Geoffrey Douglas Maitland 1924–2010

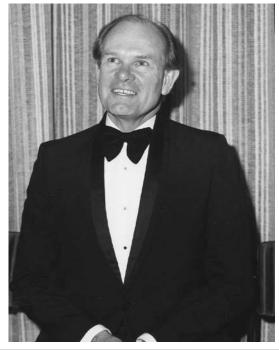
Gwendolen Jull

Division of Physiotherapy, The University of Queensland

The physiotherapy profession internationally was saddened to hear of the passing of Geoffrey Douglas Maitland on 22 January 2010. Geoff Maitland provided outstanding leadership to the profession nationally and internationally. He was a visionary, a master clinician and communicator, a thinker and innovator, a political activist, and an extraordinary mentor. His is a life to celebrate. His contribution to the physiotherapy profession particularly in the field of manipulative and musculoskeletal physiotherapy has left an enduring legacy and the significance of his life's work is evident today in many quarters of the physiotherapy profession.

Probably the greatest international legacy is Geoff Maitland's pioneering work in establishing a system of assessment and manual therapy management of individuals with musculoskeletal conditions, which he began to develop in the early 1960s and continued to develop over his lifetime's work in physiotherapy. He was clearly an adventurous and determined man. Some 50 years ago he recognised the need to look outwardly and internationally to develop professionally, and he travelled to England to study and learn different methods of spinal manipulation from the medical and osteopathic leaders of that time. Geoff returned to Australia to develop a unique system of assessment and management. It differed from other systems that were also being developed at the time in Europe and the USA, in that it emphasised patients, their pain and functional/movement disturbances. Geoff Maitland's approach emanated from a very patient-orientated basis, focussing on presenting

symptoms and physical signs, rather than being based on a biomechanical or pathological model. What is now referred to as clinical reasoning in assessment and management was a hallmark of his approach from the outset. In developing his approach, Geoff Maitland emphasised the need for the physiotherapist to understand the patient and their pain, its nature, behaviour, and irritability. Quite uniquely, he developed a system of graded application of passive movement in which passive movement was used to modulate pain. Historically, assessment and continuous reassessment have also been a defining characteristic of the approach to monitor the patient's progress and to direct progression of management. In a technologically juvenile era compared to the present day, Geoff Maitland relied on his extraordinary clinical and



reasoning skills to underpin his clinical theories and practice methods.

So how has time judged Geoff Maitland's clinical theories and clinical art some 50 years on? Time in fact is revealing what a master clinician and thinker he was. For example, research is demonstrating that the neurophysiological effects of passive movement are possibly premier in its mechanisms of physical effect. The repetitive application of passive motion seems likely to stimulate endogenous pain control systems at several levels of the central nervous system with many studies showing consistent responses of concurrent hypoalgesia, sympathetic nervous system excitation and changes in motor function (Schmid et al 2008), as well as a reduction in spinal hyperexcitability (Sterling et al 2010). Rapid progress has recently been made in the pain sciences. The concept referred to by Maitland as irritability 50 years ago may well be analogous to current language of augmented central pain processing. Similarly Maitland's early emphasis on continuous reassessment sits well with current emphases on outcome measures.

A systematic approach, but a lack of rigidity, defined Geoff Maitland and his approach to the management of patients with musculoskeletal disorders. He encouraged clinicians and his students to think, explore, experiment, and create. The legacy of this attitude and guidance is that the physiotherapy profession has had a foundation upon which to explore and advance both clinically and in research. Australian physiotherapists have led internationally in musculoskeletal research and practice and have produced internationally

> renowned clinicians, researchers, and teachers. The philosophy of Maitland's approach still underpins teaching in manual therapy in Australia and many other countries around the world. As he would expect and wish, there has been tremendous growth, development, and change in assessment management methods for and individuals with musculoskeletal disorders in response to research and physiotherapists' creativeness which he always encouraged.

> Geoffrey Maitland was also an outstanding role model in the discharge of the professional responsibility of imparting knowledge to the new generations of physiotherapists. He was a dedicated teacher and gave over 30 years of service to education locally, nationally, and internationally at

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undergraduate and postgraduate levels. He supported those who in turn taught both in Australia and internationally. His texts on vertebral and peripheral manipulation and their revised editions were the foundations for teaching. He very much advocated for musculoskeletal physiotherapy in the wider health field and, notably, his first two publications were in the *Medical Journal of Australia* in 1957 and 1961.

Geoffrey Maitland had a vision and a passion for the growth and development of the physiotherapy profession. He had a passion for standards of manipulative therapy practice. He taught the first postgraduate certificate courses in spinal manipulative therapy in 1964 under the auspices of the Australian Physiotherapy Association (South Australian Branch). He, with Marie Hammond and others at the then South Australian Institute of Technology, saw the need to introduce postgraduate programs in manipulative therapy into tertiary institutions, so that students gained appropriate training, qualifications, and recognition of skills. The first courses ran in 1974 and now there are postgraduate masters programs in musculoskeletal physiotherapy in most states of Australia and many countries around the world. Geoff Maitland played a key role in the establishment, in 1966, of the Manipulative Therapists Association of Australia which has now evolved into Musculoskeletal Physiotherapy Australia. He saw the need for Australians to stand tall and be leaders in the international arena of musculoskeletal physiotherapy. As early as 1967, Geoff Maitland was meeting with other international figures to discuss the formation of an international association for manipulative therapy and was subsequently a co-founder of the International Federation of Orthopaedic Manipulative Therapists (IFOMT) in 1974. Other Australians have followed his path and held prominent positions in IFOMT.

Geoff Maitland was also a member of the inaugural APA editorial committee charged with the responsibility of producing a national journal (now known as *Journal of Physiotherapy*) in the 1950s. He served as its Honorary Business Manager until 1958. Specialisation is an important career path for physiotherapists and a way to serve the community with the highest standards of practice. Geoff Maitland was a key player in the establishment of Australian College of Physiotherapists and was its first president on its inauguration in 1971. He became a Fellow of the College by Monograph in 1979 and in 1984 he became one of the first Fellows by Specialisation. History shows when there was innovation and progress – Geoffrey Maitland was there.

Geoff Maitland provided outstanding leadership to the physiotherapy profession nationally and internationally. His legacy will endure and will influence future generations of physiotherapists. He inspired countless physiotherapists to strive for leadership and excellence in practice and there are many physiotherapists in Australia and internationally who would identify with Sir Isaac Newton's words, 'If I have seen further it is only by standing on the shoulders of giants.' Geoffrey Maitland was a giant; we mourn his passing, but celebrate his life and contribution.

References

Schmid A et al (2008) *Manual Therapy* 13: 387–396. Sterling M et al (2010) *Manual Therapy* 15: 149–153.