



Fitness and Wellness for Physical Therapy

Public health service can be successfully incorporated into a physical therapy practice

By Christine Romani-Ruby, PT, MPT, ATC

In my entrance interview for physical therapy school in 1988, I stated that I felt that physical therapy should be accessible to anyone who wanted it. I didn't understand why someone would need to wait for dysfunction or illness to take advantage of the services of a professional who possesses skills in assessing and teaching healthy movement. Now that I have been a physical therapist for more than 20 years, I can say I have finally found my niche in fitness and wellness, and my physical therapy skills are the main reason for my success.

The profession of physical therapy is being called upon to address the demand for physical therapy health services beyond its historical roots as one of the "allied health professions." With fewer than half of individuals between the ages of 12 and 21 years being active, and 40% of individuals 45 years or older unable to meet the minimum guidelines for physical activity, physical therapists have a social responsibility as well as a business opportunity in meeting the needs of public health.

There is no doubt that it is a challenge for physical therapy to envision physical therapy practice beyond its historical roots within the medical model of health service delivery. This model emphasizes the diagnosis and treatment of disease or injury, constraining the physical therapist to episodic health events that are triggered by change in health or functional status. A more modern vision for physical therapy would address public health. Thus, it would aim to prevent disease or injury at the community level rather than to treat or cure disease.

Product Resources

The following companies offer products for fitness and wellness:

Balanced Body Pilates
www.pilates.com

Ball Dynamics International LLC
www.fitball.com

CSMi Solutions
www.csmisolutions.com

Endorphin Corp
www.endorphin.net

Exertools
www.exertools.com

Fitter International Inc
www.fitter1.com

Isokinetics Inc
www.isokineticsinc.com

Kore Extreme
www.korefit.com

Madd Dogg Athletics Inc
www.maddogg.com

Magister Corp
www.magistercorp.com

Med-Fit Systems
www.medfitsystems.com

Merrithew Health & Fitness
www.merrithew.com

NZ Manufacturing Inc
www.nzmf.com

OTPT
www.optp.com

PHI Pilates
www.phipilates.com

Rejuvenation
www.pivotal5.com

SPRI Products
www.spri.com

Stretchwell Inc
www.stretchwell.com

Tartan Group
www.tartangroup.com

Thera-Band
www.thera-band.com

Thera-Roll
www.thera-roll.com

Total Gym
www.totalgym.com



Physical therapists are uniquely qualified to offer services to people with physical dysfunction that limits the capacity for safe and effective levels of activity. They are experts in movement, in pathokinesiology, and in knowing how to get people with orthopedic or medical problems to exercise in ways that benefit them and won't create other health problems.

Many physical therapists are reluctant to take a closer look at fitness and wellness due to perceptions and concerns about scope of practice, time commitment, reimbursement, and other issues. When considering the public health model, physical therapists need to remember there is no standard way to do wellness and prevention. Everyone finds a different path. If you are presently working in the medical model of health service, the most logical first step is to offer your patients a way to continue their relationship with you. As it stands now, a physical therapist sees a patient for 4 to 6 weeks or more, gaining that person's trust and building a relationship only to drop him or her on discharge to a home exercise program with no supervision or guidance for a future of physical activity.

THE PATH TO AN ACTIVE LIFESTYLE

Bridging the patient from physical therapy to an active lifestyle within that person's capabilities may be the most challenging step in the public health model, especially for those with chronic conditions. However, the physical therapist is the one professional

most prepared to design a program and supervise the progress of that program. So, how can we make that happen?

In addition to our physical therapist hat, we must put on the hat of the health coach and work to motivate the patient to perform physical activity. We must create a program that will allow physical activity without risk of injury, but will still be challenging, interesting, and motivating. Here is where the creativity begins. Building motivation for physical activity can begin in traditional physical therapy sessions through education about the importance of physical activity, and through the introduction to possible props, classes, or activities appropriate for the particular patient. For example, with my 50-year-old client with spinal stenosis, I encouraged her to do her flexion exercises at least three times per day and to use them like an aspirin to control her pain. I then got creative with the exercises, making them more interesting because she likes activity. For example, we did a modified rolling like a ball Pilates exercise using the Pilates ring rather than pelvic tilts. She found this much more fun and challenging. I also introduced her to the Pilates Reformer and discussed that, with some extra positional instruction, she would be able to take part in a group Pilates Reformer class at our facility. Pilates equipment to support these types of activities is available from manufacturers such as Balanced Body, Sacramento, Calif, and OPTP, Minneapolis.

If you are practicing in the medical model of health service and are interested in bridging the gap to the public health model, there is lots of opportunity for a prosperous business. There is a growing demand for the expertise that physical therapy has to offer. Again, there are many ways to incorporate public health service into your present practice and no rigid model to wellness. However, I can offer some suggestions for success.

STEPS TO INCORPORATING PUBLIC HEALTH SERVICE

First, make it affordable, because it will most likely be a cash-based model. The key to this is to offer small group classes where clients can be monitored and educated while exercising. Remember that the difference between what you do and what a fitness center does is this monitoring and education, with specific care and concern for specific client conditions. We offer small group classes of seven to eight. The classes are taught by physical therapists, physical therapist assistants, exercise physiologists, and fitness instructors who operate under the direct guidance of the physical therapists. With this cash-based practice comes a demand for service, which you will have no problem meeting as a physical therapy professional.

Recommended Reading

APTA on physical therapy and fitness and wellness. *PT: Magazine of Physical Therapy*. 2009;17(5):24-24.

Jette AM. Face into the storm... 43rd Mary McMillan lecture. *Physical Therapy*. 2012;92(9):1221-1229. doi:10.2522/ptj.2012.mcmillan.lecture

Mulligan H. Health and well being for people with disability: The role of physiotherapists in promoting physical activity. *New Zealand Journal of Physiotherapy*. 2011;39(1):39-45.

Sullivan KJ, Wallace JG Jr, O'Neil ME, et al. A vision for society: Physical therapy as partners in the national health agenda. *Physical Therapy*. 2011;91(11):1664-1672.

Thompson WR. Worldwide survey of fitness trends for 2013. *ACSM's Health & Fitness Journal*. 2012;16(6):8-17

However, remember your worth, and don't be afraid to ask for it. Once clients become part of this model, they will have no problem paying with cash. We charge anywhere from \$15 to \$30 per small group class depending on the equipment and instruction involved. Our facility only offers supervised classes and private sessions; there is no open gym because what makes us different is the educational component focused on movement.

Second, level the playing field. A major obstacle to offering public health services as a physical therapist is that you will attract people with movement problems and disabilities, and they will still want affordable group exercise. So, you must learn to level the playing field so that you can safely mix together many levels of fitness. The key to this is props. One of the best props that we found is TRX from TRX, San Francisco. The



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TRX system allows us to mix weaker clients with stronger clients because you can easily change the angle of the exercise with the support of the TRX creating more or less challenge. The TRX can also offer support for balance when needed by older or more disabled clients.

Another excellent apparatus for leveling the playing field in the small group setting is the Pilates Reformer. With the ability to perform more than 800 exercises, the choreography is nearly endless, and with the unique resistance provided by the springs, overweight and out-of-shape clients can exercise in the same class as weekend warriors, and both experience a rewarding workout.

Smaller props such as elastic loops and foam rollers, offered by companies such as Thera-Roll, Natick, Mass, are beneficial fitness tools that provide support and a challenging workout. Also, Pilates rings, available from a number of companies, including SPRI, Libertyville, Ill, and exercise blocks offer support, challenge, and motivation to a client as well as the ability to create choreography that is fun and interesting. Exercise straps available from companies such as Exertools, Petaluma, Calif, and OPTP can also offer support. And, another example of a small prop to use for exercise is an exercise ball, available from Ball Dynamics International, Longmont, Colo.

I have a 7-year-old client affected by arthrogriposis, and she is so excited to exercise in our environment with the Pilates spine corrector, small balls, and Airex pads from the Magister Corporation, Chattanooga, Tenn. To her, our facility doesn't look like a rehabilita-



tion hospital, and there are all kinds of new activities to keep her interested. Her condition is chronic, and she will always have limitations. She still needs general exercise just like anyone else to stay healthy, but working out at a gym with a personal trainer wouldn't be appropriate because she needs an instructor knowledgeable about her condition and limitations.

Third, practice as a direct access practitioner. Be ready to refer clients to other practitioners. You will become an important part of this client's primary care team and may be surprised by the reasons they come to you, or what you might find in the process of managing their exercise program. I was referred a 12-year-old ballerina by

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a dance teacher because the young girl was experiencing neck pain, only to find she actually had a cervical tumor that was missed by the family physician, a personal trainer, and a pain clinic. Red flags become much more important in this environment, and there is no one more suited to be on the front line than the physical therapy professional.

Fourth, keep your creative juices flowing. It is so important that we as physical therapists practice what we preach and work on our own physical activity in whatever capacity is possible. Performing physical activity helps us to better communicate movement to our clients, and as we keep ourselves interested, we learn ways to keep others interested. Physical therapists in the public health environment also need to remain educated about wellness activities to share with clients. As reported by the American College of Sports Medicine's annual survey, the fitness trends for 2013 are falling right in the realm of physical therapy with functional fitness and body weight training at the top of the list. Keeping up to date about new trends

and learning what is popular will provide new ideas and help us make physical activity more attractive to our clients. **PTP**

Christine Romani-Ruby, PT, MPT, ATC, is a member of Physical Therapy Products' editorial advisory board. She is the founder of PHI Pilates, an organization that offers training and mentoring to physical therapists in Pilates rehabilitation. She operates a Pilates studio and clinic in Pittsburgh, and is also an associate professor in exercise science at California University of PA and a part-time professor in physical therapy at Slippery Rock University. For more information, contact PTPEditor@allied360.com.

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