Promoting Osteopathic Principles and Practice

*Every Patient, Every Day…*

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October 2017
Disclosures

• Author of “Promoting Osteopathic Thought in Clinical Education, Every Patient, Every Day…”

• Recovering specialist
  – Pulmonary medicine, private practice

• Developing osteopath

• Chairman, ACGME Osteopathic Principles Committee
Make it Interactive!

• For open ended questions:
  Respond at PollEv.com/robertcain899
  or
  Text Robertcain899 to 22333 then enter your response
  (up to 300 characters)

• For multiple choice questions:
  Respond at PollEv.com/robertcain899
  or
  Text Robertcain899 to 22333 then enter A, B, C, D, or E
# Osteopathic Medicine

**Why, How, and What**

## Why

To improve our present system of surgery, obstetrics, and treatment of diseases generally.

## How

<table>
<thead>
<tr>
<th></th>
<th>Promotes structural health of the body</th>
<th>Assists innate mechanisms of the human body to function as intended</th>
<th>Recognizes the inter-relationship of mind, body, and spirit</th>
<th>Remains focused on the patient, not on their problem</th>
</tr>
</thead>
</table>

## What

<table>
<thead>
<tr>
<th></th>
<th>Incorporates manual manipulation of somatic structures</th>
<th>Removes impediments to health and promotes a healing environment</th>
<th>Emphasizes primary care “Thinks differently”</th>
<th>Incorporates professional touch and empathic listening</th>
</tr>
</thead>
</table>
Objectives

Upon the completion of this session, attendees will be able to:

1. Reflect upon osteopathic principles and practice as a foundation for holistic health care
2. Describe a thought process for helping patients to achieve their health potential
3. Acknowledge challenges limiting a thought process for helping patients to achieve their health potential
4. Better recognize opportunities to promote osteopathic principles and practice for every patient, every day
“Determinants of Health”

Structure-function relationships
Genetics
Immune system function
Nutritional state
Sleep quality/rest-fatigue balance
Functional state/level of activity and physical conditioning
Body habitus
Psychosocial health
Abuses/Behaviors
Developing a Health-oriented Approach to Patient Care

Health Potential → PATIENT

“Determinants of Health”

Initiators → Responses

Disease State (presentation)
Disease Limited Lens
Returning a patient to health and eliminating illness is focused upon treatment of the disease, the responses to initiators, and the initiators.

“Determinants of Health”

Developing a Health-oriented Approach to Patient Care

Health Potential

PATIENT

Initiators

Responses

Disease State (presentation)
Developing a Health-oriented Approach to Patient Care

Disease
Limited Lens
Returning a patient to health and eliminating illness is focused upon treatment of the disease, the responses to initiators, and the initiators

“Determinants of Health”

Health Potential

PATIENT

Initiators
Responses

Disease State (presentation)

“Disease Care”

2010 Proactive Health Management, LLC.
“Determinants of Health”

Health Potential

Disease State (presentation)

Initiators

Responses

Host Limited Lens
Maintaining a patient’s health or returning a patient to health and eliminating illness is focused upon the determinants of health

Developing a Health-oriented Approach to Patient Care
Host Limited Lens
Maintaining a patient’s health or returning a patient to health and eliminating illness is focused upon the determinants of health.

Developing a Health-oriented Approach to Patient Care

- Health Potential
- “Determinants of Health”
- PATIENT
- Initiators
- Responses
- Disease State (presentation)
- “Health Care”
Developing a Health-oriented Approach to Patient Care

Host + Disease Lens
Returning a patient to health and eliminating illness is focused upon treatment of both the host and the disease
Developing a Health-oriented Approach to Patient Care

“Holistic Health Care”
(osteopathic)

Based upon the work of Edward Stiles, DO

2010 Proactive Health Management, LLC.
### The Role of Structural Health

**Rational Application of OMT**

<table>
<thead>
<tr>
<th>HOST</th>
<th>DISEASE</th>
<th>disease</th>
</tr>
</thead>
<tbody>
<tr>
<td>ILLNESS</td>
<td>The addition of OMT better enables the patient to realize their full ‘health potential’</td>
<td>OMT is likely to be successful with a lesser role for medical/surgical care</td>
</tr>
<tr>
<td>host</td>
<td>Medical/surgical care is most likely to be successful with a limited role for OMT</td>
<td></td>
</tr>
</tbody>
</table>

Based upon the work of Edward Stiles, DO
Pikeville College-School of Osteopathic Medicine
Indications for OMT

• The presence of somatic dysfunction with the ability to impair normal human physiology that is amenable to OMT
  – Body systems with a significant musculoskeletal component are at risk for somatic dysfunction and therefore may benefit from OMT

• We should not use OMT simply because we can
• We likely should not apply generic techniques to a diagnosis

Based upon the work of Edward Stiles, DO
Pikeville College-School of Osteopathic Medicine
## A Classification of Somatic Dysfunction and Potential Roles for OMT

<table>
<thead>
<tr>
<th>Type of Somatic Dysfunction</th>
<th>Modality</th>
</tr>
</thead>
<tbody>
<tr>
<td>Primary Acquired</td>
<td></td>
</tr>
<tr>
<td>Acute low back injury</td>
<td>Acute low back injury</td>
</tr>
<tr>
<td>Adjunctive OMT</td>
<td>Preventive OMT</td>
</tr>
<tr>
<td>Secondary Acquired</td>
<td></td>
</tr>
<tr>
<td>Disease-associated (COPD)</td>
<td>Disease-associated (COPD)</td>
</tr>
<tr>
<td>Induced</td>
<td></td>
</tr>
<tr>
<td>Post-surgical</td>
<td></td>
</tr>
</tbody>
</table>

Based upon the work of Edward Stiles, DO
Pikeville College-School of Osteopathic Medicine
no more than 3 words, share your thoughts about the role of OMT for the treatment of COPD.
An Evidence Pyramid

- Personal Observation
- Case Study
- Case Series, Cohort Study
- Randomized-controlled Trial
- Meta-analysis
- Systematic Review

N=1
N=many
N=more

Decreasing Bias
Increasing Quality
(Generalizability)
Scholarship

• Ernest L. Boyer, Scholarship Reconsidered, Priorities of the Professorate, The Carnegie Foundation for the Advancement of Teaching, 1990
  – Discovery
  – Integration
  – Application
  – Teaching
THE SCHOLARSHIP OF INTEGRATION

“In proposing the scholarship of integration, we underscore the need for scholars who give meaning to isolated facts, putting them in perspective. By integration, we mean making connections across the disciplines, placing specialties in a larger context, illuminating data in a revealing way, often education non-specialists too.”

“The connectedness of things is what the educator contemplates to the limit of his capacity. No human capacity is great enough to permit a vision of the world as simple, but if the educator does not aim at the vision, no one else will…”
References


Movement in 6-minute walk distance associated with treatment with tiotropium bromide is approximately...
Movement in 6-minute walk distance associated with pulmonary rehabilitation plus OMT is approximately...
Creating a Personalized Best Practice:
The Components of Evidence-based Practice

Best practice as represented by a level stool with four equal legs

Best Evidence
Clinical Expertise
Clinical Circumstance
Patient Interest


Brunner-La Rocca et al., Challenges in personalized management of chronic diseases—heart failure as prominent example to advance the care process, The EPMA Journal (2016) 7:2
Promoting Osteopathic Principles and Practice
3 Steps for Success

1. Approach patients from the perspective of delivering holistic health care, not disease care
   – Ask about and understand the patient’s determinants of health

2. Set expectations
   – Think about the role of structural health
   – Look for and treat somatic dysfunction

3. Demonstrate inquiry and improvement
   – Use scholarly questions as a development tool
IATP

You can’t find somatic dysfunction if you don’t look for it...
Osteopathic Medicine

Where we are...

Where we want to be...

Bridging the Gap

Healthcare

System