Report 2010 from REHABILITATION ASSOCIATION OF RESPIRATORY INSUFFICIECIES – ARIR – Italy

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Introduction

I'm very happy to be here for the 6th consecutive year and to see all of you again.

I'm here with my colleagues Anna Brivio, the secretary of our association, and Simone Gambazza, a member of ARIR, who has been helping our association with ARIR/AARC contacts since 2009.

This year we are particularly happy that the **Hector Leon Garza Award** for Promoting Excellence in Intenational Respiratory Care has been given to **Stefano Nava**, an Italian doctor who works with our association, contributes to its growth and supports it in the dissemination of respiratory care and the development of the respiratory physiotherapist's role and position in Italy.

Throughout 2010, as usual, all of us at ARIR were busy pursuing the goals we set in harmony with our mission.

The mission

"The aim of ARIR is to extend the science of respiratory care to other branches of medical science (chronic respiratory disease, intensive care, pediatrics, and so on). The association also promotes the cultural growth and development of professional respiratory physiotherapists in the Italian health system."

Strategies

The main strategies we implemented in coherence with our mission are:

- 1. Disseminating information about respiratory physiotherapists and the importance of what we do in Italy
- 2. Continuing education, training and teaching
- 3. Publishing
- 4. Affiliations with other associations
- 5. Educational projects
- 6. Trials
- 7. Communication

1. Disseminating information about respiratory physiotherapists and the importance of what we do in Italy

The ARIR was established to provide information about and promote Respiratory Care and the Respiratory Physiotherapist in Italy. We believe that the most feasible and fruitful approach for Italy is training through teaching and using facts to demonstrate responsibilities, skills and roles in the working environment.

2. Continuing education, training and teaching

As of today, more than 260 health-care facilities in Italy have turned to our association for ongoing training in respiratory care.

In addition to the basic courses, this year the topics were:

- non-invasive ventilation;
- the role of the physiotherapist in evaluating and treating respiratory disorders during sleep;
- "Guidelines, rehabilitation in respiratory diseases and the role of the physiotherapist" (Giornata ARIR 2010);
- retraining the respiratory patient for physical exercise and endurance;
- the use of databanks:
- the respiratory physiotherapist between surgery and pneumology;
- managing complications and comorbidity in the patient with chronic respiratory disease.

On the whole, and not counting university credits for the master's program, 295 continuous medicine education credits (CMEC) were assigned in 2010.

In conjunction with the University of Milan, we are continuing a **Master's Course** in **Respiratory Rehabilitation and physiotherapy: the course will be held again in 2011** for the fifth consecutive year.

The process for accrediting our master's course with the **International Education Recognition System** is in a well-advanced phase.

Simone Gambazza who is here with us, participated in a four week visit to the USA as a student in the III edition of the Master's in Respiratory Physiotherapy and Rehabilitation. Thanks to the contacts and agreements reached during our meetings with AARC and thanks to the important help from Jim Maguire, Simone was able to see firsthand the differences that distinguish American practice from the Italian situation and then he gave the Italian Association an up-to-date idea of the culture and life in U.S. hospitals.

With the support of many colleagues at Brigham and Women's Hospital, Kindred Hospital, Beth Israel Deaconess Medical Center and Children's Hospital (MA), Simone was able to understand the professional and academic development of RRTs, as well as the daily duties they perform in their clinical settings – that is the role and autonomy they enjoy on the international scientific scene.

This experience, that is extremely important from the cultural standpoint – exchange between the new and old continent - was also qualitatively significant in bringing our profession more scientific and academic rigor, as well as professional recognition.

In conjunction with the University of Milan, in 2010 we organized and held a university level Specialization Course on Non-invasive Mechanical Ventilation - NIMV. The course consisted of 76 hours plus 8 hours of clinical practice.

We are planning a **Specialization Course** on sleep disorders **OSAS** for 2011, again in conjunction with the University of Milan.

3. Publications

ARIR publishes two journals:

• "Rivista Italiana di Fisioterapia e Riabilitazione Respiratoria"

and, thanks to the invaluable cooperation with AARC:

"ARIR's Selections from Respiratory Care and AARC Times"

The aim of this selection is to bring the members of ARIR closer to their colleagues in the AARC and to build a bridge between the American and Italian worlds of respiratory care.

We have translated "A Guide to Aerosol Delivery Devices for Respiratory Therapists", the AARC guide about aerosol into Italian and we are currently working on the revisions and last touches.

4. Affiliations

Our association is affiliated with many associations and especially with the

American Association for Respiratory Care (AARC) Italian Association of Hospital Pneumologists (AIPO) Italian Society of Cystic Fibrosis (SIFC).

Together with the Italian associations we hold courses, seminars and congresses and, last but not least, the master's programs and the university level specialization courses.

In the area of cystic fibrosis, we conducted a **national survey on the physiotherapist's role in non-invasive ventilation.**

Furthermore, a group of physiotherapists from the Italian Society of Cystic Fibrosis prepared a document on the "The core competence of the physiotherapist working in regional centers for cystic fibrosis". The document was made part of the national manual for rating the excellence of the CF centers and will serve as a reference for training colleagues who will work in this field. The document on core competence was drawn up after a Survey of the Standards of Care in Cystic Fibrosis in Italy with specific attention to indicators for human resources – physiotherapists – dedicated to CF.

5. Educational projects

We produced two DVDs - on long term oxygen therapy - LTOT - and on physical exercise in COPD, and another DVD on respiratory physiotherapy and the role of the respiratory physiotherapist in vis à vis the patient. We also translated these DVDs into English and Spanish.

It is a series of audio-visual documents with written support. This information is now available on the association's website and is distributed, free of charge, to anyone who requests it - patients, organizations, corporations, health professionals. The objective is to disseminate a "culture" of respiratory care, to give patients useful information and, at the same, give them direct information about what the respiratory physiotherapists do – or rather – how we can help them with their healthcare needs.

Our **website** is also visible in English, and we are now also on **Facebook**.

6. Trials

This is a new and demanding project.

Our association sponsored and is coordinating a controlled, randomized multicenter study on the "Effects of home-based pulmonary rehabilitation in patients with severe or very severe chronic obstructive pulmonary disease (COPD)".

The primary objectives of the study include evaluating whether the addition of a package for respiratory rehabilitation at home is more effective than customary treatment alone (usually this treatment involves scheduled visits to the base pneumological center, education through written material and a monthly phone call) considering the number of meters covered during the walking test.

The secondary objectives include the indirect evaluation of the economic savings and the assessment of clinical effectiveness according to secondary variables such as dyspnea, fatigue, daily activities and quality of life.

The study has been published on ClinicalTrials.gov (ClinicalTrials.gov Identifier

NCT01198288. ClinicalTrials.gov processed this record on November 04, 2010).

7. Communication

GARD – Italy (Global Alliance Against Chronic Respiratory Disease) was officially established in Rome on 11 June 2009. Gard Italy comprises an alliance of three parties:

- the Italian Ministry of Health
- Patient associations
- Scientific societies

ARIR is one of the scientific societies, and represents Italian respiratory physiotherapists.

ARIR is also part of the GARD – Italy Executive Committee.

Priorities include combining activities in a national action plan for chronic respiratory diseases that will be part of the Ministry's National Health Plan. Work is continuing and ARIR has been involved with several GARD-Italy programs, and specifically the working group on "Continuing care", with the goals of:

- 1. improving the care of patients with respiratory diseases by identifying integrated service management models to improve care continuity and to guarantee appropriate diagnoses and treatments;
- 2. to draw up recommendations regarding the "quality" (technological organizational professional) of pneumology and allergology facilities.

This is an important opportunity for the development of respiratory physiotherapists in Italy, and the evolution of their collective role.

GARD Italy was established with a fixed duration and that is, until 2013

Conclusion

The ARIR, representing Italian respiratory physiotherapists, is continuing its work for the establishment of respiratory care in Italy through a constant group effort – on a voluntary basis – that involves cultural programs, university training, courses, conferences and publications and its participation in projects aimed at sensitizing the public to topics related to respiratory issues.

On behalf of the ARIR I would like to thank you for your attention, your collaboration and your help.

Las Vegas, Wednesday, December 8th 2010.

Sergio Zuffo, PT, MSc,