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Welcome to the PEDro Newsletter for 2 September 2024

Thank you to [Physio Austria](#), [Taiwan Physical Therapy Association](#), [Hong Kong Physiotherapy Association](#), [UNIFY ČR](#) and [Fysioterapeuterna](#) who have renewed their partnership with PEDro.

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Support for PEDro comes from the following global physiotherapy organisations.

We thank [Physio Austria](#), our Bronze Partner who have just renewed their partnership with PEDro for another year.

Thank you to our Association Partners [Taiwan Physical Therapy Association](#), [Hong Kong](#)

[Physiotherapy Association](#), [UNIFY ČR](#) in the Czech Republic, and [Fysioterapeuterna](#) in Sweden who have just renewed their partnership with PEDro for another year.

Thank you for your financial support!

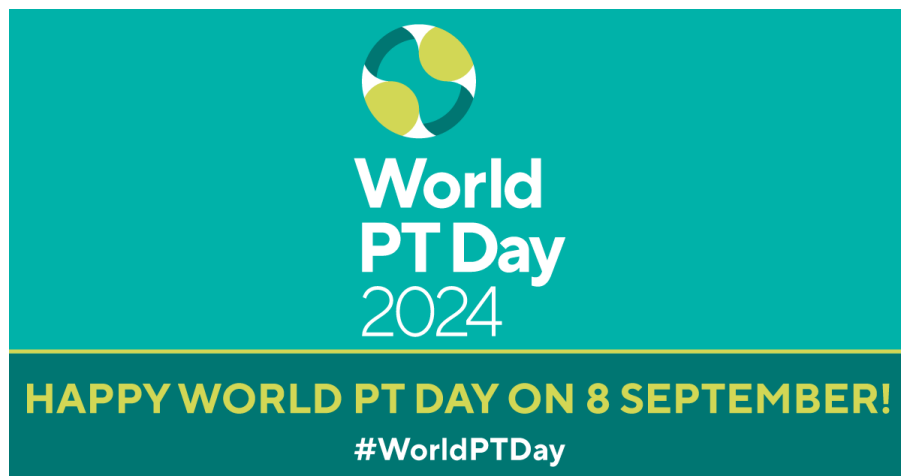
You can also help keep PEDro running by making a donation: <https://pedro.org.au/english/about/donate/>

PEDro celebrates World PT Day!

September 8 marks #WorldPTDay. The theme for this year is #lowbackpain.

Globally, low back pain is the single leading cause of disability. In 2020, it affected 619 million people, which is estimated to grow to 843 million by 2050. Despite this, low back pain and other musculoskeletal conditions are not prioritised on the global health agenda.

Physiotherapists play an important role in the prevention, treatment and management of low back pain. To keep up to date with the latest low back pain research, subscribe to the [Evidence in your inbox](#) feed for musculoskeletal, continence and women's health, ergonomics and occupational health, and chronic pain.



Nominations for PEDro's Top 25 Trials have now closed!

Thank you to everyone who nominated a trial to be included in PEDro's Top 25 Trials in celebration of PEDro's 25th Birthday!

Judging is now underway and we will announce the winners later this year. In the meantime, you can read about the trials currently in PEDro's Top 20 Trials [here](#).

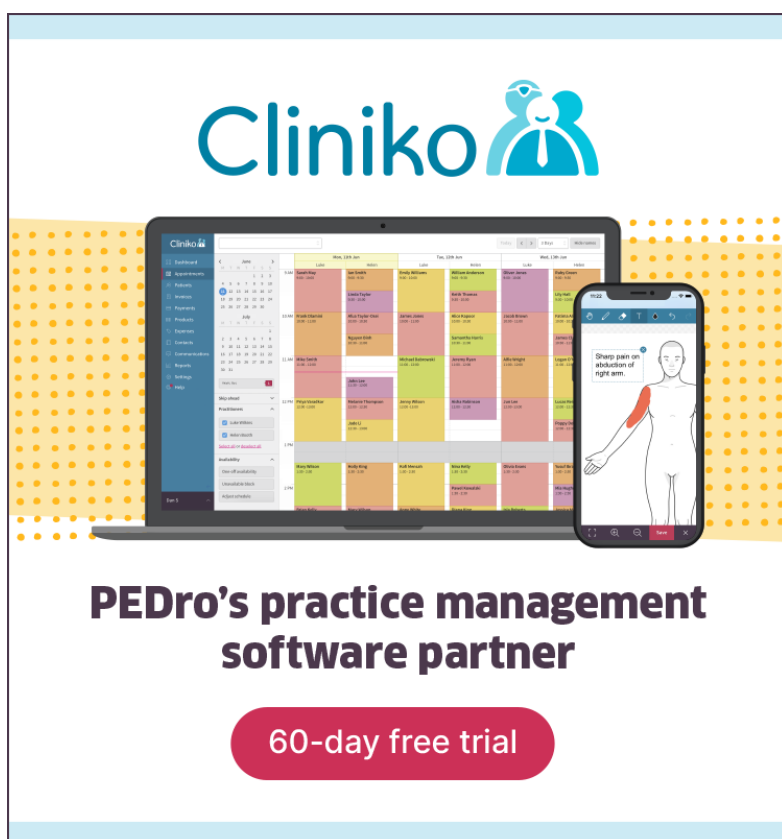
Are you recently graduated or embarking on a new physiotherapy practice?

PEDro has partnered with Cliniko! Cliniko provides practice software for busy clinics and allied health practitioners across more than 70 countries.

The Cliniko platform can help you manage individual and group bookings, scheduling, treatment notes, invoices, reporting, automated appointment reminders, and includes integrated telehealth software all in the one platform.

For a limited time, PEDro users can access a FREE 60-day trial of Cliniko.

[Learn more.](#)



Cliniko

PEDro's practice management software partner

60-day free trial

Systematic review found physiotherapy management was effective for reducing pain in women with dyspareunia when compared to control or no intervention.

Some findings are included in this infographic.

EFFECTIVENESS OF PHYSICAL THERAPY INTERVENTIONS IN WOMEN WITH DYSPAREUNIA

Fernandez-Perez et al. 2023. *BMC Women's Health*, 23, 387.

WHAT DID THEY DO?

Study design: Systematic review of 16 non-randomised and randomised trials. Only eight randomised trials were considered for the meta-analysis.

Population: Women with pain during or after sexual intercourse (dyspareunia).

Intervention: Physiotherapy (including electrotherapy, massage and exercise modalities).

Comparator: Pharmacological treatment, psycho-behavioural interventions, or no-intervention.

Outcome: Outcomes were pain, sexual function and quality of life. There was no nominated primary outcome and results were reported as Standardised Mean Differences.

Most trials prescribed multiple physiotherapy treatments (n=6) or electrotherapy (n=5).

Note: No primary outcome was specified.

FINDINGS

There was moderate certainty evidence that physiotherapy management (electrotherapy and electrotherapy + pelvic floor muscle training) improved pain, when compared to control interventions (SMD -4.4, 95% CI -7.9 to -1.0, 3 trials).

There was low certainty evidence that physiotherapy management (electrotherapy and electrotherapy + kinesiotherapy) improved quality of life (SMD -0.38, 95% CI -0.74 to -0.03, 2 trials) but did not improve sexual function (SMD 2.37, 95% CI -1.43 to 6.17, 2 trials) compared to control or no intervention.



Adverse events: Studies included in the review did not report the frequency of serious adverse events from the interventions.

Physiotherapy management was effective for reducing pain in women with dyspareunia when compared to control interventions. Further studies are required to determine if physiotherapy interventions are effective for improving sexual function or quality of life.



Infographic prepared by Peter Stubbs, Linting Ruan and Courtney West

Fernandez-Perez P, Leiros-Rodriguez R, Marques-Sanchez MP, Martinez-Fernandez MC, de Carvalho FO, Maciel LYS. Effectiveness of physical therapy interventions in women with dyspareunia: a systematic review and meta-analysis. *BMC Womens Health* 2023; 23: 387. DOI: doi.org/10.1186/s12905-023-02532-8

Systematic review found that preoperative respiratory muscle training reduces the risk of postoperative pulmonary complications and pneumonia and length of hospital stay following elective open cardiac surgery.

This systematic review aimed to estimate the effect of preoperative respiratory muscle training (RMT) compared to no intervention or sham RMT post elective open cardiac

surgery.

Database searches were conducted combining terms related to cardiac surgery, RMT and randomised controlled trials from inception up to July 2021. Primary outcome measures were post-operative pulmonary complications (PPC), length of stay and respiratory muscle strength. Trial quality was evaluated using the PEDro scale. Certainty of evidence was evaluated using the Grading of Recommendations Assessment, Development and Evaluation (GRADE) approach.

8 trials (696 participants) were included in the meta-analyses.

There was high-certainty evidence that RMT resulted in almost halving the risk of general PPC (RR 0.51, 95% CI 0.38 to 0.70) and pneumonia (RR 0.44, 95% CI 0.25 to 0.78), length of hospital stay was reduced by almost 2 days (MD -1.7 days, 95% CI -2.4 to -1.1) and inspiratory muscle strength improved by about 12cmH₂O. Mortality was reported in 2 trials, with 5 deaths in the control group and 3 in the experimental group.

There is good quality evidence that RMT reduces the risk of PPC and pneumonia, shortens length of hospital stay and improves inspiratory muscle strength compared to no intervention in people undergoing elective open cardiac surgery. [Access the full summary in the PEDro blog.](#)

PEDro update (2 September 2024)

PEDro contains 62,314 records. In the 2 September 2024 update you will find:

- 47,448 reports of randomised controlled trials (46,439 of these trials have confirmed ratings of methodological quality using the PEDro scale)
- 14,072 reports of systematic reviews, and
- 794 reports of evidence-based clinical practice guidelines.

For latest guidelines, reviews and trials in physiotherapy visit [Evidence in your inbox.](#)

DiTA update (2 September 2024)

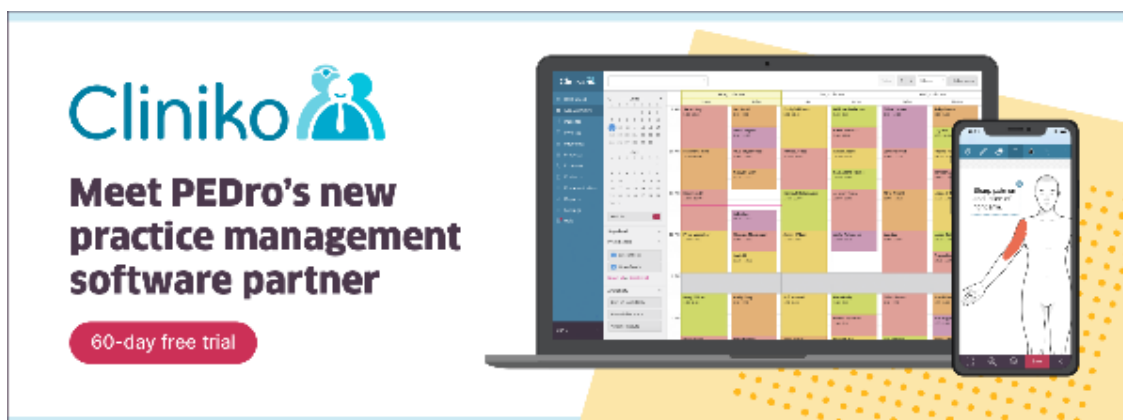
DiTA contains 2,489 records. In the 2 September 2024 update you will find:

- 2,206 reports of primary studies, and
- 283 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 (October 2024)

The next PEDro and DiTA updates are on 7 October 2024.



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