

Marcus Martinez
DOMP Program
Research Paper
February 5, 2015

Osteopathy: Mind-Body Techniques

Objective:

This paper will critically review the psycho-physiological benefits associated with the administration of various osteopathic manual therapies.

Part 1: What is Osteopathy?

In the 1880's Andrew Taylor Still began to develop his clinical understanding of osteopathy. Still placed emphasis on detailed knowledge of anatomy which became the basis for much of his diagnostic and clinical work, most notably palpatory diagnosis and manipulative treatment. Still also emphasized, for treatment to be effective, it needed to be tailored specifically for each patient's particular needs (Seffinger et al., 2003). Even as osteopathy continued to develop, the foundations of osteopathy remain the same. Paul Lee (2005) describes osteopathy as follows;

Osteopathic medicine is a philosophy of health care and a distinctive art, supported by expanding scientific knowledge; its philosophy embraces the concept of the unity of the living organism's structure (anatomy) and function (physiology). Its art is the application of the philosophy in the practice of medicine and surgery and all its branches and specialties. Its science includes the behavioural, chemical, physical, spiritual and biological knowledge related to the

establishment and maintenance of health as well as the prevention and alleviation of disease.

Osteopathic concepts emphasize the following principles: 1) The human being is a dynamic unit of function; 2) The body possess self-regulatory mechanisms, which are self-healing in nature; 3) Structure and function are interrelated at all levels; 4) Rational treatment is based on these principles.

The practice of osteopathic medicine is, essentially, the potentiation of the intrinsic health-maintaining and health-restoring resources of the individual (Korr, 2003). A series of statements appear in every discussion of foundational osteopathic principles and include “the body is a unit” and “structure and function are interrelated” (Seffinger et al., 2003). These statements recognise an interrelationship between the various components of each body system. As the “primary muscle of respiration” (Hruby, 2003) the diaphragm is predominantly involved in breathing function. However, the diaphragm’s extensive anatomical attachments and „pump-like“ action also contributes to pressure gradients, blood circulation, lymphatic flow, micturition, defecation, postural support and speech (DiGiovanna et al., 2005). Stone (1999) states “the diaphragm is one of the most remarkable areas of the body in that it has so much influence and the consequences of its dysfunction can manifest anywhere from the head to the toes”. Chaitow et al. (2002) comment that if there is evidence of breathing dysfunction for any length of time, the primary focus of attention should be on musculature and joints associated with the breathing process to restore normal breathing patterns. In osteopathy, there is a view that dysfunction of anatomical structures that relate to the diaphragm may alter breathing patterns, which in turn may influence a persons health and well being. Courtney (2009)

supports this view in stating, “impairment of the functions of breathing affects people’s lives, challenging homeostasis, creating symptoms and compromising health”.

‘Treatment’ vs ‘Technique’

For the purpose of this study, clarification of osteopathic techniques and treatment is required. In a short commentary, Patterson (2002) notes that there are essentially two types of studies of osteopathic manipulation; osteopathic manipulative technique and osteopathic manipulative treatment. Osteopathic manipulative treatment studies are guided by the patient’s condition and response to treatment, which then determine the techniques used. Osteopathic technique studies examine the effect of one or more specific osteopathic procedures. Patterson (2002) suggests that technique studies are valuable and necessary to determine the specific effects of a well defined technique on a target problem.

Osteopathic Treatment Methods

Osteopathic Manual Practitioners identify, assess, and treat the body’s structures and rhythms using a gentle, hands-on approach. This fundamental technique is called osteopathic palpation. Manual practitioners spend many years developing the very sensitive sense of touch they need to master osteopathic palpation.

Osteopathic palpation is what makes osteopathy different from other forms of therapy.

Manual practitioners use it in the four major treatment techniques:

1. Soft Tissue Manipulation

The practitioner uses soft tissue manipulation in many different ways. In general, they use it to evaluate the condition of tissues and to help the body’s fluids (such as blood and

lymphatic fluid) flow smoothly. Keeping fluids flowing smoothly reduces harmful fluid retention and makes the body's immune system more effective.

Fascia is tissue found in all parts of the body. It connects all of the body's structures at both superficial and deep levels. Practitioners evaluate the fascia to find areas of restriction, and then use soft tissue manipulation to make sure the length and tension of the fascia are properly balanced.

Throughout the treatment, osteopaths keep checking on the state of the body's tissues. If one technique isn't working to correct a restriction, they use another approach instead. Above all, osteopathic manual practitioners try to restore health without over-treating.

2. Osteopathic articular technique

Osteopathic Manual Practitioners use this technique to:

- *reduce muscle spasms near a joint
- *ease neurological irritations around a joint
- *make joints more mobile
- *reduce pain and discomfort

The articular technique involves gently moving 2 joint surfaces. Before doing this, practitioners carefully prepare the soft tissues around the treatment area. They also move the patient into a position that will minimize, or eliminate the energy and force needed to perform the move. Many patients find this technique less forceful than joint manipulations. A click is sometimes heard when the correction is made. This is nothing more than the synovial fluid moving through the joint.

3. Cranial osteopathy

This is the most gentle osteopathic technique, and it requires the most experience to use effectively. To learn this technique, Osteopathic Manual Practitioners undergo years of intensive training. Through this training, their hands become sensitive to the cranial mobility and develop great precision in utilizing cranial technique.

Osteopathic Manual Practitioners use this gentle technique to assess and treat the mobility of the skull and its contents. They may also use it to assess and treat the spine, the sacrum, and other parts of the body.

The goal of this technique is to adjust the body's physiology by restoring balance to the circulation of the blood and other body fluids. Practitioners do this by treating the body's inherent biorhythm. Practitioners trained in this technique can feel this rhythm in the patient's head, spinal cord, and in the sacrum and the rest of the body. Osteopathic Manual Practitioners use the biorhythm to assess the patient's condition, and they may modify it during treatment.

4. Visceral manipulation

Osteopathic Manual Practitioners use visceral manipulation to treat organs and viscera of the body, including: lungs, heart, liver, spleen, kidneys, stomach, pancreas, intestines, bladder and uterus.

Clients may feel pain in one or more of these organs, or the viscera may be less pliable than it should be. Osteopathic Manual Practitioners gently move the structures themselves and the fascia (connective tissue) that surrounds them to restore full movement.

Most patients treated with visceral manipulation feel only gentle pressure of the osteopathic manual practitioner's hand. But the corrections are powerful enough to improve the mobility of an organ, improve blood flow, and help the organ function more effectively.

5. Muscle Energy Technique (MET)

Muscle energy is a gentle contract/stretch technique used by the osteopath to relieve pain from muscles and decrease muscle spasms. It is especially good for muscular contractures, lower back pain and limited range of motion. Muscle energy is a **direct** and **active** technique; meaning it engages a restrictive barrier and requires the patient's participation for maximal effect. As the patient performs an isometric contraction, the following physiologic changes occur:

Golgi tendon organ activation results in direct inhibition of agonist muscles.

A reflexive reciprocal inhibition occurs at the antagonistic muscles.

As the patient relaxes, agonist and antagonist muscles remain inhibited allowing the joint to be moved further into the restricted range of motion.

Despite the many claims made regarding the efficacy of these techniques, there are only two peer-reviewed studies that have shown that muscle energy techniques can significantly decrease disability and improve functionality in patients with disorders such as low back pain. (Wikipedia).

Conclusion:

Osteopathy is arguably the most holistic of all approaches to alleviating pain and the symptoms of disease. It recognizes the mind/body/spirit connections that make us whole.

Through gentle manipulation of the spine, joints and soft tissues, Osteopathy frees

restrictions and brings into balance muscular, nervous and circulatory flow within the body. Osteopathy teaches that by freeing structural restrictions, the body will function as it should and can thereby heal itself. It is based on the scientific understanding of functional anatomy, neurophysiology and biomechanics.

Works Cited

"Ontario Association of Osteopathic Manual Practitioners (OAO)." *Ontario Association of Osteopathic Manual Practitioners OAO RSS*. N.p., n.d. Web. 04 Feb. 2015.

"Osteopathy." *Wikipedia*. Wikimedia Foundation, n.d. Web. 04 Feb. 2015.

"Osteopathy." *Wikipedia*. Wikimedia Foundation, n.d. Web. 04 Feb. 2015.

Sarno, John E. *Healing Back Pain: The Mind-body Connection*. New York: Wellness Central, 2010. Print.

"The Therapeutic Value of Visceral Manipulation." *The Barral Institute*. 05 Feb. 2015.