The Legacy of Viola M. Frymann, DO, FAAO, FCA (1921-2016)
A Story of Passion for Osteopathy

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Hollis H. King, DO, PhD, FAAO, FCA
Dr. Frymann is well known to members of the AAO – Many of us have our “Viola Stories”

My objectives are to describe the highlights of her career and seldom mentioned aspects of her life:

1. As a Clinician
2. As an Educator and Advocate of Osteopathy
3. As a Writer
4. As a Researcher
In the breakout sessions I will present the osteopathic procedures not so well known for, and she is known for, and
Education

University of London M.B., B.S. (Medical degree)  
The Royal Colleges M.R.C.S., L.R.C.P. 1944

Royal London Homeopathic Hospital 1945

College of Osteopathic Physicians and Surgeons of Los Angeles 1948

Prior to medical training she wanted to be a ballet dancer, but tore her Achilles tendon and could no longer dance.

Video 1  2:19 to 5:26
She came the USA right after WW II to go to the Osteopathic Medical school in Los Angeles and to be in the Rosicrucian community in Oceanside, California. There she met and married her husband.

Not long ago I visited there, but could not find any references to her or her husband Mr. Theodore who was an astrologer and numerologist. Her parent wer 

I mention this because it explains some of her spiritual beliefs that she often presented during her earlier Basic Cranial Courses. Metaphysical content.
My personal connection with Dr. Frymann started in 1976 when I consulted her about my interest in pursuing osteopathic medical training. After my medical training I moved back to San Diego and she asked me to join her at the Osteopathic Center for Children which was at that time a clinic of the College of Osteopathic Medicine of the Pacific. I was on faculty at COMP and worked at the OCC from 1985 to 1989.

She was my FAAO sponsor in 1999.
Her Work as a Clinician

Early in her career she began to emphasize the treatment of children in her practice, circa 1968
Her Work as a Clinician

In the 1982 established the Osteopathic Center for Children in La Jolla, California.
Her Work as a Clinician

In 1996 she moved to a larger facility and developed a larger staff. The AAO was a major contributor to the purchase of the facility where Dr. Frymann last practiced.
Her Work as a Clinican

Music used therapeutically

Mary Helen Powers – 25 years her assistant

People from all over the world brought their children to see Dr. Frymann
Her Work a Clinician

She was especially fond of working with special needs children and understood that improvements in their functioning, “optimizing their potential” was a reasonable goal in the application of osteopathy, and the families were generally very appreciative.
Her Work as a Clinician

She emphasized nutrition and presented courses on healthy food preparation.
Her Work as a Clinician

She brought as OCC staff and fostered the professional development of a number of well known osteopathic physicians.
Her Work a Clinician

Today the Osteopathic Center for Children is located in a fine facility owned by Osteopathy’s Promise to Children, the not for profit entity that raised funds to support Dr. Fryman’s work.
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Her Work as an Educator and Advocate of Osteopathy

After the 1961 ballot referendum in California which almost, but not quite, wiped out osteopathic medicine in California, Dr. Frymann worked tirelessly to restore the Osteopathic Medical Board of California, which was accomplished in 1974.
Her Work as an Educator and Advocate of Osteopathy

She started teaching in a major way in 1964 both in US and in France.
Her Work as an Educator and Advocate of Osteopathy

Dr. Frymann has taught all around the world.
Her Work as an Educator and Advocate of Osteopathy and touched many lives

Italy

UK - Maidstone

France
Her Work as an Educator and Advocate of Osteopathy

She was instrumental in restoring osteopathic medical education in California with the opening of the College of Osteopathic Medicine of the Pacific (COMP) in 1978 and she served as the founding Chair of the Department of Osteopathic Manipulative Medicine.
Her Work as an Educator and Advocate of Osteopathy

At COMP she established the first 40 hour Basic Cranial Course in an Osteopathic Medical School – A big SBS

In 1978 she started teaching dentists which continues with OCA
Her Work as an Educator and Advocate of Osteopathy

When she retired from COMP, she continued to conduct a 40 Basic Cranial Course at OCC, which continues to this day under the direction of Mitch Hiserote, DO and Ray Hruby, DO, FAAO
Her Work as an Educator and Advocate of Osteopathy

Her service to the osteopathic medical profession includes:

President of OPSC – twice
President of the Osteopathic Cranial Academy
American Academy of Osteopathy – Board of Governors

Honors include:
AAO - Thomas L. Northup Memorial Lecturer
AAO - Scott Memorial Lecturer
AAO – Andrew Taylor Still Medallion of Honor

OCA - Sutherland Memorial Lecturer - twice
Her Work a Writer

While her clinical and research work emphasized pediatric osteopathy, her writings were mostly philosophical and concerned with osteopathy. In fact, my opinion is the Dr. Frymann was about Osteopathy first and foremost and Pediatric Osteopathy a very close second.

While a senior at the College of Osteopathic Physicians and Surgeons in Los Angeles in 1949 she won an essay contest for a paper titled “The Role of the Osteopathic Lesion in the Production of Cardiac Pathology.”

Her second publication was a second place award from the Academy of Applied Osteopathy in 1950 titled “The Role of the Osteopathic Lesion in Functional and Organic Renal Pathology.”
Her Work a Writer

Other osteopathic writings include titles like,

“The Osteopathic Approach to the Allergic Patient” (1970)

“The Philosophy of Osteopathy” (1976)

“Cerebral Dysfunction: Prevention and Treatment in the Light of the Osteopathic Concept” (1987)
Her Work a Writer

She held monthly parents lectures for the parents of her patients, and some these were recorded and published in her “Collected Papers”
Her Work a Writer

She studied healing and was an unrepentant Christian in advocating for the power of prayer.

Typical of this genre were:

“What is Man that Thou Art Mindful of Him” (1970)


Her Sutherland Memorial Lecture in 1995 “Osteopathy, the Bringer of Peace, Harmony and Healing” raised some controversy when she maintained that we who practice osteopathy should seek the guidance and inspiration of the Holy Spirit. Some of our non-Christian colleagues were not happy about that.
Dr. Frymann indeed believed in the power of prayer and spiritual healing. For a time she served on the panel of physicians who examined patients “healed” by Katherine Kuhlman on her TV show based in Los Angeles.
Her Work a Writer

When she was in town she lead a prayer group of parents and friends held Saturday mornings 10-12. I remember being treated by Dr. Frymann for pneumonia (by the way I learned the most from Dr. Frymann by being treated by her and reading her chart notes), given a homeopathic remedy and sent home on a Friday. I awoke with a very hot feeling in my chest the next morning and realized they went praying for me, fever broke and I was well.
Her Work a Writer

I am working on Volume II of her Collected Papers. At OPC after Dr. Frymann passed away we looked through all the closets and files and found transcripts of lectures she had given and had audiotaped and transcribed. Titles include:

“Biodynamic Force and Creative Palpation”
“Death: What Lies Beyond?”
“The Consequences of Being Born”
“What Is Man?”
“Where Lies the Cause?”

As well as…
“Structure and Function”
“Fascial Release – Articular”
“The Potency”
“When"
Figure 1 Representative infant photographs: normal (A,B), mild facial asymmetry (C), mild vertex asymmetry (D), moderate facial asymmetry (E) and moderate vertex asymmetry (F).
Her Work as a Researcher

She said she never expected to do any research, but no one else was doing it, so she plunged in. After her first courses with William Garner Sutherland, DO on the cranial concept, she wanted to verify what she had learned, especially on children, like her son who died shortly after birth of intractable vomiting and dehydration.

Her first two peer-reviewed research publications were on topics related to her personal experiences and the cranial concept in 1966 and 1971.

**Overall 88% of the 1250 newborns** had some identifiable mal-alignment in the form of cranial bone strain patterns.

Carried out at UCSD Dysmorphology Clinic

Seventy-three percent of newborns had at least one asymmetry (10% had more than one).

“The recordings show that there is a cranial motility slower than and distinguishable from motility of the vascular pulse and thoracic respiration, and that such motion can be recorded instrumentally.”

Frontal view showing head support

N of 1 study

view from above
Cranial Diameter Pulsations Measured by Non-Invasive Ultrasound Decrease with Tilt

Toshiaki Ueno, Richard E. Ballard, Brandon R. Macias, William T. Yost, and Alan R. Hargens


Introduction: Intracranial pressure (ICP) may play a significant role in physiological responses to microgravity by contributing to the nausea associated with microgravity exposure. However, effects of altered gravity on ICP in astronauts have not been investigated, primarily due to the invasiveness of currently available techniques. We have developed an ultrasonic device that monitors changes in cranial diameter pulsation non-invasively so that we can evaluate ICP dynamics in astronauts during spaceflight. This study was designed to demonstrate the feasibility of our ultrasound technique under the physiological condition in which ICP dynamics are changed due to altered gravitational force.

Methods: Six healthy volunteers were placed at 60° head-up, 30° head-up, supine, and 15° head-down positions for 3 min at each angle. We measured arterial blood pressure (ABP) with a finger pressure cuff, and cranial diameter pulsation with a pulsed phase lock loop device (PPLL).

Results: Analysis of covariance demonstrated that amplitudes of cranial diameter pulsations were significantly altered with the angle of tilt (p < 0.001). The 95% confidence interval for linear regression coefficients of the cranial diameter pulsation amplitudes with tilt angle was 0.862 to 0.968. However, ABP amplitudes did not show this relationship.

Discussion: Our noninvasive ultrasonic technique reveals that the amplitude of cranial diameter pulsation decreases as a function of tilt angle, suggesting that ICP pulsation follows the same relationship. It is demonstrated that the PPLL device has a sufficient sensitivity to detect changes non-invasively in ICP pulsation caused by altered gravity.

Keywords: ultrasound, pulsed phase lock loop, postural change, intracranial pressure.

that we can evaluate ICP dynamics in astronauts during spaceflight. The device was originally developed by Yost and Cantrell at NASA Langley Research Center, and has been refined in collaboration with the Space Physiology Laboratory at NASA Ames Research Center.

The purpose of the present study was to demonstrate the feasibility of our ultrasound technique under the physiological condition in which ICP dynamics are changed due to altered gravitational force. For this purpose, whole body tilting was performed to observe effects of an altered gravity vector on ICP dynamics in normal volunteers. Whole body tilting generates a hydrostatic pressure gradient by altering gravitational force along the body axis. It is reported that postural changes alter the mean value and amplitude of ICP pulsation (2,4,6).

METHODS

Procedure

NASA Ames Human Research Institutional Review Board approved this study. After giving informed written consent, six healthy volunteers including two men and four women, age (mean ± SD) of 24 ± 4 yr, height...
Left to Right: Viola M. Frymann DO, Yuri Moskalenko PhD, Kenneth Nelson DO, Tom Glonek PhD, Toshiaki Ueno MD PhD, Frank Willard PhD.
Ленч с традиционным русским борщом в Лаборатории профессора Юрия Москаленко, Институт Сеченова Российской Академии Наук во время двухнедельной совместной работы с ученными США др. Виола Фрайман (Сан Диего) и проф. Альберт Келсо (Чикаго).
Осень 2003 года.

- **Group 1** – 74 average or above-average students without visual or learning problems who were treated.
- **Group 2** – 32 average or above average students who had myopia, hyperopia, esophoria, and exophoria but no learning problems.
- **Group 3** – 103 children who were having problems at school because they could not learn in the customary fashion by established standards.

<table>
<thead>
<tr>
<th>Table 1. COMPLICATIONS IN BIRTH HISTORY</th>
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<tr>
<td><strong>GROUP:</strong></td>
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<tr>
<td>Total number of children</td>
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<tr>
<td>Prolonged labor (12 hours or more)</td>
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<tr>
<td>False or ineffectual labor followed by cesarean section</td>
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<tr>
<td>Version or persistent posterior occipital presentation; manual dilation of cervix</td>
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<tr>
<td>Deformity of head</td>
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<tr>
<td>Neonatal difficulty other than jaundice</td>
</tr>
<tr>
<td>Prematurity (2/52 or more)</td>
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<tr>
<td>Postmaturity (2/52 or more)</td>
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<tr>
<td>Neonatal jaundice</td>
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<tr>
<td>Illness or ingestion of drugs by mother during pregnancy</td>
</tr>
<tr>
<td>Number of children</td>
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</tbody>
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Conclusions  Frymann 1976
With Learning Difficulties (Group III, N=103)
- 72.8% suffered considerable trauma before or during birth
- Head deformity remembered by parents
- Labor > 24hrs
- Greater Intensity of learning problems
- Accidents after age 3 were triple that in the other groups
- Severity and frequency was also greater
- No significant differences in particular strain pattern
Reproducibility Built Around IsoTOUCH® Pressure Sensitive Monitoring System
Establishing Baseline
I just can’t believe I’m touching “the” Dr. Frymann!

How does our touch compare?

Is my touch anywhere near close?