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Has the Italian Academia Missed an Opportunity?

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tool performance, while meaningful, are only suggestive. A different study design would be required to determine whether, in actual practice, use of the LLFI (versus LEFS) is more appropriate for indicating physical therapist intervention for patients with HIV disease. Our findings suggest that such a study is warranted. With respect for the methodological concerns discussed herein, we close by emphasizing the most important clinical bottom line of our study: patients with HIV-related DSP have lower quality-of-life scores (physical health summary) and lower self-reported function scores, as determined by either the LEFS or the LLFI, than patients with HIV disease but not DSP. The greatest impact of our study is that we have added to the limited body of literature that describes the negative impact of DSP in patients with HIV disease.

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Has the Italian Academia Missed an Opportunity?

In universities around the world, physical therapist experts with a scientific background are appointed as professors of physical therapy. In the Italian academia, however, only 2 physical therapists have been appointed as professors in the academic sector known as "Sciences of nursing, rehabilitation and neuropsychiatric techniques" (MED/48).¹ A total of 85 university programs of physical therapy are being taught in Italy, and thousands of credits are entrusted to physical therapists—yet most of these therapists are not officially part of the Italian academic world.

In 2010, there was an expectation that this situation would change when the Italian Ministry of Education, University and Research (MIUR) introduced a new process for the appointment of Italian university professors.² The first step of this new process (started in 2012) is national qualification for each scientific sector, with qualification awarded by specific commissions on the basis of the applicant's educational and research productivity. Only researchers who are qualified by one of these commissions are subsequently permitted to participate in the second step for becoming an Italian university professor: a competitive examination issued locally by each university.

Italian physical therapists had great hope for this new process, because a growing number of physical therapists

in Italy are involved in scientific activities and publish in indexed journals.³ In 2010, some of these therapists founded the first Italian Scientific Society of Physical Therapy, which promotes scientific activities in the field of physical therapy and publishes a scientific journal.⁴

However, the new process did not result in the hoped-for change.

As part of the process, in order to provide the qualification commissions with evaluation data, 3 bibliometric indexes (number of publications indexed in Scopus or ISI databases normalized for academic age; number of citations normalized for academic age; contemporary H-index) were adopted, setting the threshold at the level of the median values of current professors in the same scientific sectors as the applicants.⁵

In the past 10 years, the Allied Health Professions (AHP) sectors (MED/46 to MED/50)—which include physical therapy (MED/48)—have become a "land of conquest" for researchers from other disciplines whose qualifications (ie, medical doctor) do not comply with the AHP scientific requisites, as explicitly stated by the MIUR.¹ In the MED/48 sector, for example, most current professors are neurologists or cardiologists.

In this new appointment procedure, the MIUR collapsed all AHPs into a single scientific sector (named 06/N1),⁶ whereas nurses maintained their own separate sector. The result of this merger, along with the non-congruent academic background of the current professors, was that the bibliometric indexes did not reflect the true level of scientific production of the rehabilitation sciences. The threshold of median values was, in our opinion, set too high for the scientific production of Italian physical therapists. It is well known that papers published in rehabilitation journals are less cited than papers

Table. Qualification Committee for the Allied Health Professions Sector (06/N1)

Name	Degree	Specializations	University
Bramanti Placido	MD	Neurology	Messina
Condorelli Gianluigi	MD	Cardiology	Bicocca, Milan
Farinaro Eduardo	MD	Internal Medicine, Cardiology	Federico II, Naples
Fрати Luigi	MD	Endocrinology, Oncology, Laboratory Medicine	La Sapienza, Rome
Piattelli Adriano	MD	General surgery, Oral Diseases, Dentistry	G. D'Annunzio, Chieti-Pescara

published in other types of medical journals,⁷ as shown by comparing the physical therapy profession with physicians who specialize in physical and rehabilitation medicine, grouped in the 06/F4 sector.⁶ The median of the contemporary H-index required for physical therapists to become qualified (>8) is 2.0 times higher than that required for physiatrists (>4), the normalized number of citations (>19.84) is 5.6 times higher than that required for physiatrists (>3.55), and the number of published papers (>21.5) is 1.5 times that required for physiatrists (>13.5).⁸

For the national qualification trial, 799 researchers applied for the AHP sector, but only a very small number of them (n=26) were physical therapists and more than 700 did not belong to AHPs. Meanwhile, a physical therapist cannot attain qualification in the related sector of Physical and Rehabilitation Medicine, because the commission decided to make the specific academic qualification in this field—a graduate degree in medicine and surgery and specialization—a prerequisite. This decision is reasonable: no one would expect physical therapists to be grouped in this category. However, we wonder why neurologists, cardiologists, and other medical specialists may be grouped in the category of physical therapists.

The results of the 2012 certification procedure were announced in June 2014, with 172 applicants qualified. Nearly all of them are medical spe-

cialists or biologists, with the exception of a few chemists and engineers, and only 4 are AHP graduates: 1 speech therapist, 2 laboratory technicians, and 1 physical therapist. The latter received her education in the Netherlands and carried out most of her clinical and research activities in the Netherlands and Germany. None of the Italian physical therapists who applied attained the qualification.

The commission members judged journals where physical therapist applicants' articles were published as journals with a poor scientific profile. This statement is found, for example, in the committee judgments of applicants #149, #324, #769, #687, and #775,⁹ who published in journals such as *Physical Therapy*, *Journal of Orthopaedic & Sports Physical Therapy*, *Manual Therapy*, *Archives of Physical Medicine and Rehabilitation*, *Clinical Rehabilitation*, and *Neurorehabilitation & Neural Repair*. Surprisingly, articles published in these journals also were frequently judged to be inconsistent with the scientific sector of AHPs. However, the opinion of commission members in this regard is confusing, as their decisions are often contradictory.⁹ For example, the scientific production of applicant #34 is judged as "focused on physical therapy and rehabilitation, and therefore consistent with the 06/N1 sector...." Conversely, as regards applicant #775, the committee states that "Presented papers deal with physical and reha-

bilitation medicine and with physical therapy.... The scientific production is...not consistent with the 06/N1 sector." Some applicants were judged suitable to become professors in the AHP sector in light of their scientific production, despite presenting only 1 or 2 articles that the commission considered consistent with that scientific sector. In many cases, articles published in different fields were considered to be congruent, based on the translational value of these articles. A possible explanation for these decisions is that commission members are all physicians, with backgrounds and specializations that differ from the field they are being asked to evaluate (Table).

We believe that Italian academic lobbies have decided to exclude Italian physical therapists from the academic world with the justification that the scientific level of physical therapists is not up to standard. We suspect this is because their scientific level is compared with that of researchers from a wide range of different scientific disciplines and with degrees not consistent with those of AHP sectors.

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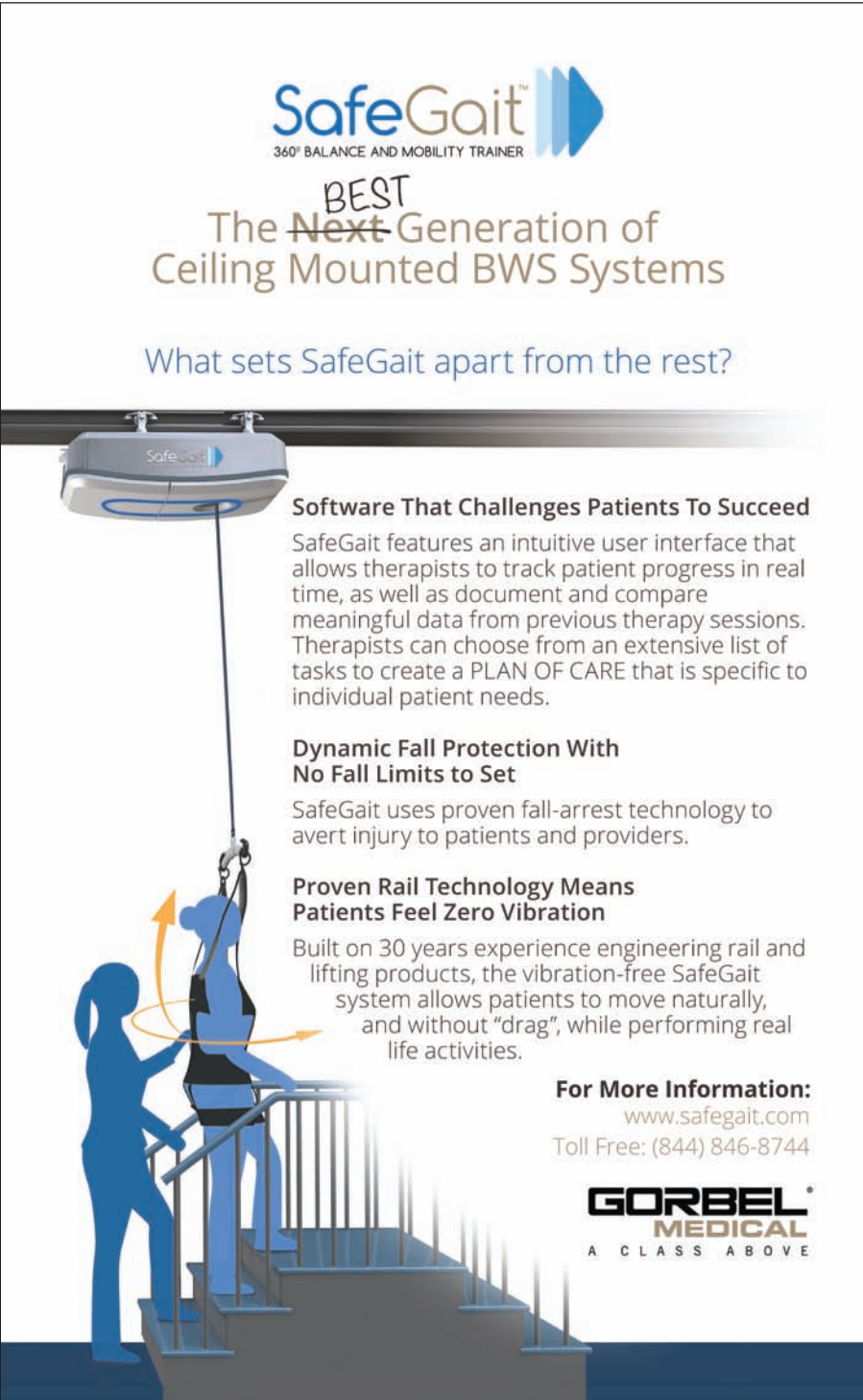
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