



# Advanced Physical Therapy Education Institute

# APTEI REPORT

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## Successfully teaching birds to fly

You've got to try this experiment. The next time you see a flock of birds sitting on wires or on a tree, get close and teach them how to fly. Use your arms to demonstrate how they should flap their wings in order to effectively lift themselves off. You will amazingly notice that some of them will start to fly; clearly demonstrating the effectiveness of your intervention.



You may feel good about yourself with the self-satisfaction that if it wasn't for you, those poor birds would be helplessly sitting and not flying for a lot longer or perhaps even for the rest of their lives. You may also confidently believe that no other intervention could have possibly helped those birds fly. It is clear as day, you taught those birds to fly and that is thanks to the highly tuned arm flapping techniques that you learned at this amazing course.



I certainly hope that you can see the sarcasm in the story. When I graduated from PT school, I was eager to take every post-graduate course I could find and was always amazed at how effective the techniques were when I enthusiastically applied what I had learned the next day. After a while, I would be disappointed when the same techniques failed to consistently work anymore, so I'd move onto the next course; McKenzie, Manual Therapy, Mulligan, neural mobilizations, soft-tissue work, motor control retraining, breathing, mindfulness meditation, pain science education, etc. I thought I would eventually find the magic approach.

I am now humble enough to admit that I mostly do nothing other than empower my patients to get better, not much more than when I teach birds to fly. The truth is that just by my presence, the birds are more likely to fly, never mind the fact that I am enthusiastically talking, jumping and flapping my arms in front of them.

I am fascinated by clinicians who so confidently claim and truly believe that their intricate manual therapy, needling or soft-tissue "release" skills, is what helps their patients recover. Do they truly believe that if it wasn't for them adjusting, needling or releasing their patients, they would have never gotten better?

In the meantime, try teaching birds how to fly; it's an amazing experience. Even better, do this with children... you'll have a laugh :o)

*In health, Bahram Jam, PT*

*P.S. The quarterly APTEI Reports will be monthly from now on, but shorter, hope you enjoy the new format.*

**Video of the month:** [Power of Positive Words](#)



Access past APTEI Report articles & videos at [www.aptei.ca](http://www.aptei.ca) 'Clinical Library' ...thank you for subscribing!

## **Does your presence matter?**

📖 **Reference:** [Benedetti F et al Open versus Hidden Medical Treatments: The Patient's Knowledge about a Therapy Affects the Therapy Outcome May 2003 Prevention & Treatment 6\(1\)](#)

To demonstrate the value of our presence when treating patients, similar to being present when teaching birds to fly, I would like to summarize this eye-opening study done in an Italian hospital.

All treatments have 2 potential effects, the first one is the specific effects of the treatment itself and the second is the effects of the knowledge that the treatment is being provided, which we simply call the placebo effect.

Post surgical patients were randomly allocated to receive their intravenous analgesics (morphine) either directly from their doctor or secretly.



In the first scenario, the doctor stood beside the patients' beds as they infused the morphine through an IV line while explaining that the medication was a strong painkiller and that it would take effect in a few minutes. In the second scenario, the morphine was given by a preprogrammed machine without any doctor or nurse present, making the patients unaware that they were receiving any pain meds.

The patients in both groups kept a pain diary where they rated their pain from 0-10 at 30 and 60 minutes post infusion. As you may expect, the administration of morphine was more effective when the doctor was present. At baseline both groups had an average of 7/10 pain but after an hour, the doctor administered morphine group had an average of 4.3/10 pain while the secretly administered group had 5.8/10 pain.

The difference may not sound like much but think about it, the morphine itself reduced pain by 1.2 while the presence of the doctor reduced the pain by another 1.5; so technically the presence of a doctor had greater benefits than the morphine itself!

Please view my [online course on Therapeutic Alliance](#) to learn skills for maximizing the power of your presence with your patients.

## **Dry needling for neck pain**

📖 **Reference:** [Gallego-Sendarrubias et al Efficacy of dry needling as an adjunct to manual therapy for patients with chronic mechanical neck pain: a randomised clinical trial Acupunct Med . 2020 Aug;38\(4\):244-254.](#)

Tender points in the trapezius and levator scapulae muscles are common in patients with chronic mechanical neck pain. These tender points are referred to as “Trigger points” which continues to be a controversial entity. Nonetheless, there is not much controversy that some people have tender spots in some of their neck muscles.

Depending on the bias of the health care provider these tender points may be treated by soft-tissue work using various manual therapies and/or dry needling.

This RCT compared the effect of soft-tissue manual therapy (MT) with and without dry needling (DN) on one hundred patients with chronic mechanical neck pain.



Those in the treatment group received two 5-minutes of DN prior to their 1-hour soft-tissue MT session. Those in the control or sham group received the same treatment, except that the needling involved a blunt tip needle that did not even penetrate the skin, in other words, placebo needling.

Immediately after each session and after 4 weeks, both groups showed improvements in various outcome measures, however compared to the placebo needling group, those who received the two 5-minute sessions of real DN had significantly greater improvements in their pain, function and neck mobility.

I fully realize that overall needling gets a bad rap as many studies show that it is no more effective than placebo; however this 2020 RCT supports that two 5 minute sessions of dry needling was BETTER than placebo.

For future APTEI course on Acupuncture & Dry Needling you may click [here](#).  
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