the general public about the importance of conducting physical therapy programs in the area of women's health.

Since March of 2011 we have been conducting a survey on the prevalence of UI at female working population as a first step of future National program for prevention of UI. The main objectives for 2012 are:

1. print and distribute clinical guidelines for exercise during pregnancy and the postpartum period, clinical guidelines for physiotherapy for pelvic girdle pain, clinical guidelines for physiotherapy for urinary incontinence
2. organize courses for instructors of physical activities for pregnant women
3. organize workshops for physiotherapists in prenatal teams
4. organize workshop for physiotherapy treatment of osteoporosis

ABSTRACT SNAPSHOT

Antenatal pelvic floor muscle exercises for the prevention and treatment of urinary incontinence in the antenatal and early postnatal period: a critical appraisal of the evidence
H. E. Cooper & T. Cook

Abstract
Pregnancy and childbirth are implicated in the development of urinary incontinence (UI). This literature review analyses the current evidence relating to the use of antenatal pelvic floor muscle exercises (PFMEs) to prevent and treat UI in women during pregnancy and the postnatal period. Relevant studies are considered and then discussed in relation to their similarities and differences. The evidence for the use of antenatal PFMEs to treat UI in pregnancy and the postnatal period is inconclusive, although a small body of literature supports the adoption of this approach as a preventative strategy. Conclusions are drawn from the current evidence and suggestions are made for clinical practice.

Journal of the Association of Chartered Physiotherapists in Women’s Health, Autumn 2011, 109, 5-13
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