



HONG KONG PHYSIOTHERAPY ASSOCIATION LIMITED

香港物理治療學會有限公司

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Dr. Eric Chu
Chairman, The Chiropractic Doctors' Association of Hong Kong
GPO Box 2188, Hong Kong

18 September 2021

Dear Dr. Chu,

Statement by the Manipulative Therapy Specialty Group, Hong Kong Physiotherapy Association

Response to the speech given by Mr Rick Lau, Vice Chairman of the Chiropractic Doctors' Association of Hong Kong in the programme "Scoop/東張西望"

We are a group of Manipulative Physiotherapists with recognised advanced post-graduate training. We would like to express our disappointment and frustration brought by the content presented by Mr Rick Lau (Vice-Chairman of the Chiropractic Doctors' Association of Hong Kong) in the above-mentioned programme aired on the Jade Channel, 16 Sept 2021. His opinion related to our practice is superficial, inaccurate, misleading and short of interprofessional respect. In particular, his claim that Physiotherapists apply stretching, muscle strengthening, muscle stimulations, are "superficial" treatments.

We also like to rectify (or clarify) the following points to Mr Lau as well as the public:

1. Manual skill is not exclusively "owned" by any profession. Physiotherapists is one of the recognised professionals in the mainstream health and medical field who use manual skills widely for evaluation as well as treatment for clients with different dysfunctions.
2. Physiotherapists routinely adopt a comprehensive and evidence-based approach in our practice. A variety of tools used for evaluation and making differential diagnosis including detailed history taking, observation, objective measurements and analysis of human movements, manual palpation, and so on.
3. Depending on the clients' presenting features, underlying pathology, and possible contraindications, physiotherapists decide the appropriate treatment plan which often comprises of a repertoire of specific strategies with proven treatment efficacy supported by scientific evidence. Examples of treatment strategies are therapeutic exercise, therapeutic tapings, physiotherapeutic electrotherapy and modern acupuncture, manual mobilisation and soft tissue massage etc.
4. Physiotherapists refine, adjust, modify and progress the treatment strategy based on the clients' response after each treatment until the clients regain a maximum level of function, which is dictated by a realistic consideration of the existing personal limitations.
5. This distinct feature of our practice requires proficient exercise of clinical reasoning skill, which is a core skill to be assessed vigorously at both under-graduate and postgraduate curriculum.
6. Last but not the least, we do NOT use articular manipulation as a routine treatment, even in the absence of joint stiffness.

To this end, we demand Mr Lau to elaborate his claim on the treatment effect of 1) stretching, strengthening exercise, and muscle stimulation and 2) physiotherapy being “superficial”, preferably substantiated with literature and scientific evidence.

As responsible citizens of the Health and Medical professionals community, we urge our colleagues to devote our effort to improving the management efficacy to the population in need. We would also like to stress our responsibility to disseminate accurate and unbiased health related information to the public. While we uphold our respect to and professional etiquette with other professionals, we condemn any attempt of defamation to Physiotherapy practice and standards.

On behalf of our members,



Dr Nicola Mok

APA Musculoskeletal Physiotherapist

Chair | Manipulative Therapy Specialty Group | Hong Kong Physiotherapy Association

Delegate | Hong Kong | The International Federation of Orthopaedic Manipulative Physical Therapists (IFOMPT)

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