

Learning and Mastering the Techniques of Manual Osteopathic Skills

1. What is the Manual Osteopath?

The word osteopathy originates from two Greek words, “osteone” which means structure and “pathos” which means pain. The word, “manual” means that it is a hands-on therapy. Osteopathy is a natural medicine and science that treats the whole person. It requires extensive study of anatomy and physiology. The principles of osteopathy are based on the relationship between structure and function and understanding the connections between all the tissues, fluids and systems of the body. Orthopedic and other manual tests and techniques are used to find and treat the root causes of dysfunction, not just the symptoms. The goal of treatment is to restore the integrity and mobility of the structure as much as possible, to improve the function. Once this is accomplished, each person is capable of healing themselves. “Natural forces within us are the true healers of disease.” (Hippocrates, 460 BC – 377 BC). Gentle, manual, hands-on techniques are used. Osteopaths study and develop very sensitive palpation skills and this is what sets them apart from other manual therapists. Like pianists perfect their motor skills through practicing their instrument, an osteopath's sensory skills gradually develop to a level of precision and sensitivity that enables them to detect the subtleties of disturbed tissue or rhythms in the body.

2. History of Manual Osteopath

Dr. Andrew Taylor Still (1828-1917) was an American frontier doctor. In 1864, he became discouraged with allopathic medicine when he lost three of his own children to meningitis. He spent the next 10 years studying anatomy, health and disease, searching for a drugless, more natural, hands on approach to medicine. In 1892, Dr. Still founded the American School of Osteopathy (ASO) in Kirksville, U.S.A. American trained osteopaths are called osteopathic physicians because they are medical physicians. The first class had 12 male students and 3 female students. Allowing women to participate was revolutionary at the time. By 1902, three hundred students graduated from the ASO, some traveling to Canada and Europe to practice there. In 1918 Dr. Martin Littlejohn, a student of A.T. Still's founded the British School of Osteopathy in London, England. Graduates were (and still are) restricted to practicing manual osteopathy only and are not physicians. The U.K. government has officially recognized osteopathy since the passage of the Osteopaths Act in 1993. Osteopathy spread to other countries in Europe. In each country, osteopaths have worked to

gain official recognition. There are both manual osteopaths and osteopathic physicians in Canada and Europe today.

3. Scope of manual Osteopath Practice

The scope of practice of osteopathic practitioners varies by country. In general, *osteopaths* trained outside of the U.S. are not physicians, are limited in practice to non-invasive manual therapies, and may provide nutritional, postural, and other health advice. Conversely, U.S.-trained *osteopathic physicians* practice the entire scope of modern medicine. To avoid confusion, the American Osteopathic Association and the American Association of Colleges of Osteopathic Medicine recommend using the terms *osteopathic physician* (U.S.-trained only) and *osteopathic medicine* to distinguish individuals trained in osteopathic medicine in the United States and the field they practice from *osteopaths* trained in manual osteopathic treatment, the restricted-scope form of osteopathy found in other countries around the world.

As with all other forms of complementary and alternative medicine, the practice of osteopathy does not always adhere to evidence-based medicine (EBM). There is little evidence that osteopathy is effective in treating any medical condition other than lower back pain. In the UK, the National Institute for Health and Care Excellence recommends osteopathy for the treatment of persistent lower back pain.^[5] Analysis of peer-reviewed research yields little evidence that osteopathy is effective for non-musculoskeletal conditions, and limited evidence that osteopathy is an effective treatment for some types of neck pain, shoulder pain, or limb pain.^[4] According to the NYU Langone Medical Center, the fundamental reason for the lack of published research on osteopathic treatment is the inability to employ double-blind, placebo-controlled trials when studying osteopathic manipulation, since researchers are unable to blind both the practitioner and the patient.

The practice of (non-medical) manual osteopathy is not currently recognized as a regulated health profession under the Ontario *Regulated Health Professions Act, 1991*, or any other legislation. There is no *Act* which defines a scope of practice for osteopathy. Regulated health care professions have a defined scope of practice under profession-specific Acts. However, many manual osteopathic practitioners are regulated health care professionals, such as nurses, massage therapists, occupational therapists and physiotherapists, who have sought additional education and training in order to provide manual (non-medical) osteopathic assessment, care and treatment. Some of them are graduates of osteopathy educational programs in Europe where the practice of osteopathic manual practitioners is regulated and practitioners can legally use the title “osteopath”.

Osteopathic Manual Practitioners have extensive training in manual osteopathic practice, but they are not medical doctors and cannot prescribe medication, perform surgery or perform labour and delivery. They assess and treat patients using an osteopathic philosophy and manual techniques only. The education and clinical training needed to become an Osteopathic Manual Practitioner is available in Canada.

4. Skills and Techniques of osteopathic treatments

Osteopathic manipulative treatment (OMT in the U.S. or simply "osteopathic treatment" elsewhere) is the therapeutic application of manually guided forces by a practitioner, intended to improve physiologic function and/or support homeostasis that has been altered by somatic dysfunction. Somatic dysfunction is defined as impaired or altered function of related components of the somatic (body framework) system: skeletal, arthrodiagonal and myofascial structures and their related vascular, lymphatic and neural elements. Acute somatic dysfunction is an immediate or short-term impairment or altered function of related components of the somatic (body) framework. It is characterized in early stages by vasodilation, edema, tenderness, pain, and tissue contraction. It is diagnosed by history and palpatory assessment of tenderness, asymmetry of motion and relative position, restriction of motion and tissue texture change. Chronic somatic dysfunction is the impairment or altered function of related components of the somatic (body framework) system. It may be characterized by tenderness, itching, fibrosis, paresthesias, and tissue contraction.

While there are many treatment techniques, OMT methods utilized may broadly be classified as active or passive and direct or indirect in nature.

- Active Method: A technique in which the person voluntarily performs an osteopathic practitioner-directed motion.
- Passive Method: Based on techniques in which the patient refrains from voluntary muscle contraction.
- Direct Method (D/DIR): An osteopathic treatment strategy by which the restrictive barrier is engaged and a final activating force is applied to correct somatic dysfunction.
- Indirect Method (I/IND): A manipulative technique where the restrictive barrier is disengaged and the dysfunctional body part is moved away from the restrictive barrier until tissue tension is equal in one or all planes and directions

Different techniques will be used depending on the somatic dysfunction/s present as well as different attributes of the individual being treated. Techniques include:

- Muscle Energy
- Counterstrain/Strain-Counterstrain
- High-Velocity, Low-Amplitude
- Myofascial Release
- Lymphatic Pump
- Ligamentous Articular Strain/Balance Ligamentous Tension
- Craniosacral
- Articulatory/Still's Technique
- Facilitated Positional Release

5. The Effectiveness of Osteopath Treatments

In general, the results of randomized, controlled clinical trials have not proven osteopathy to be an effective therapy. Reviews of scientific literature produce little evidence that osteopathic manipulation is effective for the treatment of musculoskeletal pain, or for pediatric conditions. A 2013 Cochrane Review reviewed six randomized controlled trials which investigated the effect of four types of chest physiotherapy (including OMT) as adjunctive treatments for pneumonia in adults and concluded that "based on current limited evidence, chest physiotherapy might not be recommended as routine additional treatment for pneumonia in adults." In the United Kingdom, the National Institute for Health and Care Excellence recommends osteopathy only for the treatment of persistent lower back pain. More research is needed to demonstrate the benefits of osteopathy. Analysis of peer-reviewed research yields evidence that osteopathy can be effective for musculoskeletal conditions particularly for some types of neck pain, shoulder pain, or limb pain.^[4] According to the NYU Langone Medical Center, the fundamental reason for the lack of published research on osteopathic treatment is the inability to employ double-blind, placebo-controlled trials when studying osteopathic manipulation, since researchers are unable to blind both the practitioner and the patient.

6. Comparing the Manual Osteopath with TCM techniques

TCM Osteopath and Orthopedics are an important component of Traditional Chinese Medicine. These kinds of Manipulation is one of the therapeutic methods which deals with the treatment of diseases by manual techniques such joints play or contractions or stretches similar with the Osteopath techniques, and is usually the first choice among many methods of treatment employed in TCM Orthopedics and Traumatology. With its long history and rich experience, the manipulative medicine is the essence of treatment in TCM Orthopedics and Traumatology. In recent decades, as combined with the modern science of Anatomy, Physiology, Pathology, Biomechanics, the manipulative medicine has developed greatly and its scientific standards are continually being improved.

7. Taking Manual Osteopathic Techniques and serving Canada and the rest of world

The osteopathic profession has evolved into two branches, non-physician manual medicine osteopaths and full scope of medical practice osteopathic physicians. These groups are so distinct that in practice they function as separate professions. The regulation of non-physician manual medicine osteopaths varies greatly between jurisdictions. In Australia, the UK, and New Zealand the non-physician manual medicine osteopaths are regulated by statute and practice requires registration with the relevant regulatory authority. The Osteopathic International Alliance has a country guide with details of registration and practice rights and the International Osteopathic Association has a list of all accredited osteopathic colleges. Several international and national

organizations exist relating to osteopathic education and political advocacy. One such organization, the World Osteopathic Health Organization (WOHO) permits individual membership by both "restricted scope manual therapist" osteopaths and "full scope of medical practice" osteopathic physicians. Similarly, there is also an international organization of organizations for national osteopathic and osteopathic medical associations, statutory regulators, and universities/medical schools offering osteopathic and osteopathic medical education, known as the Osteopathic International Alliance.

In Canada, the titles "osteopath" and "osteopathic physician" are protected in some provinces by the medical regulatory college for physicians and surgeons. As of 2011, there were approximately 20 U.S.-trained osteopathic physicians practicing in all of Canada. As of 2014, no training programs have been established for osteopathic physicians in Canada.

The non-physician manual practice of osteopathy is practiced in most Canadian provinces. As of 2014, manual osteopathic practice is not a government regulated health profession in any province. It is estimated that there are over 1,250 osteopathic manual practitioners in Canada, most of whom practice in Quebec and Ontario.

Today, Canada benefits from having U.S. trained osteopathic physicians, European-trained osteopaths (non-physician manual practitioners) and Canadian-trained practitioners. We have a unique opportunity to draw on the skills and knowledge of both of these groups to develop a distinct Canadian system of osteopathic health care.

Thanks to the presence of European-trained osteopaths, many more Canadians are benefiting from osteopathic care. In addition, allopathic physicians are beginning to see the benefits of osteopathic care.

Many Canadian osteopathic training programs emphasize research. The results of this research will benefit practitioners, patients, and the delivery of health care in Canada. Osteopathic manual practitioners, promote the highest standards of safe and effective osteopathic education, training, practice and treatment.

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