“THE OSTEOPATHIC PROFESSION AND ITS ROOTS IN PUBLIC HEALTH

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KAREN J. NICHOLS, DO, MA, MACOI, FACP, CS-F

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• Private Practice – Internal Medicine and Geriatrics
  • 1985-2002
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Author, “Physician Leadership: The 11 Skills Every Doctor Needs to be an Effective Leader”

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@KARENJNICHOLS
KARENJ.NICHOLS_DO
KJN@KJNICHOLS.COM
AGENDA

• How the osteopathic profession originated
  • Roots in public health
  • Minorities in medicine
• Snapshot of the current osteopathic profession
• Educational structure
• The osteopathic approach to patients
HISTORY OF OSTEOPATHIC MEDICINE...
WITH ROOTS IN PUBLIC HEALTH
“Millions of people before Newton and Galileo had seen apples fall and pendulums swing but practically none of them taught the world what those simple and familiar phenomena meant.”
• “...did not invent a system of healing. Like the force of gravity, osteopathy was always present, familiar to everyone, waiting for a perceptive mind to unlock its secrets.”

MEDICAL APPROACH – LATE 19TH CENTURY

• Puke, purge, bleed, blister
• Arsenic, mercury to “kill” the disease
• Opium!
ALTERNATIVE MEDICAL CARE OPTIONS

• Dis-satisfaction with conventional medicine
• Homeopathy
• Eclecticism
• Thomsonianism
• Hot springs

• Artesian baths
• Mesmerism
• Herbs
• Cereals
• Dr. Still rejected:
  • “Medicines”
  • Alternative approaches
DR. STILL’S APPROACH

• Dr. Still promoted:
  • Natural emphasis
    • Exercise, fresh air, cleanliness, temperance (food-drink)
    • Alcoholism = illness
    • Recovery based on individual’s level of health
    • Fore-runner of immunologic response
    • “Body has ability to heal itself”
  • Virchow – Cellular Pathology
  • Public HEALTH, not harmful chemicals
“HEALTH CARE DOESN’T CREATE HEALTH”

- Genetics
  - 50%
- Social Determinants of Health
  - 40%
- Health Care
  - 10%

Berwick, D. “Getting Serious About Producing Health: The Ten Teams Challenge,” JAMA, 2022, 327(9) 1865-1866.
ANDREW TAYLOR STILL, MD

• Astute observer
• Physician
  • Preceptor-taught
• Civil War
  • Kansas Militia - Major
• Baker University
• Outcast

Museum of Osteopathic Medicine, Kirksville, MO [2003.13.01]
OSTEOPATHIC FOCUS — STRUCTURE/FUNCTION
• “To find health should be the object of the doctor. Anyone can find disease.”

• Andrew Taylor Still, MD, DO
CONTEMPORARIES

• William Osler, MD
• Charles Mayo, MD
• William Mayo, MD
ABRAHAM FLEXNER INCLUDED DO SCHOOLS

- Kirksville
- Des Moines
- Philadelphia
- Chicago
- Kansas City

Photo from Chicago College of Osteopathic Medicine - Midwestern University
FIRST AFRICAN-AMERICAN MAN TO EARN AN MD DEGREE IN THE US – **DAVID JONES PECK, MD** - RUSH UNIVERSITY-COLLEGE OF MEDICINE - 1847
FIRST WOMAN IN AMERICA TO EARN AN MD DEGREE – **ELIZABETH BLACKWELL, MD** – 1849 – GENEVA (NY) MEDICAL COLLEGE
FIRST AFRICAN-AMERICAN WOMAN TO EARN AN MD DEGREE IN THE US – REBECCA LEE CRUMPLER, MD – 1864 – BOSTON UNIVERSITY SCHOOL OF MEDICINE
FIRST INDIGENOUS AMERICAN WOMAN TO EARN AN MD DEGREE IN THE US – 
SUSAN LA FLESCH PICOTTE, MD – 1889 – 
MEDICAL COLLEGE OF PENNSYLVANIA
KIRKSVILLE, MISSOURI

• American School of Osteopathy
  • Established 1892
• A. T. Still University –
  • Kirksville College of Osteopathic Medicine
• Johns Hopkins – College of Medicine
  • Established 1893
ENCOURAGED WOMEN TO ENTER MEDICINE

“...I opened wide the doors of my first school to women.”
FIRST AFRICAN-AMERICAN WOMAN TO EARN A DO DEGREE – **META L. CHRISTY, DO** – 1921

*PHILADELPHIA COLLEGE OF OSTEOPATHIC MEDICINE*

First African-American man to earn a DO Degree – Weymouth Leopold Swainson, DO – practiced in Detroit in mid-century – details unclear
FOUGHT AGAINST SLAVERY

Dr. Still served in the Kansas legislature
Dr. Still helped make Kansas a FREE State
EDUCATING BLACK STUDENTS

• Booker T. Washington Osteopathic Institute (Chicago) – 1922
• District of Columbia College of Osteopathy – 1924
SEGREGATED HOSPITALS

• Black Doctors
• Female Doctors
• Osteopathic Doctors
BARBARA ROSS-LEE, DO, FACOFP

- Notable female leader in academe
- Former Dean of Ohio University Heritage College of Osteopathic Medicine (1993 – 2001)
- First African-American female dean of a US medical school
SNAPSHOT OF THE OSTEOPATHIC PROFESSION
141,759 DO’s* + 36,500 DO students = Total 178,259 DO’s + students in US
**(10% of all practicing physicians in the US)

* Data From The Osteopathic Medical Profession (OMP) Report 2021-2022, Provided by the American Osteopathic Association

ACTIVELY PRACTICING DO’S, BY AGE

74% of actively practicing female DOs are under age 45

Data From The Osteopathic Medical Profession (OMP) Report 2021-2022, Provided by the American Osteopathic Association
MINORITY CHALLENGES

• 1892 – First DO school
• 1992 – DO’s = 5% of all US physicians
• 2020 – DO’s = 10% of all US physicians (FSMB official report)
• 2022 – DO’s = 12.7% of all US physicians (informal report)
• “Tipping Point: How Little Things Can Make a Big Difference”
• “Taking students to the legislature”
OPPOSITION TO THE DO DEGREE

• The DO degree was strongly opposed by the MD establishment
• Attempts to squash the development of this profession led to “unintended consequences"
UNINTENDED CONSEQUENCES

• 1 – A. T. Still’s ideas rejected
  • Started own school
UNINTENDED CONSEQUENCES

• 2 – DOs not allowed to enlist in WWII, as physicians
  • Grew practices in US
• 3 – California DO/MD organizations merge, 1962
  • US Civil Service Commission
OVERVIEW OF THE OSTEOPATHIC EDUCATIONAL STRUCTURE
OSTEOPATHIC MEDICINE EDUCATIONAL STRUCTURE

- 4 years of undergraduate education
- 4 years at COCA-accredited, DO-granting medical school
- Emphasis on structure/function/whole patient, including 200 hours of osteopathic manipulative medicine (OMM) instruction and clinical experiences
- Eligible to train in every ACGME-accredited sub/specialty
- Licensed physician for full practice of medicine/surgery - 50 states
## SAMPLE REQUIREMENTS TO APPLY TO DO SCHOOLS

<table>
<thead>
<tr>
<th>Course</th>
<th>Semester/Quarter Hours</th>
</tr>
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<tbody>
<tr>
<td>Biology with Lab</td>
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<tr>
<td>General Chemistry with Lab</td>
<td>8/12</td>
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<tr>
<td>Organic Chemistry with Lab</td>
<td>8/12</td>
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<tr>
<td>Physics with Lab</td>
<td>8/12</td>
</tr>
<tr>
<td>English Composition</td>
<td>6/9</td>
</tr>
</tbody>
</table>
SAMPLE CURRICULUM – YEAR 1

- Gross Anatomy and Embryology
- Histology
- Biochemistry
- Physiology
- **Principles of OMM** (100 hours of instruction)
- Physical Exam Skills
- Patient Symptom Presentations
- Neuroscience
- Interprofessional Education
- Behavioral Health Assessment
• Clinical Symptom Integration
• Simulated Patient Care
• Microbiology
• Immunology
• Pathology
• Pharmacology
• **Application of OMM** (100 hours of instruction)
• Mental Illness and Treatment
SAMPLE ROTATIONS – YEARS 3 & 4*

- Family Medicine
- Internal Medicine
- Obstetrics and Gynecology
- Pediatrics
- Psychiatry
- Surgery
- Emergency Medicine
- **Osteopathic Manipulative Medicine**
- Clinical Skills Assessment

*Application of OMM included and assessed in all rotations*
60 CAMPUSES – 39 COLLEGES OF OSTEOPATHIC MEDICINE
Phillips, Bazemore, Westfall, (2021) “Increasing Transparency for Medical School Primary Care Rankings – Moving from a Beauty Contest to a Talent Show,” *JAMA Health Forum, 2*(11), e213419
USNWR MEDICAL SCHOOLS WITH % OF GRADUATES PRACTICING PATIENT CARE IN RURAL AREAS

www.usnews.com, Medical Schools with Graduates Practicing Patient Care in Rural Areas, Ranked in 2022, part of Best Medical Schools (April, 2022)
THE OSTEOPATHIC APPROACH
THE QUESTION FROM AN MD

“I focus on the whole person, and I care about my patients.”

What is the difference?
The difference is the osteopathic perspective based on the osteopathic tenets.
1. The body is a unit; the person is a unit of body, mind, and spirit.
2. The body is capable of self-regulation, self-healing, and health maintenance.
3. Structure and function are reciprocally interrelated.
4. Rational treatment is based upon understanding the above.

1. The body is a unit; the person is a unit of body, mind, and spirit.
   
   • All systems of the body are affected by a disorder of any one system. Not a reductionist approach.
   
   • A disease is not a thing. It is a process...distorting normal anatomic and physiologic features.

2. **The body is capable of self-regulation, self-healing, and health maintenance.**

- Immunizations trigger the body’s own immune response.
- Scoliosis is the body’s attempt to maintain balance and center of gravity.
- The body generates prostaglandins, endorphins, enkephalins and long-acting ligands.
- The body maintains blood pH, adjusts HR - maintain blood pressure.
3. **Structure and function are reciprocally interrelated.**

- Myocardial Infarction
  - Left arm pain
- “Whiplash” – cervical spine
  - Headaches, vertigo, nausea
4. **Rational treatment is based upon understanding the first three tenets.**

   • The patient is best served when a variety of diagnostic and therapeutic modalities are taken into consideration to be used as appropriate.
   
   • Not reductionist.

Remember: Organs are part of connected and integrated systems and do not function in isolation, each in their own separate "baggy."
RECOGNIZE THE HEALTH POTENTIAL WITHIN US

Utilize FIVE domains of science:

• Biomedical Science
• Clinical Science
• Biomechanical Science
• Health Systems Science
• Complexity Science
RECOGNIZE THE HEALTH POTENTIAL WITHIN US

• There are no DO “facts”
• There are only medical facts seen from the osteopathic perspective
• Focus on in-depth relationship of structure/function
Recognize the health potential within us

Diagnosis

- Utilize all standard diagnostic approaches
  - Understand relationships
  - Recognize patterns
  - May also use hands to clarify structure
RECOGNIZE THE HEALTH POTENTIAL WITHIN US

Treatment

• Use of all standard treatment approaches
RECOGNIZE THE HEALTH POTENTIAL WITHIN US

Treatment

• Use of all standard treatment approaches

• Adding Osteopathic Manipulative Treatment Techniques – when and if applicable

TYING IT TOGETHER!

Understanding structure and function...
...promotes full appreciation of the patient...
...and caring for the WHOLE person!
“...from the start, the culture of caring competed with a quest to objectify medicine in scientific terms, and as scientific discovery leapt forward, caring was progressively eclipsed.”

Authors: Richard A. Cooper, MD (Penn) & Alfred I. Tauber, MD (Boston U)
GROWING FOCUS ON EMPATHY AND COMMUNICATION

• Mayo Clinic survey*
  o 7 traits of the ideal physician
  o “personal interest in me as a person”
• Cleveland Clinic video**
  o Adds the back story of people seen in a hospital/clinic


**“Empathy: The Human Connection to Patient Care” - YouTube - Cleveland Clinic (Posted February 27, 2013)
PATIENT-CENTERED CARE

- Emphasis on patient-centered whole person/whole body integrated assessment, care and caring is embedded in all osteopathic medicine education/training/practice.
- Every graduate
- Every specialty
THANK YOU!

KAREN J. NICHOLS, DO, MA, MACOI, FACP, CS-F

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