

George Smith explores this hugely popular manipulative therapy

Osteopathy

KEY POINTS

Osteopathy is a popular and 'respectable' alternative therapy originally developed by Still and based on the idea that physical manipulation directed at 'osteopathic lesions' in the spine initiates holistic self-healing processes. Treatment by contemporary osteopaths includes orthodox advice regarding posture and exercise but concentrates on manipulative techniques for musculoskeletal problems. However, the existence of 'osteopathic lesions' has not been demonstrated clinically nor radiologically and evidence of osteopathy's clinical efficacy is at best sparse and not compelling. From a Christian perspective, Still's involvement in psychic practices, particularly in his diagnostic methods, reinforce the conclusion that osteopathy is not a therapy to be recommended.

Surveys indicate that osteopathy is the most popular alternative therapy in UK with over 3,000 osteopaths providing six million patient consultations a year. Usually perceived as a method of treating musculo-skeletal problems (especially low back pain) by physical methods such as manipulation and massage, it was originally intended to be a complete system of health care.

Definitions

Various definitions of osteopathy give important insight into the aims and aspirations of AT Still, its originator, as well as its present practitioners and teachers:

- *A system, method or science of healing.* (Still, 1893)
- *Osteopathy is a 'whole body' system of health care.* (Sandler, 1989)
- *Osteopathy is a system of medical therapy that employs manipulation of the body, and the spine in particular; to remedy disease – even when the signs and symptoms seemingly have nothing to do with the spine.*¹ (Stanway, 1992)
- *Curative treatment aimed at correcting supposed deformities of the spine as the cause of many diseases.* (Oxford Dictionary, 1996)
- *A form of manual therapy involving massage, mobilisation and spinal manipulation.* (Ernst, 2001)

Origins

Osteopathy was founded by Andrew Taylor Still (1828-1917) of Virginia, USA. He studied at the College of Physicians and Surgeons in Kansas City, USA. Disturbed by the poor medical care of his day and the tragic death of his three children of meningitis, he determined to devise a new system of effective and safe medical care. Believing that bodily

functions depended on the structure of the skeleton, particularly the spine, he assumed that malalignment of bones led to deficiency in blood flow, and was the major cause of disease.

Still's diagnostic methods included particular skills of palpation, described by his contemporaries as 'intuitive', 'seeing under the skin' and even as 'psychic or clairvoyant'. They believed he possessed psychic powers, enabling him to foretell future events. Essential to his diagnosis was the recognition of an 'osteopathic lesion', thought to be the common source of disease. He believed that manipulative techniques, directed at these lesions, were the essential factor in treatment, initiating holistic self-healing processes.

After rejection of his theories by orthodox physicians, Still founded the American School of Osteopathy in Kirksville, Missouri in 1893. The British Association of Osteopaths was formed in 1911 and The British School of Osteopathy was founded in 1917 by Dr J F Littlejohn, a former student of Still. Originally osteopathy was not recognised in law or by the medical establishment. Doctors associating with osteopaths ran the risk of removal from the Medical Register.

Osteopathy is now regulated by the Osteopathy Act of 1993. The General Osteopathic Council (GOsC) was formed to regulate training and compile a register of osteopaths. Schools of osteopathy in the UK provide courses leading to a diploma (DO) or a BSc after four years full time or six years part time training. Doctors may fast track osteopathy training in 12 to 18 months.

Present practice

Diagnosis

Many osteopaths today would wish to distance themselves entirely from the suggestion that psychic

powers are involved in osteopathic diagnostic methods. Nevertheless, they do place great significance on the specialised osteopathic skills of diagnostic palpation beyond those normally recognised by orthodox doctors, termed 'palpation awareness' by Sandler. Xrays and laboratory tests would be advised when necessary.

Treatment

Treatment by contemporary osteopaths includes orthodox advice regarding posture and exercise but concentrates on manipulative techniques, including various leverage and thrust procedures, muscle energy techniques, stretching exercises and myofascial release. Some high velocity thrust techniques are accompanied by a crack or pop, said to be produced by millions of tiny carbon dioxide gas bubbles bursting inside certain joints. No evidence is offered for this.²

Conditions treated by Still and his successors included eye infections, a gangrenous leg, hip tuberculosis, heart failure, deafness, poliomyelitis, gallstones and stroke. Osteopaths now accept that there are other causes of disease unrelated to the spinal column and its associated vascular and nervous systems. Some, however, maintain that it has validity in treating indigestion, asthma and emphysema, hypertension, angina, migraine and sinusitis. Treatments last from a few sessions to months or even years.

Medical checklist

Does it have a rational, scientific basis?

Identification and resolution of the 'osteopathic lesion' was central to Still's methods but there was no consensus as to its exact nature. It was variously described as restriction in joint mobility, facet locking or spinal joint adhesions. Its existence has not been demonstrated clinically nor visualised radiologically. Identification of specific lesions has become less important and even abandoned by osteopaths today.

Some osteopaths believe that their techniques may influence the autonomic nervous system, situated in ganglia alongside the spine, which control our basic functions. This is the basis for the use of osteopathy for general medical illnesses, apparently unconnected with the spine. Cyriax, former orthopaedic physician at St Thomas's Hospital, was concerned about the osteopathic doctrine of spinal manipulation for general disease, and pointed to the vast mass of authenticated evidence for the orthodox approach to these illnesses, and lack of scientific evidence for osteopathic treatment.³

Does it work?

Some studies have suggested that osteopathy may help in acute and sub-acute low back pain.⁴ But a comprehensive data review did not demonstrate the effectiveness of manipulation (including osteopathy) for low back pain.⁵ A recent larger randomised controlled trial comparing US style osteopathy with standard treatments for low back pain found similar clinical outcomes.⁶ After investigating the use of

osteopathy in treating non musculo-skeletal conditions, Professor Ernst concluded, '...evidence is sparse and not compelling'.⁷ Although the recent UK BEAM report suggests that spinal manipulation may benefit low back pain, treatments by physiotherapists, osteopaths and chiropractors are included as one group, so the trial cannot specifically endorse individual therapies.⁸

Is it safe?

Stiffness, soreness, headache and tiredness may follow osteopathic treatment and occasional cases of stroke, vertebral artery damage and spinal trauma have been recorded. Osteopathy should be avoided in cases of osteoporosis, possible neoplasm, whiplash, bleeding disorders and anticoagulant therapy.

Christian checklist

Can it be recommended with integrity?

Osteopaths may well be caring, trained and dedicated, but the principles and effectiveness of osteopathy have not been validated.

What are its roots?

AT Still considered that osteopathy was truly holistic, referring frequently to inspiration from the Great Wisdom, the Divine Intelligence and the Grand Architect of the Universe; these terms are not characteristic of a Christian's description of a personal Father God. It appears likely that he was involved in spiritualism and the expression Grand Architect is a term more familiar to Freemasons.

Cranial osteopathy or cranio-sacral therapy

This most controversial aspect of contemporary osteopathic practice, devised by William Sutherland (a student of AT Still), emerged in the USA in the 1940s but is only practised by ten to fifteen percent of UK osteopaths. It is not supported by convincing clinical or scientific evidence and '...it cannot be recommended for any condition'.⁹

Conclusion

The popularity and relatively recent statutory regulation of osteopathy have made it appear 'respectable' rather than 'alternative'. As manipulation by orthodox physiotherapists is not widely available, there has been an uncritical and unjustifiable acceptance of osteopathy as an alternative – a therapy without validation of its principles, and unconvincing evidence for its effectiveness.

From a Christian perspective, Still's involvement in psychic practices, particularly in his diagnostic methods, reinforce my conclusion that osteopathy is not a therapy to be recommended.

A good tree bringeth not forth corrupt fruit, neither doth a corrupt tree bring forth good fruit. (Luke 7:43 KJV)

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