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Welcome to the PEDro Newsletter for 4 August 2025

Thank you to the Chartered Society of Physiotherapy, Ordem dos Fisioterapeutas and Axxon Physical Therapy in Belgium who have renewed their partnership with PEDro for another year.

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Reflecting on the 2025 World Physiotherapy Congress



Reflecting on the 2025 World Physiotherapy Congress, we wanted to thank everyone who stopped by our stall to say hi! Our team had a great time engaging with people from around the world and showcasing all the resources PEDro has to offer. To help you stay up-to-date with PEDro, make sure you:

- Subscribe to <u>Evidence in your inbox</u>.
- Subscribe to the <u>PEDro Newsletter</u> using the form at the bottom of the homepage.
- Take a look at our new <u>Evidence Summaries page</u> where we provide summaries of over 90 articles.
- Read through our <u>skill-building campaigns</u> and sign-up for the <u>PEDro Scale</u>
 <u>Training Program</u> to improve your skills in evidence-based physiotherapy and research appraisal.
- Subscribe to PEDroCast the official podcast of PEDro.
- Learn how to run a journal club (and check out the PEDro World-Wide Journal Club discussions.



World Physiotherapy Day is right around the corner on 8 September!

This year's theme is healthy ageing, with a focus on preventing falls and frailty. To help prepare you for the day, <u>World Physiotherapy has developed a toolkit</u>.

You can also use resources on PEDro to learn about some of the research done in this area:

- <u>Evidence in your inbox</u> for the 'gerontology' and 'Continence and women's health' feeds.
- Learn how to ask a clinical question to search for research on PEDro.
- Watch one of the <u>PEDro World-Wide Journal Clubs on falls</u>
- Read one of <u>PEDro's Top 25 Trials on falls and physical activity in older people</u>

Help us celebrate #WorldPTDay by sharing these materials, and also adding to the comments to let us know about the work being done by the global physiotherapy community in the healthy ageing space.



Systematic review found that balance training and aquatic activity had greatest improvement in dynamic balance in post-stroke patients compared to other rehabilitation exercise programs.

Dynamic balance training has been used to regain balance control following stroke, however the effect of the type of exercise intervention is not yet clear. This systematic review aimed to evaluate the effects of rehabilitation exercise programs on dynamic balance in people more than 6 months post-stroke.

Eligible studies were randomised controlled trials, investigating the effects of exercise programs such as virtual reality, aquatic activities, dual-task exercise, balance training, physical activity, gait exercise, resistance exercise, and trunk control exercise, compared to experimental or control groups in people with a stroke onset greater than 6 months ago were included. The main outcome measure was the Berg Balance Scale. Trial quality was evaluated through the diagnostic test of Comprehensive Meta-Analysis program ver.3 (CMA3) program.

Thirty trials (540 participants) were included in the meta-analyses. Trial quality was rated as good. Adverse events were not reported.

Balance training and aquatic activities showed the largest effect sizes in improving dynamic balance. Resistance training showed the smallest effect size.

Exercise programs are effective in improving dynamic balance in stroke patients, with balance training having the highest effect size, particularly for when the time from onset of stroke is longer.

EFFECTS OF REHABILITATION EXERCISE PROGRAM TYPES ON DYNAMIC BALANCE IN PATIENTS WITH STROKE: A META-**ANALYSIS OF RANDOMIZED CONTROLLED TRIALS**

Han B, et al. Topics in Stroke Rehabilitation.2024; 31(7):681-691.

WHAT DID THEY DO?

FINDINGS

Study design: Systematic review and meta-analysis of 30 randomised controlled trials.

Population: 540 people with a stroke onset greater than 6 months ago.

Intervention: Exercise programs such as virtual reality, aquatic activities, dual-task exercise, balance training, physical activity, gait exercise, resistance exercise, and trunk control exercise.

Comparator: Experimental or control groups. Further information regarding comparison groups was not provided.

Outcome: The main outcome measure for dynamic balance was the Berg Balance Scale.





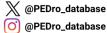
- The exercise types showing the largest effect sizes for improving dynamic balance were balance training (0.966) and aquatic activities (0.830).
- Resistance training showed the smallest effect size (0.128).



Adverse events were not reported.

Exercise programs are effective in improving dynamic balance in stroke patients, with balance training and aquatic activities having the highest effect size.





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Infographic prepared by Katie Warren, Renae McNamara, Gladys Chen.

Access the full summary in the PEDro blog.

PEDro talks with A/Prof Kwah Li Khim

To celebrate 25 years of PEDro, we interviewed physiotherapists from around the globe to talk about their physiotherapy journey.

In this video, we talk to A/Prof Kwah Li Khim Director of Programmes, Health & Social Sciences, Singapore Institute of Technology | President, Singapore Physiotherapy Association

View the full interview here.

*Please note this video is in English.



PEDro World-Wide Journal club on the efficacy of yoga vs physical conditioning on urinary incontinence in women is now available!

This PEDro World-Wide Journal Club is about the efficacy of a therapeutic pelvic yoga program vs a physical conditioning program on urinary incontinence in women.

You can further the discussions from this journal club by creating your own:

- 1. Invite your colleagues to be involved
- 2. Read the article
- 3. Watch (or listen to) our video summarising the article
- 4. Watch (or listen to) the video of our panel discussing the article
- 5. Meet with your colleagues to have your own discussion

Read more on PEDro.

Tune in to PEDroCast - bringing the evidence to you

In case you missed it, last month we released 3 new episodes on PEDroCast.

- Do exercise-based prevention programmes reduce non-contact musculoskeletal injuries in football (soccer)? Summary of trial [Portuguese]
- Do exercise-based prevention programmes reduce non-contact musculoskeletal injuries in football (soccer)? Panel discussion [Portuguese]
- 3. Understanding intention-to-treat analysis in a trial [English]





Thank you to our PEDro Supporters

Support for PEDro comes from leading physiotherapy organisations worldwide.

Our Silver Partner, <u>The Chartered Society of Physiotherapy</u>, is a leader in supporting evidence-based physiotherapy through their ongoing commitment to PEDro. We sincerely thank them for their multi-year financial support, which helps keep PEDro freely accessible to physiotherapists globally. Thank you for your partnership and leadership!

We thank and recognise our new Bronze Partner, <u>Ordem dos Fisioterapeutas</u>, for their new partnership with PEDro. Thank you for your financial support.

Thank you to our Association Partner who have just renewed their partnership with PEDro for another year: Axxon Physical Therapy in Belgium. Thank you for your financial support.

You can also help keep PEDro running by making a donation.

PEDro update (4 August 2025)

PEDro contains 65,874 records. In this update you will find:

 49,331 reports of randomised controlled trials (48,279 of these trials have confirmed ratings of methodological quality using the PEDro scale)

- 15,713 reports of systematic reviews, and
- 830 reports of evidence-based clinical practice guidelines.

For latest guidelines, reviews and trials in physiotherapy visit *Evidence in your inbox*.

DiTA update (4 August 2025)

DiTA contains 2,527 records. In this update you will find:

- 2,235 reports of primary studies, and
- 292 reports of systematic reviews.

For the latest primary studies and systematic reviews evaluating diagnostic tests in physiotherapy visit *Evidence in your inbox*.

Next PEDro and DiTA updates are on 1 September 2025.



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