

## Interview with Prof. Dr. Sérgio Fonseca da Teixeira

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We interviewed the Director of the School of Physical Education, Physiotherapy and Occupational Therapy of UFMG and Chief Editor of the Brazilian Journal of Physical Therapy, Dr. Sérgio Fonseca Teixeira.



*Dr. Fonseca holds a degree in Physiotherapy from the Federal University of Minas Gerais (1986), a Masters in Physical Therapy - University of Alberta (1989) and a PhD in Applied Kinesiology - Boston University (1997). In 2006, he completed his postdoctoral training at the Center for the Studies of Perception and Action (CESPA) at the University of Connecticut. Sérgio Fonseca is a Full Professor of the Physiotherapy Department of the Federal University of Minas Gerais. He is currently Director of the School of Physical Education, Physiotherapy and Occupational Therapy at UFMG and Editor-in-Chief of the Brazilian Journal of Physical Therapy, along with professors Leonardo Costa and Paula Camargo. He has experience in the area of Physical Therapy, with emphasis on Human Functional Performance, acting mainly on the following themes: functional stability, biomechanics of the tissues, rehabilitation and prevention of sports injuries and motor behavior (dynamic systems and action perception).*

**1) What advice could you give for a student who intends to pursue a scientific career in our country or abroad? What skills should be improved?**

The fundamental factor for the scientific career is the desire for new knowledge. Uneasiness with easy explanations and scientific curiosity is the first step in defining whether a scientific career is something of interest. For this, the ability to understand texts and English fluency are fundamental. Unfortunately, we live in a scientific society centered on the English language, and therefore the domain of language gives us independence to seek new information.

**2) What are the main barriers to producing quality research in Brazil? And what are the main advantages?**

Brazil has good graduate programs, good professionals, creative researchers and many qualified students. It means that our advantage is ourselves. Unfortunately, the lack of funding on a regular basis and the excess of bureaucratic/administrative tasks faced by researchers reduce our scientific competitiveness. We work with less time for research and less money when compared to researchers from leading countries in science. Ironically, our demand for production is the same (and in some cases higher) that academic researchers in these countries have.

**3) The Brazilian Journal of Physical Therapy is one of the most respected physiotherapy journals in the world. As Editor-in-Chief of this magazine, do you attribute to the success of the journal to what?**

Since 2006, we have made an option to take the name of Brazilian Physical Therapy to the world stage. For that, a strong journal and good research were needed. In Brazil, we have several Graduate Programs in Physiotherapy with great quality and, therefore, we have qualified personnel to produce good science. In the process of growing the journal, we needed to gain the trust of the professors of these programs so that good articles could be submitted for publication. The first step to this achievement was to have the Journal accepted in the Web of Science and be listed on the JCR. With this, we began to receive an evaluation that quantified the impact of the BJPT. Having achieved a certain stability in our impact factor over the years, our good researchers realized the seriousness of the Journal and started to send their good articles. This process resulted in a virtuous circle, because with good articles, we had more citations and with more citations we conquered a greater impact. Finally, with a greater impact we have a greater number of good articles and the process continues. At the end of several years of work, we obtained an impact factor of 1.669, which places us as the 11th best Brazilian scientific journal, considering all areas of knowledge. This is an achievement of Brazilian Physical Therapy and a source of pride for all of us. Despite the work of the

Editors in Chief, Associated Editors, reviewers and major supporters such as CREFITO-4, success should be shared with all the researchers who submitted their articles to the Journal.

**4) For those who are interested in publishing an article in the Brazilian Journal of Physical Therapy. What are your advice, what cannot be missing in the article?**

The BJPT seeks quality, but above all: innovation. Good ideas tested with methodological rigor is what we are looking for. An article has to be scientifically sound, with clear objectives and clear writing. Nowadays, we have to have agile content and the author must go directly to the point. Coherence between objectives, method, and conclusion is what you can never miss in an article.

**5) One of your main collaborators is the world-renowned Dr. David J Magee, professor at the University of Alberta (Canada), a reference in the field of musculoskeletal assessment, author of several scientific papers and books used in all physiotherapy undergraduate curricula. Tell us a bit about this relationship with Dr. David J Magee?**

Dr. Magee was my masters adviser and today he is a close friend. He is a fantastic person, owner of an unique wisdom. This wisdom is not just about physical therapy, but mainly about people and the world. I did a Master degree at the University of Alberta without knowing him previously. Luckily, he got in my way, as an example of someone who cares about Physical Therapy, but also with the people around him. A great man, a great scholar.

**6) You have already said that in your academic / professional trajectory you thought about giving up physical therapy. Why? And what made you change your mind?**

The physiotherapy, when I graduated, was very rudimentary. Based firmly on the medical model, the physiotherapist was treated as a technician who applied his/her intervention without any logical reasoning. We used to treat the disease, not the individual. This fact discouraged me to continue in the area. Fortunately, I had the opportunity to meet great Brazilian and foreign physiotherapists. This fact brought me new perspectives and made me devoted to this wonderful profession. Currently, the context is different. Our profession has changed, grown and gained respect. The body of knowledge needed to be a good physical therapist is huge. For those who are not afraid to study and learn, it is worth to be a Physical Therapist.

**7) What are the main differences between physiotherapy practiced in Brazil and in the other countries that you have visited?**

Physiotherapy varies greatly from country to country. Incredibly, it varies from state to state. It is therefore very difficult to characterize the differences. In general, physiotherapy in English-speaking

countries is more scientific and standardized. They are less creative and attentive than Brazilians, but they are practical and organized. I cannot say which is better or worse. I just know that we have the potential to unite the best of worlds and give our client the most effective solution to their problems.

**8) Make a commentary about your sentence: "Being a physical therapist is easy, however being a good physiotherapist is very difficult". Describe to us what makes this science so challenging?**

This refers a little to what I said earlier. Doing quality physiotherapy, with clinical reasoning, requires a lot of knowledge. Studying and practicing is fundamental to being a good physiotherapist, but it is also necessary to be able to perceive relationships between different information. It is fundamental to think about the various dimensions that affect our client's health and to understand the complexity involved in the onset of pathological processes. Being a good physical therapist requires practice based on evidence and science. A great deal of knowledge is needed. To be a good physiotherapist is for the strong ones.

**9) Sometimes, on clinical trials in the field of physiotherapy, we have observed that the efficacy of a technique is not superior to placebo. You have already stated that this stems from ill posed question. Tell us a little more about this?**

Unlike the classical medical model, we do not treat the disease, but the individual. This is due to the fact that the causes for the same pathological process may vary from one individual to another. This phenomenon is called Equifinality, which establishes that the same outcome can have several different causes. In this way, how can we treat the same disease always in the same way? Two persons with the same medical diagnosis may require different treatments, as

the causal link may be distinct in both cases. Thus, when we ask whether method A is better than method B for treating a condition C, we are asking the wrong question. In physical therapy the correct question is whether method A fulfills the goals that it proposes and not if it treats a certain health condition. We should ask, for example, if mobilization changes the length of the mobilized tissue and not whether this technique is capable of treating a particular disease. When we compare a single technique with placebo in the treatment of a disease, we are putting the profession at risk because we may erroneously conclude that our interventions are ineffective. Unfortunately, like everything in the world, when we ask the wrong question, surely the answer will also be wrong.

**Thank you for your support, attention and collaboration for the publication of the Journal, on behalf of UNIFOR / MG (Centro Universitário de Formiga / MG) and Conexão Ciência.**

*Dr. Andrei Pereira Pernambuco – Editor-in-Chief of the Conexão Ciência.*