

the OSTEOPATH

The magazine for Osteopaths

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under review**

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**New AXA PPP
requirements**



Consultation underway

The General Osteopathic Council

Osteopathy House, 176 Tower Bridge Road, London SE1 3LU

020 7357 6655

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Contact details: people

222 Nicole Tripney Media & Events Officer (nicolet@osteopathy.org.uk)	233 Gillian O'Callaghan Head of MIS [Registration] (gilliano@osteopathy.org.uk)	246 Pam D'Arcy Assistant to Chief Executive & Registrar (pamd@osteopathy.org.uk)
223 Vince Cullen Head of Development (vincec@osteopathy.org.uk)	235 Chantelle Meek Development Assistant (chantellem@osteopathy.org.uk)	247 Brigid Tucker Head of Communications (bridget@osteopathy.org.uk)
224 Dana Davies Professional Conduct Officer (danad@osteopathy.org.uk)	236 Kellie Green Assistant Registrar [Regulation] (kellieg@osteopathy.org.uk)	248 David Simpson Head of Legal Affairs (davids@osteopathy.org.uk)
226 Susan McCue Communication Officer (susanm@osteopathy.org.uk)	238 Joy Winyard Development Officer (joyw@osteopathy.org.uk)	249 Laura Scrutton Regulation Assistant (lauras@osteopathy.org.uk)
227 Madeline Hogan Finance & Registration Officer (madelineh@osteopathy.org.uk)	240 Marcus Dye Assistant Registrar [Development] (marcusd@osteopathy.org.uk)	251 Abdul Saadeddin Facilities Officer (abduls@osteopathy.org.uk)
228 Erika Doyle Assistant Registrar [Communications] (erikad@osteopathy.org.uk)	242 Sonia van Heerden Information Officer (soniavh@osteopathy.org.uk)	01580 720213 Jane Quinnell Clerk to Council (janeq@osteopathy.org.uk)
231 Matthew Redford Assistant Registrar [Finance] (matthewr@osteopathy.org.uk)	245 Sarah Eldred Assistant Registrar [Public Affairs] (sarahe@osteopathy.org.uk)	

FREEPHONE HELPLINE FOR OSTEOPATHS 0800 917 8031 GOsC fax: 0207 357 0011

website: www.osteopathy.org.uk

Registrar's report

I remember, when I was first appointed to this job, wondering why the then Chairman was so insistent upon the need to understand rule writing and the legislative process. After all, the Osteopaths Act was by then already in force. It did not take long to realise! Ahead lay tortuous hours spent with the Department of Health (DoH) lawyers drafting the necessarily complex Rules that derive from the Act itself. In formulating the Rules, every future challenge had to be anticipated and the devil was certainly in the detail. What is a 'relative'? A 'graduate'? Try defining just these two apparently straightforward nouns. A character reference cannot be signed by a relative – so when does someone cease to be related – a distant second cousin? If the interpretation of nouns is complex, try creating a legally sound entire process!

That was then. But now, as you know, the time has come around to look again at the Osteopaths Act and the amendments that are needed to reflect all that has happened in the regulatory environment over the past decade. Amendments to legislation, or the introduction of new legislation, usually come about through a combination of public demand and opinion, from those charged with working within it, and from Government departments.

So what have we to deal with? The Osteopaths Act 1993 is known as primary legislation – the ultimate law that also gives power for other things to happen. If you then look at the Act you will see that it says in many places ... "the Council shall (or may) make Rules". These Rules contain the policy and procedures governing the activity enabled by the Act. They are referred to as Statutory Instruments (SIs), secondary or subordinate legislation but also carrying the weight of law.

From operating within these Rules, we know that the Rules impact on osteopaths easily as much as the primary legislation. For this reason, the GOsC has decided to consult the profession not just on the proposed amendments to the Osteopaths Act, but to inform and consult you on the likely changes this will mean to the Rules that impact more closely on practice life.

Although extending the 'modernisation' of the Act into the detail of the Rules that underpin it has doubled the task in hand, Council believes the time is right and the benefits to the maturing profession will justify the effort.

And ahead lies a long process. First the policy has to be developed and decided, and then its legality checked across all other related legislation – does, for example, the proposed policy breach Human Rights or the Data



Protection Act? The policy is then the basis for developing the processes and procedures that give order to the profession, and all this is to be drafted into new Rules. Once these are agreed by Council, they must then be submitted to the DoH officers and lawyers – where the challenges begin. It may be deemed that some of our proposals are not allowable, or further clarification may be requested. There may be a requirement for some GOsC policies to be more in line with other health regulators. All in all, it can, and usually does, take many, many months before ministerial approval / laying the Rules before Parliament is achieved and ultimate change effected. As most of this year will be given over to consultation within the profession and we, therefore, shall not be in a position to submit proposals to the DoH before the Spring of 2006, it is likely to be 2007 before any changes become law.

It is important too to be aware that our own aspirations for the profession are pitched against a backdrop of wider change affecting all health professionals – questions around professional responsibility, the lessons arising from the Shipman Inquiry and Government's own agenda for the delivery of healthcare to the nation. These factors may constrict the wide accommodation of views that characterised the CPD consultation and development. We should expect that these external influences could cause our Rules to evolve beyond our original proposals. However, by adopting a longer timetable for making these changes to our legislation, we are better placed to take account of and, if necessary, adapt to the current climate of change.

Your role in this process of development is key – this is a very important era for the profession. **Please take time to read the report on page 6 and understand the background to the Legislative Review process.** Next month in *The Osteopath*, GOsC Head of Legal Affairs, David Simpson, will give you an overview of the changes to the legislation Council is working towards. This will be followed in early May by a detailed consultation paper, which will be mailed directly to all osteopaths. Starting in late May and continuing through the Summer and the Autumn this year, we will be hosting Regional Conferences around the United Kingdom and Ireland (see details on page 13) to afford all osteopaths the opportunity to contribute to the legislative development. I hope you will make every effort to participate.

Madeleine Craggs
Chief Executive & Registrar

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Editor:
 Brigid Tucker
 brigidt@osteopathy.org.uk

Editorial Advisors:
 Fionnuala Cook OBE
 Vince Cullen
 Catherine Hamilton-Plant
 Anne Jones
 Jane Langer

Send Editorial to:
 The General Osteopathic Council
 Osteopathy House
 176 Tower Bridge Road
 London SE1 3LU
 Telephone: 020 7357 6655
 Facsimile: 020 7357 0011
 Website: www.osteopathy.org.uk

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Legislative Review

Madeleine Craggs, Chief Executive and Registrar

The Registrar's Report this month focuses exclusively on the all-important **Review of the Osteopaths Act 1993**, which is currently underway. Reference has been made to the Review of the Act in several editions of *The Osteopath* over the past year or so as work has progressed and also to the shifts in Government thinking on the delivery of regulation and the development of professions, to the impact of the Shipman Inquiry, and to the emerging role of the over-arching Council for Healthcare Regulatory Excellence (CHRE) – all factors that will also play a large part in shaping the Osteopaths Act and the way in which the osteopathic profession functions in the future.

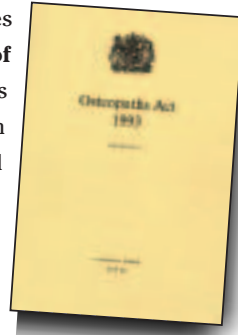
From May this year, through to November, the GOsC will be consulting with the profession – largely through the Regional Conferences – on proposals to revise the legislation that underpins this profession, to bring this framework up to date and to strengthen it for the future. In the next issue of *The Osteopath*, we will look in detail at what these revisions are likely to entail, and in May, a consultation document will be mailed directly to all osteopaths on the UK Register.

I thought, therefore, that it might be helpful this month to set out the rationale for undertaking revisions to the Act and to review the process that has brought us to this important juncture.

After almost ten years in being, some of the legislation in the Osteopaths Act 1993 was, as a consequence of new legislation (e.g. Human Rights, Disability Discrimination), in need of revision. This was in common with other health professions, some of whose regulatory bodies were grappling with legislation several decades old.

When the osteopathic profession achieved statutory recognition in the early 1990s and the General Osteopathic Council (GOsC) came into being, there had not been a new health regulatory body established for over 40 years. There was, therefore, no easy precedent to assist with drafting the Bill, nor the Rules, the secondary legislation that derives from the Act. A decade later, the other healthcare regulators were well advanced in amending their legislation to reflect more modern practice and the Osteopaths and Chiropractors Acts were now the ones in need of review.

In September 2002, the GOsC and the General Chiropractic Council (GCC) agreed to a joint review of our similar Acts to ensure they too reflected new legislation



and best practice. The Department of Health (DoH) directed the GOsC and the GCC to bring our legislation closer in line with other health professions and not to limit changes to only those sections of the Act of our choosing. We had, in fact, already recognised this and taken into account changes to the Osteopaths Act brought about by the NHS Reform and Healthcare Professions Act 2002. These related mainly to the options of appeals against the decision of the Registrar and of the Fitness to Practise Committees.

Next, Council approved a tender document on 12 December 2002 for the appointment of the legal reviewer of the Osteopaths Act 1993, the Chiropractors Act 1994 and the respective subordinate Rules (Statutory Instruments (SIs)). Field Fisher Waterhouse (FFW) secured the appointment. The objectives of the Review were:

- To identify all the amendments to the primary legislation that would be necessary to bring it up to date.
- To identify all the consequent necessary changes to relevant Statutory Instruments.
- To produce a clear rationale for all the proposed amendments and changes, for submission to the DoH.

At this early stage, some issues around specific Sections of the Act included:

- Section 1(2) and (5): The GOsC and its Committees – a fuller description of the duties of the Council, and the addition of a fifth statutory committee – the Appeal Tribunal.
- Section 3(6)(a): Full Registration – the need to address the fundamental imbalance, after the transitional period, between the position of UK-qualified and overseas-qualified osteopaths, which now makes the position easier for those qualified overseas.
- Section (5)(4): Provisional Registration – to avoid discrimination, should it be introduced: the GOsC wished to make provision for events (such as maternity leave and sickness) that prevent individuals from completing the requirements of the period of provisional registration within one year.
- Section 8(2): Restoration to the Register after being removed – for commonality with other Regulators, 'the period of 10 months' to be amended to 5 years.

- Section 17(1): Post-Registration Training – in line with current parlance, the words ‘further course of training’ be changed to ‘continuing professional development’.
- The difficulty in convening the Fitness to Practise committees because of the quorum requirements.
- Amendments that reflect, amongst other things, recent Human Rights legislation.

Council also favoured a complete, rather than piecemeal, review of the way the GOsC exercises its regulatory responsibilities, in line with current best practice, recognising that the secondary legislation (the Rules or Statutory Instruments) was as much in need of revision as the Act itself. So, in March 2003, in tandem with the Review of the Act, Council considered proposed changes to the Professional Conduct Committee (PCC) (Procedure) Rules 2000, which deal with the investigation of allegations against osteopaths. Legal opinion was sought to assist the debate and five recommended interim solutions were agreed. These centred around human rights, the balance between lay and professional members, and the powers of the PCC.

Additionally, it was agreed that in line with the practice of the majority of other regulatory bodies, notices of Professional Conduct hearings should be more widely published, including naming the osteopath, with the outcome of the hearing and, where applicable, the sanctions applied by the PCC made known.

Further areas identified for review by FFW included:

- The impact of the Council for Healthcare Regulatory Excellence (CHRE).
- The Standard of Proof and costs in Regulatory Proceedings.
- Revalidation.
- Separation of Powers.
- Registration, Constitution and Procedure issues.

The full Field Fisher Waterhouse report, which reviewed recent case law impacting on regulatory/disciplinary proceedings and looked at current trends in Fitness to Practise procedures, was received by Council in July 2003.

The most significant of the issues considered centred on the option of separating the GOsC's prosecutory and adjudicatory functions. There was, at this time, considerable divergence of policy and opinion between the healthcare regulators on this matter, with no one approach representing best practice. It was clear that this issue alone needed further careful consideration, alongside time to appreciate any impact of other legislation and influences which may be beyond our control. Council therefore took a view that adhering to the joint Legislative Review timetable agreed with the GCC was no longer practicable and it would be in the best interests of both professions to

pursue our legislative development programmes independently and new timeframes established.

It is well-recognised that the process of law is a slow one and we are even now barely at the mid-point of the Legislative Review process – even drawing on the experience of other bodies, it is likely to take as long again to bring the changes to the Osteopaths Act into effect. Ahead lies almost certainly a healthy debate between the GOsC, the lawyers of the Department of Health and the Privy Council, as the legislative revisions progress towards parliamentary approval. There are sure to be proposals that are rejected, judged "unworkable" by the DoH or deemed by the Privy Council to cut across other legislation or Government plans.

This has significant implications for the profession-wide consultation exercise planned for this year. It is important to the GOsC and to the DoH that osteopaths clearly understand the legislative process and the proposed revisions and rule changes, and assist in identifying any elements that are potentially weak or unfair.

Your feedback will be incorporated into the revisions as far as the bounds of law allow. This permits the GOsC and the profession less flexibility than that which we all enjoyed in the development of CPD – all input will be subject to the existing wider legal constraints and DoH approval.

As I have indicated, the format of the consultation exercise will be similar to that for CPD. We are currently preparing a consultation document that highlights proposed changes to the legislation and explains the rationale behind the need to change the Rules. The consultation document will be sent to all osteopaths in advance of this year's series of Regional Conferences. We will again use the open forum of the Conferences to clarify the proposals and to seek your views and recommendations.

Many of the proposed changes to the legislation relate to Fitness to Practise matters, and because this Spring we are also introducing the new Code of Practice for osteopaths, practice ethics will provide the theme of this year's Conferences (see further details on page 13).

Over and above the Conference forums, you will also have the opportunity to provide written feedback on the proposed legislative amendments. Once the feedback has been assimilated, revisions will be made to the Legislative Review proposals, then submitted to Council for final approval and delivered to the Department of Health, probably in the Spring of 2006.

I look forward to discussing further with you at the Regional Conferences these important advances in the profession's development.

In Education

Jane Quinnell, Clerk to Education Committee

The Education Committee (EdC) held its 39th meeting on Thursday 27 January 2005 in Osteopathy House, with Professor Trudie Roberts as Chair. Matters considered or reported included:

Osteopathic Clinical Performance Assessment (OCPA)

The EdC received recommendations from the OCPA Working Group (a sub-group of EdC) as to the future development of the Final Clinical Competence Assessment (FCCA) process. The EdC agreed that:

- The FCCA would be used for the last time for the 2005 student cohort, after which the process would be discontinued.
- The assessment of clinical performance will be administered internally by the osteopathic educational institutions and externally monitored by the GOSc through the Recognised Qualification (RQ) accreditation process.
- The osteopathic educational institutions are free to choose the format of the assessment, but it must involve 'real' patients in a 'real' clinical scenario. Institutions would also be required to appoint an external examiner with a specific remit to monitor the assessment of clinical performance within the institution.

GOSc meeting with the osteopathic education institutions (OElS)

The minutes of the GOSc's meeting with the OElS on 9 December 2004 were received. Items discussed included:

- The future development of the FCCA for final year students.
- Quality Assurance Agency (QAA) benchmark statement for osteopathy. This would set out the standards required of osteopathic pre-registration training courses.
- The appointment of Education Members of Council

- GOSc interaction with students.

The next meeting is scheduled for 21 April 2005.

Development department update

The department has continued to work on a number of other areas, namely:

- Ensuring GOSc educational standards and initiatives are compatible with the new Disability Discrimination Act (DDA) legislation.
- Monitoring progress with the Department of Health's Musculo-Skeletal Framework Project.
- Continued negotiations with the QAA over the development of the outsourced GOSc/QAA Review for the Recognised Qualification process.
- Review of the annual reports from the osteopathic educational institutions.
- Revision of the Development budget, business plan and risk management register for 2005-2006.
- Development of a QAA benchmark statement for osteopathy in conjunction with the osteopathic educational institutions and the British Osteopathic Association.
- Exploring ways of achieving Higher Education Funding Council for England (HEFCE) funding for osteopathy.
- Preparation for the end of the first CPD year and proposed revision of the CPD guidelines.
- Compiling a database of information on osteopathic regulation and education for European Economic Area (EEA) member states.

Appointment of the Education Member of Council and co-option to the EdC

Interviews for the above appointments took place on 18 February and 1 March 2005.

Next EdC meeting

22 March 2005

For more information, please contact Jane Quinnell on tel: 01580 720 213, email: janeq@osteopathy.org.uk

GOSc Promotional Material

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GOsC wins 'osteopath' title protection case

Last month, Mr Stefan Zulewski pleaded guilty to two charges of unlawfully describing himself as an osteopath. He was fined £3,000 by Essex Magistrates' Court and ordered to pay the GOsC's costs of over £1000. This is the highest penalty for this offence to date and indicates the Court's recognition of the gravity of such cases.

Under the Osteopaths Act 1993 it is an offence for any person to describe themselves as an osteopath, unless registered with the GOsC. The Court found Mr Zulewski in breach of section 32(1) of the Act, which states:

"A person who (whether expressly or by implication) describes himself as an osteopath, osteopathic practitioner, osteopathic physician, osteopathist, or any

other kind of osteopath, is guilty of an offence unless he is a registered osteopath."

Magistrates told Mr Zulewski that they saw his offences as very serious and that it was their duty to act to protect the public.

Mr Zulewski came to GOsC attention following a complaint from a patient who had been referred to him by BUPA. The GOsC contacted BUPA, who provided us with invoices that had been submitted to them, headed "STEFAN ZULEWSKI - OSTEOPATHIC PRACTITIONER."

The GOsC is encouraged by the outcome of this case and anticipates further prosecutions in the near future.

STOP PRESS...STOP PRESS...STOP PRESS...STOP PRESS...STOP PRESS...STOP PRESS...

AXA PPP revises '5 years' requirement

Following two meetings last year with AXA PPP to review recognition criteria for practitioners, the private medical insurer has notified the GOsC that it has revised the '5 years in practice' requirement for Osteopaths to:

- "A minimum of 1 year full registration with the General Osteopathic Council (GOsC), and
- Whose practice is not subject to any special conditions, restrictions or a requirement for supervision or further training, and

- Who retains current professional indemnity insurance for the treatments they provide."

AXA PPP say the company considers this to be "more reflective of current regulatory processes". The new criteria will come into effect from **1 April 2005**. **A fuller report on AXA PPP's new terms of business will follow next month.**

New electronic CPD forms

In order to aid you in the completion of your *CPD Annual Summary Form* and to avoid any problems that may arise from illegible handwriting, an electronic version of the form can now be accessed on the public section of the GOsC website: www.osteopathy.org.uk. Simply click on the *Training & CPD* button in the left-hand menu and then select the CPD button at the top of the following page. This will take you to the public CPD information page where the form is located, along with access to an electronic version of the CPD guidelines.

The electronic form can be saved to the hard drive of your computer and information entered as appropriate. When complete, you may print the form out, sign at the bottom where indicated, and return to the GOsC registration secretary. Alternatively, submit the form via email to registration@osteopathy.org.uk. If sending via

email, please remember to tick the box at the top of the *CPD Annual Summary Form* to indicate that this is a complete and accurate record of your CPD activities during the CPD year in question.

All *CPD Annual Summary Forms* **must be completed and returned to the GOsC by Tuesday, 31 May 2005**. If you feel that you are unable to meet the requirements of the CPD scheme, you should contact the Registrar in writing at the earliest opportunity, clearly stating the reasons why this is the case. The Registrar will consider all requests for reductions and waivers on an individual basis.

For further guidance on completing your form see page 10 or contact the GOsC Development department on exts. 235, 238 or 240.

Continuing Professional Development – some further guidance

Marcus Dye, Assistant Registrar (Development)

Firstly, thanks to all of you who have already submitted your *CPD Annual Summary Forms*. We have now received over one hundred completed forms, the majority of which have met the requirements of the scheme. There are a few points which may be worth highlighting at this stage for the benefit of those who have yet to complete their forms.



- A number of forms have been returned unsigned. Please ensure that you have signed your form in the space provided. If you wish to submit an electronic version of the form (see page 9) make sure that you tick the box at the top to indicate that this is a complete and accurate record of your CPD activities during the CPD year in question.
- Only the *CPD Annual Summary Form* needs to be submitted to the GOsC at this stage. We do not require you, at this time, to submit evidence of the completion of the activities outlined on the form. This evidence should be kept in your personal CPD portfolio, together with any evaluation, planning and reflection material you have produced. We would encourage you to keep this portfolio in order, as you may be required to submit a copy to the GOsC at a later date, as part of verification monitoring.
- Take care to ensure that you have stated clearly why a particular CPD activity is beneficial to your professional work as an osteopath – this should be presented under the *Relevance to professional work as an osteopath* section. Consulting the GOsC guidelines that outline the standards of practice for osteopaths may be helpful in this respect – these are *Standard 2000: Standard of Proficiency* and *Pursuing Excellence (Good Practice for Osteopaths)*.
- The first CPD year for all osteopaths (with the exception of new graduates and those who have returned to the register since 1 May 2004) runs from 1 May 2004 to 30 April 2005. Please do not include activities that were undertaken outside of this timeframe (with the exception of the GOsC CPD conference in Bristol on 24 April 2004), as they do not qualify.
- If you are completing a handwritten submission, please take time to ensure it is clear and legible. This will save time and additional work later on. If you would prefer to submit a typed version of the form, an electronic version of the form is available (see page 9).

- Ensure that the number of hours claimed is clearly separated into the categories *Learning by Oneself* and *Learning with Others*.
- Ensure that the number of hours totals at least 30 overall, with a minimum of 15 hours in the category *Learning with Others*.

- If you complete more than the minimum requirement of 30 hours of CPD, then it is worth listing the additional activities to ensure you comfortably meet the requirements.
- Teaching, tutoring and examining are all worthwhile activities to undertake for the benefit of the profession. However, before including these on your *CPD Annual Summary Form*, you should ask yourself whether you have really gained from this any further knowledge or development that benefits your professional work as an osteopath. It will not be sufficient, for CPD purposes, for you simply to state that you have spent two hours tutoring a group of students or one hour delivering a lecture that you would normally do in the course of your work. These activities are, for the most part, a one-way learning experience, involving the tutor or lecturer imparting their own professional knowledge to, or facilitating learning for, the student.

This is not to say that the GOsC will ignore these activities outright. Any time spent in researching or reviewing your teaching material, or a group discussion that has led to a clear learning outcome for yourself, may certainly be included for CPD purposes. With regard to group discussion, you would need to clearly state what has been discussed and claim an appropriate amount of time for this i.e. a two-hour discussion with students would normally be unlikely to result in two hours' worth of CPD for yourself. Similarly, it is also highly unlikely that every lecture given as part of your regular work would result in significantly enhanced professional development for CPD purposes. Any training undertaken in order to improve your teaching, examining or tutoring skills is likely to benefit your professional work as an osteopath and may be used to fulfil your CPD requirements. In summary, only activities which have a clear link to your professional development will be acceptable to the GOsC.

- You are required to maintain a portfolio of your CPD activities, which includes all evaluation, planning and reflection undertaken, as well as evidence that activities have been completed (please refer to the CPD guidelines for more detail). This should be clearly presented and easily referenced. With increased external scrutiny from Government and patient groups, following enquiries such as the recent Shipman Report, it is important for the profession to be able to demonstrate commitment to

continued learning and development, in order to provide the best service possible to the patient.

- Later this year, the GOsC will be issuing the revised draft of the CPD guidelines, based on your feedback. This will be presented in an A4 folder format, which you can use as your CPD portfolio to store all your CPD information and records.

If you would like any further advice on the completion of the CPD Annual Summary Form, please contact the Development department on exts. 235, 238 and 240.

Dr Foster update

Louise Morgan, Clinical Research Manager, Dr Foster

Regrettably, Dr Foster has had to agree with *The Times* newspaper delaying the proposed publication of the *Body and Soul* guide to complementary therapies for the following reasons:

- The numbers of practitioners included in the new database are deemed insufficient – the aim to produce a comprehensive directory of practitioners has not been fully achieved.
- The publication schedule proposed did not allow for us to fulfil our protocol with the professional bodies, whereby giving sufficient time to review materials in advance of publication.
- Commercial decisions outside of Dr Foster's control primarily around scheduling and circulation targets.

Dr Foster is confident that a national newspaper will publish the complementary practitioners' directory later this year, likely to be the autumn.

Dr Foster acknowledge that this is a disappointment and as an interim measure are committed to delivering an innovative and engaging media campaign to launch the new complementary practitioners website which will



gain national and local media coverage. The professional bodies will be consulted on the content of this website.

Current numbers of respondents are:

- Acupuncture – 391
- Chiropractic – 238
- Herbalism – 69
- Homeopathy – 231
- Osteopathy – 986

Please note that last year's database, currently displayed on the website (www.drfooster.co.uk) will soon be superseded by the new data, therefore if you would like your details to appear in the new database and have not yet completed a questionnaire, please email your first name and surname only to cam2004@drfooster.co.uk. You will then be sent a unique username and password to access an online version of the questionnaire; you will then be included in the new 2005 directory.

If you have any further queries about CAM 2005, please contact Dr Louise Morgan, Clinical Research Manager, on tel: 0207 256 4932, email: louise.morgan@drfooster.co.uk.

Erratum

Statutory Register of Osteopaths 2005

**HOYER MILLAR, Martha Harriet Alice (f) Ms
BSc(Hons) Ost**

REG No 4/4710/F __16 July 2001

Is registered with the General Osteopathic Council and should have appeared in the 2005 Register.

Due to a late production error, the information on page 449 was not printed. This page is included with this issue of *The Osteopath*. Please keep it with your copy of the Register.

Advertisement rates

Cover Positions	B&W	2-Col	4-Col
Full Page	n/a	n/a	£350
1/2 Page	£200	£250	£300
1/4 Page	£150	£200	£220
1/8 Page	£100	£140	£160
(Classified Section)	£80	£90	£100

Communicating with GPs: GOsC workshop update

As part of its objective to provide communications support to the osteopathic profession, the GOsC runs promotional training consisting of a series of interactive, regional GP workshops.

These workshops equip osteopaths with effective methods of communicating with GPs and other primary care practitioners, with the aim of increasing awareness of osteopathy and the practitioner's patient base. Led by osteopath Robin Lansman DO, they are an opportunity for osteopaths to work together with a view to "marketing" osteopathy with consistency and confidence.

Robin says "Reflective practice is intrinsic to building our role as primary carers. Even more so is the ability to verbalise and express exactly what we are aiming to achieve for our patients."

The key elements of the interactive workshops include:

- Osteopathic identity: How do osteopaths see themselves? How do other health professionals see osteopaths?
- What are the GP's needs? What can the osteopath offer?
- Establishing partnerships with local GP practices
- Making a presentation: preparation & delivery
- Presentation content: GOsC promotional toolkit
- Managing the sceptics
- Practical demonstration: the standing examination

Two initial pilot workshops were held in Birmingham and Bristol, after which the workshops were rolled out across the country. To date we have visited Newcastle, Cardiff, Surrey (on two separate occasions), Manchester and Plymouth, with a total of 226 participants.

Feedback from delegates has been very positive, with 100% finding the workshop beneficial and 91% encouraged to give a presentation to GPs in the future (fig 1). Just under half of all participants had previous experience of giving presentations to other healthcare professionals (fig 2).

Fig 1: Has this workshop encouraged you to give a presentation to GPs?

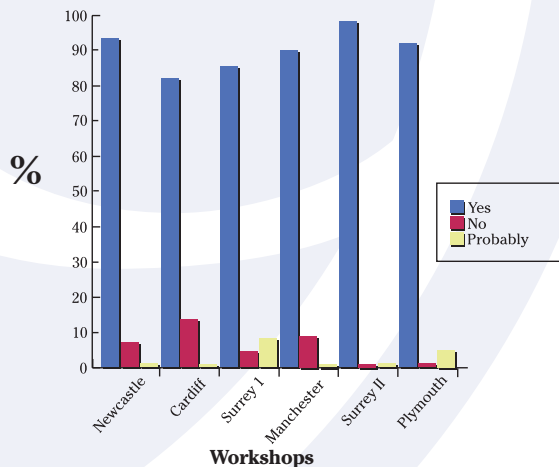
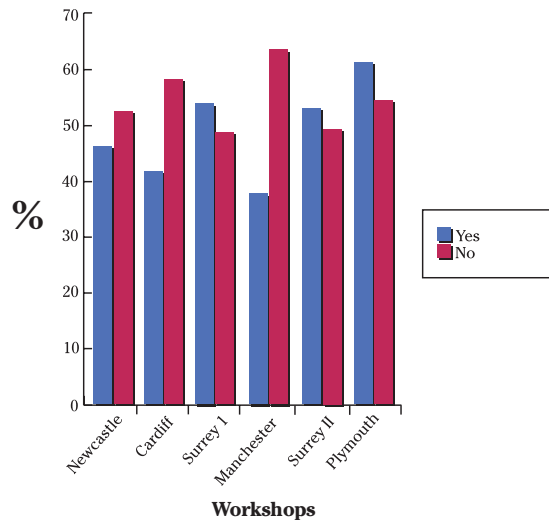


Fig 2: Have you ever made a presentation to other health professionals?



Typical comments included:

"It was good to meet other osteopaths on an informal level and share fears in an open and ego-free environment."

"Improved my knowledge of how to approach GPs and gave me confidence to do so."

A full GP Feedback Report is available on request – see GOsC contact details below.

Future dates

Based on this feedback and in response to demand from osteopaths, we are holding two more workshops over the next couple of months, one in Surrey on 9 March (sold out) and a second in Nottingham, at the Nottingham Gateway Hotel, on 22 April.

A further five GP Workshops will be scheduled across the UK over the next twelve months, subject to local demand. Possible locations include:

- Eastern Counties
- Southern England
- South East England
- North West England
- Ireland
- Scotland

If you would be interested in attending any of these workshops, call the GOsC Communications department on tel: 020 7357 6655 ext.222 or email: GPWorkshop@osteopathy.org.uk, specifying your regional location.

Regional Conferences 2005

The 2005 GOsC Regional Conferences, entitled ‘**Osteopathy – shaping best practice**’, again offer osteopaths the opportunity to influence the profession’s future. Changes are underway to the Osteopaths Act – see this month’s Registrar’s Report and Legislative Review outline on pages 3 and 6. We are inviting you to explore these proposals with us and your colleagues, with a view to ensuring a progressive framework for the future. Part of this is looking at being an integral part of primary care – what are your expectations and what will be expected of you?

The new Code, coming into force this May, brings the profession in line with modern best practice. Explore the complexities of medical ethics in daily working life and enhance the overall quality of your patient care.

Almost half of you turned out last year to contribute to professional development – be sure you continue to support the momentum for wider recognition.

Booking forms will be sent directly to you next month. Note the dates in your diary – we have spread these over the year and around the country to maximise participation.

Further information is available from the Communications department on tel: 020 7357 6655 exts. 228 and 222.



A world champion amongst us

Rob Thomas BA BSc (Hons) Ost, Tonbridge



Lucy Wolf has recently graduated from the European School of Osteopathy; she is also an accomplished martial artist. Her chosen art is Tae Kwon-Do, a military martial art founded in Korea in 1955 and when literally translated means 'the way of hand and foot fighting'.

Trained by her father from the age of seven, 23 year old Lucy achieved her Black Belt by the age of eight and a unique 100 per cent distinction pass rate at every subsequent grade. She has been undefeated British Champion at Black Belt level for 15 years and won a European title in 1998.

Lucy first attempted the World Championships in Italy in 2001, where she achieved a bronze medal in the pattern event and a silver medal in the ladies team power. Three years later, in October 2004, Lucy achieved her life-long goal when she was crowned World Champion in her specialist event – the culmination of 16 years of training.

As part of the ladies UK team, she won a further two silver and two bronze medals, giving an amazing individual tally of five World Championship medals.

Training in Tae Kwon-Do is immensely demanding, both physically and mentally, and it was through the rigors of training during her early years in this sport that injuries began to occur. At the age of 12, on the advice of her father, she began receiving osteopathic treatment. This was to be the catalyst that would inspire Lucy on her future career. She soon realised there was a great similarity between Tae Kwon-Do and osteopathy, in that they both required great attention to technique and detail, regardless of the size of the practitioner. The confidence gained from the treatment she received and the advice she was given by her osteopath at that time, was what led her to make the decision to pursue osteopathy as her chosen profession. She had learnt how to break people and now wanted to learn how to mend them!

Spring into action

Do you regularly advise your patients about exercise? Is it an important part of your treatment plan? If so, do you take your own advice?

We would be interested to find out just how active the osteopathic profession really is and if you are prepared to lead by example. **The British 10K Run** (www.thebritish10klondon.co.uk) takes place in London on **Sunday 3 July 2005** and we would like to hear from osteopaths who are interested in joining **Team Osteopath** to take part. Places are limited so please contact us as soon as possible to ensure we can secure a place for the Team.

We will be supporting a number of children's charities, including *Young Minds*, a national charity committed to improving the mental health of children.

The British School of Osteopathy (BSO) Sports Clinic has invited *Young Minds* to speak to osteopaths on **Tuesday 26 April**, at the BSO from 6.30pm. Speaker Lee Miller will be talking about the work of the charity, what osteopaths should look out for when treating children and how you can represent *Young Minds* in the British 10k Run. Places are limited, so please book in advance and by 19 April at the latest. Attendees will be asked to make a donation to the charity. **For more information, or to book a place for this evening, contact Robin Lansman on email: practice@bodybackup.co.uk.**

For more information on joining Team Osteopath, contact the GOsC Communications department on tel: 020 7357 6655 ext. 226 or email: susanm@osteopathy.org.uk.



12th Annual Symposium on Complementary Health Care

This year's symposium will take place from **19-21 September 2005** in Exeter. This is earlier in the year than usual but allows us to use the purpose-built University conference facilities and the brand new conference accommodation and catering facilities.

The deadline for abstract submission is **1 June 2005** and programmes will be available from the end of June.

We hope you will be able to attend and look forward to welcoming you and your colleagues in Exeter.

Abstract and registration forms are available to download from our website at www.pms.ac.uk/compmed/symposium. For further information contact Barbara Wider, Complementary Medicine, Peninsula Medical School, 25 Victoria Park Road, Exeter EX2 4NT, tel: 01392 424872, email: b.wider@exeter.ac.uk.

Rollin Becker Memorial Lecture

Caroline Penn MSc DO (Hons) MSCC, Hatfield

Over 120 osteopaths, members of the Sutherland Cranial College and guests, gathered at the Cavendish Conference Centre, London for the fourth Rollin Becker Memorial Lecture on Saturday, 27 November 2004.

Colin Dove, past principal of The British School of Osteopathy guided attendees through an intricate web of scientific discoveries that span more than 100 years, in support of a New Theory of Osteopathy. With 48 years' experience in osteopathy, Colin's work has been

shaped and driven by a number of influential colleagues including Karl Pooper, Irwin Korr, Bob Fulford, Alan Becker and Rollin Becker.

The lecture drew greatly on the discoveries of quantum mechanics along with many references to the work of osteopath Nicholas Handoll, who wrote 'The Anatomy of Potency'.

For more information, or to buy a copy of the lecture on video or DVD, contact: Sutherland Cranial College, PO Box 91, Chepstow, NP16 7ZS, Tel: 01291 689908.

European City Guide warning

The GOsC has been contacted by a number of osteopaths expressing their concern over a publication called the *European City Guide*. They had each received a form asking if they would like to be listed in the guide, allegedly at no cost. Several took up this offer and completed the form, only to find out that there was a charge of over £1000 for the listing and that the form is, in fact, a contract.

The Office of Fair Trading (OFT) reported back in September 2003 that the Spanish company responsible for the guide (then based in Barcelona), 'was to be temporarily shut down for one year and fined 300,000 Euros (over £200,000) for its deceitful advertising. Over the last four years, the Catalan authorities have received more than 3,500 complaints from companies and professionals in 40 European countries about *European City Guide*.'

The company now appears to be operating again from a new base in Valencia. John Vickers, OFT Chairman, said: "We urge businesses to be alert against practices of this sort."

Further information on the *European City Guide* can be found at www.stopecg.org.

Data protection scams

We have also again received complaints from registrants who have been contacted by companies falsely claiming to be affiliated with the Data Protection Register and demanding urgent submission of information together with payment of fees in excess of £95. The standard annual fee for registration is £35.

Further information on the Data Protection Act 1998 and your obligations can be found at www.informationcommissioner.gov.uk.

New patient guide to CAM



The **Prince of Wales's Foundation for Integrated Health** has launched a new patient guide to complementary healthcare. *Complementary Healthcare: a guide for patients*, which is partly funded by the Department of Health, provides information about the 16 'most popular' therapies and explains the current regulatory situation of complementary healthcare. It also includes guidance on finding a qualified and registered (where appropriate) practitioner, safety points, complaints processes and further sources of information.

The Foundation's Chief Executive, Michael Fox, said,

"Our aim is to give patients reliable and accessible information to help them to make informed decisions about their healthcare."

The launch of the guide has been widely reported in the media, linked to the growing interest in complementary therapies over recent years. According to the Foundation's latest statistics, 1 in 10 people have received treatment from a complementary practitioner in the last year and 7 out of 10 people would like more information on complementary healthcare.

The guide is available to download free of charge from the Foundation's website www.fihealth.org.uk and printed copies can be ordered from the Education Distribution Service on tel: 01795 427614 or email: info@edist.co.uk.

Osteopaths in the NHS

Dr Alex Sautelle, Osteopath, General Practitioner and Senior Lecturer at the British College of Osteopathic Medicine (BCOM), has been commissioned by the Guildford and Waverley Primary Care Trust to set up and manage a regional spinal clinic in which fifth year osteopathic students from BCOM will be working as part of their mentored clinical practice for the Bachelor of Osteopathic Medicine degree.

The clinic will be multidisciplinary involving osteopaths, physiotherapists and GPs and provide a referral service to radiologists, podiatrists, pain clinics and orthopaedic surgeons. It will provide an opportunity for the philosophy and unique skills of the osteopath to be practised at the heart of an NHS clinic.

Referrals will be accepted from all local GPs and patients will be assessed, investigated, treated or referred as appropriate. All types of investigation and referral pathways will be open to the multi-professional triage team and patients thought to benefit from surgery will be referred to the orthopaedic surgical team.

Under the guidance and supervision of Dr Sautelle, osteopathic practitioners will be exposed to a variety of clinical presentations and will receive tuition in their management and treatment plans. This provides not only an important educational opportunity for students, but also a valuable mentoring experience before they enter into independent practice.

Dr Sautelle explained, "There has been a great deal of work in setting up this clinic and the Royal Surrey County Hospital has been particularly helpful. Important communication and educational links have been established which will hopefully benefit the osteopathic



profession as a whole. Clinics of this sort can only help to improve communication amongst professionals and provide forums for education, research and continuing professional development. The ethos of the clinic is very much holistic in its attempt to educate patients and address risk

factors for back pain. Lifestyle issues will be explored during consultation, including nutritional, psychological, social, occupational... exercise and smoking habits.

In developing links for this clinic, fellow professionals, including the orthopaedic, radiological and pain clinic teams, have been welcoming and helpful but it has underlined the need for greater awareness and promotion of the osteopathic cause."

He added, "I was a little surprised by the lack of awareness of osteopathy as a treatment modality during my negotiations with the PCT and professional teams involved. Raising awareness of osteopathy is not only the responsibility of the General Osteopathic Council in developing our cause, but the responsibility of the colleges in raising educational standards and of each individual osteopath in promoting awareness amongst the public, communicating with GPs and relevant professionals and becoming involved in research projects. We can, I am sure, look forward to better co-operation between professionals involved in caring for patients with back pain and the important contribution that the osteopathic profession can make to this team approach."

For further information please contact Dr Alex Sautelle, MPTT Spinal Clinic, Guildford/Waverley PCT, Farnham Hospital, Surrey, tel: 01344 467487 or Manoj Mehta at BCOM, tel: 0207 435 6464.

OSCA Msc update

Ian Whyte, Osteopathic Co-ordinator

The second cohort undertaking the Osteopathic Sports Care Association (OSCA) MSc in osteopathic sports care have now completed their second module, Osteopathic Concepts in Sport, the first module being Research Methodology. The first cohort, now in their second year, have been able to enjoy the advantages of the recently completed science block. This new site forms part of a multimillion pound addition to the already excellent facilities at Leeds Metropolitan University and it is hoped that we can make even more use of these facilities in the

future. The course itself continues to develop in response to feedback from lecturers and students. Applications are already being received for the new intake in September this year.

Anyone interested in learning more about the course, or who wishes to apply, should contact: Ray Lloyd, Course Director, Leeds Metropolitan University, Beckett Park Campus, Leeds LS6 3QS, or tel: Ian Whyte on 01785 816481.



Evidence based practice – tutorial 3

Carol Fawkes BA (Hons) DO, Research Development Officer

Information about search techniques can seem very daunting at first, but increased practice and familiarity with these methods makes them more useful. Time is very limited for all researchers and practitioners and the search tips can enormously reduce the time spent online.

Basic search tips were described in the December 2004 edition of *The Osteopath*.

Further searching on the internet

It is possible to narrow database searches even further using a number of features or symbols. Different databases will require different features which vary the sensitivity and therefore, the specificity of the search. The search features, which can be used in combination or alone, are described below:

Truncation – * or \$ or :

When placed at the end of a word, this will include terms with all variable endings to the beginning of the word in the search e.g. *analy** will search for *analytic, analytical, analyse* etc.

Focus – *

When placed at the beginning of a word, this searches for articles in which the word is a major focus of the paper e.g. **migraine* will search for papers with *migraine* as the major subject.

Explode/expand – Explode or exp

When placed before a term, this will search for all possible related options e.g. *explode headache* will search for different headache types such as cluster, vascular and so on.

NB: some indexers do not consider migraine a type of headache, therefore, to include all headaches, the Boolean operator “OR” needs to be added i.e. *explode headache OR migraine*.

Wildcards – ?

When placed within a word, this indicates that the letter it replaces is a variable or absent. The search will include all permutations of the word e.g. *gyn?ecology* will search for *gynaecology* and *gynecology*.

Boolean – AND or NOT

Boolean operators are used between terms to link them. Articles must include both terms e.g. *osteopathy AND evidence based* will show articles including either term.

It excludes articles that include the term following NOT e.g. *ultrasound NOT diagnostic* will exclude diagnostic ultrasound.

Proximity – NEAR

Linked terms must occur close to each other e.g. *manipulative NEAR therapy*.

Limits

These can be used to restrict a search by publication type, year, language or other characteristics. Limits can also direct the search for terms to a particular part of the document. Many databases also have a Limits option, which can be selected by clicking on it. See ‘Limiting variables further’ below.

Related

Clicking on this hyperlink when you have found a useful reference will search for similar articles in the database.

Limiting variables further:

Variables can be limited still further when searching databases by using the following features:

Abstract – ab

Manipulation.ab will search for the word manipulation in the abstract

All fields – all

Craniosacral technique.all will search for the term *craniosacral technique* in all fields. However, PubMed will only search in all fields if it cannot match the word in one of its Translation tables or Indexes via the Automatic Term Mapping process.

Author – au

Smith a.au will search for articles by the author A. Smith.

Date of publication – dp

1996.dp will search for articles from the year 1996. Dates must be entered using the format YYYY/MM/DD (year, month, day) but month and day are optional. To enter a date range, insert a colon between each date e.g. *1995/01:1996/12*.

Journal – jn

Spine.jn will search for articles in the journal Spine.

Language – la

English.la will only search for articles written in English.

Research

Medical subject headings (MeSH)

Single word – *me* or *mh*

Searches for a single word, wherever it may appear as a MeSH term e.g. *Brachialgia.me* or *Brachialgia.mh* will search for articles with brachialgia listed as a MeSH term.

Major topic – *majr*

Osteopathic.majr searches for articles where osteopathic approaches are one of the main topics in the article.

Personal name as a subject – *ps*

This limits retrieval to where the name is the subject of the article e.g. *Palmer dd.ps* will search for articles about, or that reference DD Palmer.

Publication type – *pt*

Clinical trial.pt will search for clinical trials in publications.

Subheading pre-explosion – *px*

Diagnosis.px will search for and include all MeSH subheadings that deal with diagnosis.

Subject subset – *sb*

This will search from articles on specialised topics. Subject subsets available are: AIDS, bioethics, complementary medicine, history of medicine, space life sciences, systematic reviews and toxicology. *Asthma AND cam.sb* will search for articles within complementary medicine concerning asthma.

Subheadings – *sh*

Evidence based.sh will search for the words *evidence based* in the subheadings.

Journal title – *ta*

Manual therapy.ta will only search the journal *Manual Therapy*.

Title – *ti*

Osteopathic.ti will search for articles with the word *osteopathic* in the title.

Title and abstract – *tiab*

Manipulation.tiab will search the title and abstract only for the term *manipulation*.

Text words – *tw*

Kinesiology.tw will search for articles with the term in the title, abstract, MeSH terms and subheadings, chemical substance names, personal name as a subject, and MEDLINE secondary source field.

Volume – *vi*

The number of a journal in which an article is published, e.g. *osteopathic.ti* AND (*spine.jn* AND *2002.da* AND *27.vi*) will search volume 27 of *spine* published in 2002 for articles with *osteopathic* in the title.

Year – *yr*

2002.yr will search for articles published during the year 2002 only.

© *The Evidence-Based Case Report: A Resource Pack for Chiropractors*. Amanda R. Jones-Harris. *Clinical Chiropractic* (2003) 6, 73–84.

Research opportunities

PhD Studentship/Tutorial Assistantship (Complementary and Alternative Medicine), Thames Valley University Faculty of Health and Human Sciences. Ref: FHHS155.

Applications are invited for a PhD Student/Tutorial Assistant from graduates with at least a 2(i) class Honours degree, preferably with a practitioner qualification in complementary medicine. Interviews will take place on Wednesday 13 April. For an informal discussion, please contact Professor Robinson, Head of Complementary Healthcare and Integrated Medicine on tel: 020 8280 5172, email: nicky.robinson@tvu.ac.uk or Sylvie Fritche (PA) on tel: 020 8280 5123, email: sylvie.fritche@tvu.ac.uk. **Closing date: Monday 14 March, 2005.**

For further information and an application form, please contact <http://www.tvu.ac.uk/vacancies> or the Human Resources Department on tel: 020 8231 2395 (24 hour voicemail) or email: hr@tvu.ac.uk, quoting reference FHHS 155.

Conferences

Teaching in Complementary Medicine: Monday 4 and Tuesday 5 April 2005 at the University of Central Lancashire, Preston.

Diversity and Debate in Alternative and Complementary Medicine: The 2nd international academic and experiential conference for researchers and practitioners. Nottingham University, 28 June – 1 July 2005. Organised by the Alternative and Complementary Health Research Network. (Deadline for submission of abstracts: March 14 2005).

Developing Research Strategies, Thursday 28 April 2005. Hotel Ibis, Southampton. **Closing date for abstracts: 28 February 2005.** For further information, contact Jane Cousins, Complementary Medicine Research Unit, Aldermoor Health Centre, Aldermoor Close, Southampton, SO16 5ST. Email: compmed@soton.ac.uk or telephone: (02380) 241073.

12th Annual Symposium on Complementary Health Care, Exeter.

Monday 19 to Wednesday 21 September, 2005. To register your interest, please contact Barbara Wider (b.wider@exeter.ac.uk). Closing dates for submissions: 1 June 2005. For more information see page 14.

23–25 September 2005. 2nd International Conference on Movement Dysfunction in Edinburgh; **Pain and Performance: Evidence and Effect.** (Call for papers deadline is January 2005). Details at www.kcmacp-conference2005.com or tel: 01865 373625.

Journal Scan for research relevant to practice life

Lamé IE, Peters ML, Vlaeyen JWS, vKleef M, Patijn J. **Quality of life in chronic pain is more associated with beliefs about pain than pain intensity.** *European Journal of Pain* 9 (2005), 15–24.

The above researchers conducted a cross-sectional study of 1208 heterogeneous chronic pain patients. The aim of the study was to investigate pain cognition and quality of life of chronic pain patients. All patients completed an initial questionnaire on demographic variables, pain intensity, location, cause, coping beliefs, pain catastrophising and eight dimensions on quality of life. The study showed that patients with low back pain and multiple pain locations experienced most functional limitations. Women reported more pain, more catastrophising thoughts about pain, more disability and lower vitality and general health. Social functioning, vitality, mental health and general health are strongly associated with pain catastrophising.

When tested in a multiple regression analysis, pain catastrophising was shown to be the single most important predictor of quality of life.

Carragee EJ, Alamin TF, Miller JL, Carragee JM. **Discographic, MRI and psychosocial determinants of low back pain disability and remission: a prospective study in subjects with benign persistent back pain.** *Spine* 5 (2005), pp 24–35.

A variety of risk factors, including morphological and psychosocial variables, have been suggested as contributing to serious low back pain. It has previously been difficult to test the various differing hypotheses on the input of structural and psychosocial variables due to the low incidence of serious low back pain in healthy adults. An extended longitudinal study, involving a large sample size and extensive lumbar magnetic resonance structural imaging, was carried out. The contribution of each variable was investigated in subjects with no history of low back pain. Results of the study showed that psychosocial variables predicted both long and short-term disability events, duration and health care visits for low back problems. The possibility of a sustained remission appeared to be linked to occupational factors. Structural findings indicated that only moderate or severe Modic changes of the vertebral end plate were weakly associated with an adverse outcome.

Blyth FM, March LM, Nicholas MK, Cousins MJ. **Self management of chronic pain; a population based survey.** *Pain* 113 (February 2005), pp285–292.

This article describes a population of 474 chronic pain patients aged 18 years or over. A random digit dialling computer-assisted telephone survey showed that passive strategies were more commonly reported

than active ones. Passive strategies included taking medication, resting and using hot or cold compresses. Active strategies commonly described exercise. Passive strategies were found to increase the likelihood of having high levels of pain-related disability and more pain-related healthcare visits. In contrast, using active strategies substantially reduced the likelihood of having high levels of pain-related disability.

Hortobágyi T, Westerkamp L, Beam S, Moody J, Garry J, Holbert D, DeVita P. **Altered hamstring-quadriiceps muscle balance in patients with knee osteoarthritis.** *Clinical Biomechanics* 20 (January 2005), pp 97–104.

This article describes a cross-sectional study of three groups of subjects: one group with grade II osteoarthritis of the knee joint, a healthy age- and gender-matched group and a group of healthy young adults. Each group performed walking on the level, stair ascent and descent; electromyography was measured during the stance phase of each activity. Two coactivity ratios were computed: biceps femoris to vastus lateralis ratio, and biceps femoris to maximal biceps femoris activity.

The researchers found that the subjects with knee osteoarthritis had significantly higher coactivity than either of the other two groups and the age-matched healthy adults had higher coactivity than the healthy young adults. The researchers interpreted these findings to mean that patients with knee osteoarthritis showed increased hamstring muscle activation which may interfere with the normal load distribution in the knee joint and facilitate disease progression. The inference made from the study is that treatment plans for osteoarthritis of the knee joint should focus as much on improving muscle balance as on quadriceps strengthening.

Sieben JM, Portegijs PJM, Vlaeyen JWS, Knottnerus JA. **Pain-related fear at the start of a new low back pain episode.** *European Journal of Pain* (available online 20–01–05, doi:10.1016/j.ejpain.2004.12.007).

In this study, a sample of 247 acute low back pain (LBP) patients completed questionnaires when consulting their general practitioner (GP) with a new episode of LBP. Previous research supports the fear-avoidance model in chronic low back pain. The aim of this study was to assess whether the variables considered in the fear-avoidance model are already associated during the acute episode of LBP and whether increases in pain are associated with other patient characteristics assessed by the GP. The questionnaires assessed pain-related fear, avoidance behaviour, pain and disability.

HEALTH EDUCATION SEMINARS are pleased to present EVIDENCE-BASED COURSES

ALTERED HAEMODYNAMICS – a new concept in manual therapy (this course is now MACP accredited)

March 5 to 6 – Hairmyers Hospital, East Kilbride, April 23 to 24 – Haywards Heath, May 21 to 22 – Harrogate, November 5 to 6 – St Helier Hospital, Carshalton, Surrey
 This exciting new course introduces a series of Vascular conditions that every manual therapist should include in their knowledge base. The aim of the course is to influence the thought processes by which the practitioner arrives at diagnosis and management strategies. The course covers little known vascular causes of pain, which commonly mimic musculoskeletal conditions. Practical differential diagnosis methods are covered including lower limb exercise testing. The course is suitable for all musculoskeletal practitioners who wish to look outside their 'usual' scope of practice. Improved clinical reasoning and practical diagnostic skills will provide a direct impact on day-to-day clinical practice.
 The Tutors: Alan Taylor MCSP MSc, Roger Kerry MCSP MMAPC MSc are authors of a chapter: Vascular Syndromes Presenting as Pain of Spinal Origin in the forthcoming 3rd Edition of Grieve's Modern Manual Therapy. Cost: **£175** by cheque (including refreshments, certificate and extensive course manual)

THERAPEUTIC EXERCISE – Concepts, applications & new directions

April 23 to 24 – Medway Maritime Hospital, Kent
 The principles covered may be applied to patient groups for orthopaedic rehabilitation, low back pain, degenerative joint disease, sports specific rehabilitation and prophylactic stability programmes. The practical sessions involve group work in exercise prescription to meet patient needs for given scenarios. Demonstration of group formats and class-taking techniques will mean course participants are required to take an active part in the practical sessions. The practical application of exercise prescription, from home programmes to group exercise will be demonstrated. Consideration will be given to specific patient groups, goal setting, pacing principles and motivational techniques. The course content is approximately 50% practical and 50% theory.
 Tutors: David FitzGerald MCSP MMAPC Nick Carter MCSP MMAPC. Cost: **£175** by cheque (including refreshments, certificate and extensive course manual)

THE COMBINED APPROACH TO THE SACROILIAC JOINT (HJ – Hugh Jenkins, HT – Howard Turner)

May 21 to 22 – Manchester ? (HT), June 18 to 19 – St Helier Hospital, Surrey (HJ), Sept 24 to 25 – Wirral (HT), Nov 5 to 6 – RJ@AH Hospital, Oswestry
 The course will cover manipulative, mobilisation and muscle energy techniques and exercise prescription for pelvic motion dysfunction. The course consolidates traditional models of pelvic girdle assessment and treatment with current research and philosophies of management. It aims to provide a straightforward yet comprehensive approach to the wide variety of pelvic disorders that present to manual therapists. Clinical reasoning models that are traditionally osteopathic in nature will be modified and updated to complement contemporary physiotherapy practice. Sacroiliac instability will be discussed in detail in view of current research on the functional anatomy and mechanics of stability of the region.
 Tutors: Howard Turner BSc BAppSc MCSP, Hugh Jenkins BSc (Hons) MCSP. Cost: **£175** by cheque (including refreshments, certificate and extensive course manual)

PRACTICAL PODIATRIC BIOMECHANICS

April 1 to 2 – Hyde Physio Clinic, Cheshire, June 10 to 11 – Edinburgh, Sept 9 to 10 – Harrogate, Oct 8 to 9 – Windsor, Nov 5 to 6 – Worcester, Dec – Northampton (date tbc)
 Presented by the most original Podiatrist in modern years, this 2 day theoretical and practical course is based on extensive clinical experience in assessment and treatment of lower limb and gait dysfunction, as well as extensive reference to research publications. A theoretical and practical course presenting a number of pathologies with appropriate evidence-based assessment and treatment techniques. Participants completing this course will gain a greater understanding of the anatomy, biomechanics, assessment and evidence-based treatment of this interesting and complicated subject.
 Tutor: Paul Harradine MSc, Cert Ed, BSc (Hons), SRCh, Podiatrist. Cost: **£175** by cheque (including refreshments, certificate and course manual)

THE SHOULDER – THEORY AND PRACTICE

March 19 to 20 – Harrogate, May 7 to 8 – Bournemouth, May 14 to 15 – Hyde Physio Clinic, Cheshire, June 4 to 5 – Northwick Park Hospital, Middlesex June 18 to 19 – St Richards Hospital, Chichester, July 2 to 3 – Sidcup, Kent, July 16 to 17 – Lytham St Annes, Lancashire
 Probably the top evidence-based shoulder course currently available in the United Kingdom. A theoretical and practical course based on extensive clinical experience in assessment, diagnosis and rehabilitation of shoulder pathology. A wide variety of pathologies will be presented together with appropriate assessment and treatment techniques. The evidence supporting the use of the assessment and treatment procedures will also be presented.
 Tutor: Dr Jeremy Lewis PhD MAPA. MMPAA. MCSP. MMAPC. Cost: **£175** by cheque (including refreshments, certificate and extensive course manual)

SPORTS FIRST AID course

March 6 – BUPA Hospital Cardiff, April 24 – Central London, May 1 – Leicester, July 6 – Cheltenham, Sept 2 – Lilleshall National Sports Centre
 An intensive 1-day Sport and Exercise specific First Aid course, with extensive scenario based training. Health & Safety Executive 'Appointed Persons' certificate issued valid for 3 years.
 Tutor: Tony Bennison – the top First Aid trainer in the country. Cost: **£80** by cheque (including refreshments, 'Appointed Persons' certificate and course handouts)

ANTERIOR KNEE PAIN: DIFFERENTIAL DIAGNOSIS & TREATMENT

May 14 to 15 – Haywards Heath, West Sussex, Sept 10 to 11 – venue tbc, Nov 12 to 13 – Hyde Physio Clinic, Cheshire
 It is the purpose of this course to describe the common clinical conditions which present with AKP, how to ascertain their differential diagnosis and their own particular management.
 Tutor: Lee Herrington MSc, MCSP, CSCS. Cost: **£175** by cheque (including refreshments, certificate and extensive course manual)

PROPRIOCEPTION & NEUROMUSCULAR CONTROL IN EXERCISE REHAB FOR THE LOWER LIMB

April 2 to 3 – Ipswich, April 23 to 24 – Burton-on-Trent, May 14 to 15 – St Helier Hospital, Surrey, June 4 to 5 – Bournemouth, July 23 to 24 – Harrogate District Hospital
 Emphasis is placed on an evidence-based framework for the clinical application of progressive proprioceptive and neuromuscular control training for exercise rehabilitation following lower limb joint injury. Extensive reference is made to the most up-to-date published and unpublished research from the international scientific community.
 Tutor: Nicholas Clark BSc, Bed, MSc, MCSP, MMAPC, CSCS. Cost: **£175** by cheque (including refreshments, certificate and extensive course manual)

FUNCTIONAL PERFORMANCE TESTING FOLLOWING KNEE LIGAMENT INJURY

March 5 – Guernsey, April 9 – Bolton
 Reliability, validity, sensitivity, clinical data analysis, open kinetic chain testing, and pre-test screening are considered in detail with reference to the most up-to-date published and unpublished evidence from the international scientific community.
 Tutor: Nicholas Clark BSc, Bed, MSc, MCSP, MMAPC, CSCS. Cost: **£85** by cheque (including refreshments, certificate and extensive course manual)

PAEDIATRIC RESPIRATORY & MUSCULOSKELETAL MANAGEMENT

April 2 to 3 – Whittington Hospital, London, Sept 10 to 11 – Mayday Hospital, Croydon
 This exciting course focuses on 2 specific areas of Paediatric Physiotherapy – respiratory and orthopaedics. The course has 2 theme specific days, and comprises a mix of theory and practical workshops. The delegate will gain insight into the assessment, management and problem solving in this challenging client group. Practical skills will also be taught in the workshops, including CXR interpretation in respiratory and orthopaedic patients. Therapists carrying out on call duties involving children may find the respiratory component of this course particularly useful. Throughout, this course will be led in an open style, encouraging delegate participation and exchange of ideas and information.
 Tutors: Paul Ritson Grad Dip Phys MCSP & Peter Beirne Grad Dip Phys MCSP. Cost **£175** by cheque (including refreshments, certificate and course manual)

WORLD CLASS SPORTS MASSAGE

April 2 to 3 – BUPA Hospital Cardiff
 It is a largely practical course, enabling students to develop their techniques whilst being challenged to expand their knowledge of sports specific soft tissue injuries and conditions. Having completed this course, students will be in a position to enhance their delivery of soft tissue treatments to athletes and work within a wide variety of sporting environments.
 Cost: **£175** by cheque (including refreshments, certificate and course handouts)
 Tutor: Bert Appleton MA who has over 20 years experience of working with high performance individuals and groups. He qualified at the London School of Sports Massage and is a member of the Sports Massage Association. His oral and written presentation skills have been widely tested in the military and elite sport environments. He was the Elite Teams Manager and Sports Massage Practitioner for British Triathlon at the 2004 Athens Olympics and is continually testing his knowledge in challenging conditions. He has lectured and coached extensively for many organizations including the University of Bath, UK Sport and in South Africa.

1 day courses = 7 hours CPD 2 day courses = 14 hours CPD

For details on all courses and additional dates/venues not mentioned above, please contact: Health Education Seminars, 42 Richmond Rd, Poole BH14 0BU

Tel/fax 01202 568898 or email: info@heseminars.com or visit www.heseminars.com

The researchers found significant associations between pain and intensity, pain-related fear, avoidance behaviour and disability but correlations were modest. A strong association was found between pain and disability. Pain-related fear was slightly higher in patients taking bed rest and in those reporting low job satisfaction. The researchers inferred from this that the fear avoidance model might not entirely apply to acute LBP patients and future research should perhaps focus on the transition from acute to chronic LBP.

In brief

Complementary medicine must prove its worth

A new report has been prepared at the United States Institute of Medicine at the request of the National Institutes of Health and the Agency for Healthcare Research and Quality to assess what is known about Americans' alleged reliance on complementary and alternative medicine. It estimated that Americans spend in excess of \$27 billion (\$15bn) each year on treatment. It states that complementary and alternative medicines should be required to demonstrate their clinical effectiveness and safety to the same standards as conventional medical treatments. The report states that it appreciates that this is "easier said than done" due to the varying treatment approaches of practitioners and the diverse characteristics of some treatments. The chairman of the committee that drafted the report stated that "innovative methods are needed", citing observational, cohort and case-control studies as possible alternatives to RCTs to determine effectiveness. *BMJ* 2005;330.7484:166.

New developments for motor neurone disease

Scientists at the University of Wisconsin-Madison have coaxed human embryonic stem cells to develop into spinal motor neurones. It will provide researchers with the best available laboratory model to develop new drugs and test their effectiveness. The findings are described

in more detail in the journal *Nature Biotechnology*, www.nature.com/nbt/index.html. (Li X-J, Du Z-W, Zarnowska ED et al. Specification of motor neurons from human embryonic stem cells. doi:10.1038/nbt1063.

Withdrawal of Co-proxamol

Co-proxamol (a combination of paracetamol and dextro-propoxyphene, DXP), also sold under the brand names of Distalgescic, Cosalgescic and Dolgescic is to undergo a phased withdrawal from the pharmaceutical market over the next 1-2 years due to concerns about the high risk of accidental death from slight overdose. Patients commonly use Co-proxamol for mild back pain and arthritis and are advised not to take more than eight tablets in a 24-hour period. However, ingestion of as few as 10 tablets has been linked to overdose and sometimes death. The Medicines and Healthcare products Regulatory Agency (MHRA) is currently sending letters to GPs to inform them of its decision. www.timesonline.co.uk, (31-01-05).

And finally...

Good news for curry lovers

Scientists have found that curcumin, an ingredient found in most curries, stops the accumulation of beta amyloids that build up as plaques in the brains of Alzheimer's sufferers. Amyloid plaques are believed to be responsible for the memory loss which features in Alzheimer's. Research carried out at the University of California Los Angeles (UCLA) using mice found that a chemical in the yellow pigment of curcumin was able to cross the blood-brain barrier to prevent and disperse beta amyloid. The findings are reported in the *Journal of Biological Chemistry* (Yang F, Lim GP, Begum AN et al. Curcumin inhibits formation of A_β oligomers and fibrils and binds plaques and reduces amyloid in vivo. *J Biol Chem* 2004, Dec7. www.jbc.org).

Coming in the next issue:

Making sense of jargon in research.



Yellow Pages deadlines

April

Ayr, Kilmarnock & Irvine 01-04-05
 Glasgow South 01-04-05
 Glasgow North 13-04-05
 Stirling, Falkirk & Grangemouth 14-04-05
 Birmingham North 15-04-05
 Birmingham Central 19-04-05
 Wolverhampton 21-04-05
 Birmingham South 22-04-05
 London Central 28-04-05

May

Isle of Wight 06-05-05
 Peterborough 10-05-05
 Newcastle upon Tyne 13-05-05
 South West Scotland 19-05-05
 Croydon & Sutton 20-05-05
 South London 20-05-05
 Portsmouth 26-05-05
 Oxford & Banbury 27-05-05

June

High Wycombe & Aylesbury 02-06-05
 Guildford 03-06-05
 Basingstoke & Fleet 08-06-05
 Manchester South 10-06-05
 Manchester Central 15-06-05
 Colchester 17-06-05
 Ipswich 22-06-05
 West london 23-06-05
 Exeter 24-06-05
 Harrow, Uxbridge & Wembley 24-06-05

July

Chelmsford 01-07-05
 South East London 13-07-05
 Bromley & Bexley 14-07-05
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Osteopaths @ Worcester

Spinal surgery - a last resort

Richard Hughes DO, Bewdley

Mr Melvin Grainger FRCS is a consultant orthopaedic spinal surgeon working in Worcestershire and the West Midlands, and his talk on spinal surgery on 20 January was both interesting and extremely informative. Topics included: facet rhizolysis, spinal fusions, posterior lumbar interbody fusion (PLIF), total disc replacement, dynesis and spinal process distractors.

When discussing his rationale for selecting patients suitable for spinal surgery, it was interesting to note that the vast majority of candidates are chosen as a result of their detailed case histories, and perhaps only 10 per cent based on their

MRI results. Mr Grainger said, 'If you listen, the patient will tell you what's wrong.' It was reassuring to hear that, for most patients, Mr Grainger believed that spinal surgery was a last resort and was a firm believer of the need for the muscles of the back to receive regular exercise (a combination of strength and endurance work).



Sue Brazier

Once again, Sue Brazier had succeeded in an excellent choice of speaker and as ever, the whole evening was ushered along with great professionalism and humour.

For more information on forthcoming events, contact Sue Brazier on tel: 01905 831 495.

Central Sussex Osteopaths

Challenging patients

Jeremy Buck DO, Brighton & Hove

Our next meeting, on Saturday 7 May, will present osteopath **Tim Oxbrow** talking about 'Experiences and Approaches with Challenging Patients', including:

- Infant Colic, Childhood ADHD – exploring our interaction with other professions.
- Chronic low back pain and acute neck/upper extremity in the adult – exploring chronic pain versus acute problem management.
- Multi-system problems in an older patient – exploring the strengths and weaknesses of our osteopathic tool kit.

Tim graduated from the BSO in 1982. He is the principal of a 12-strong osteopathic clinic in Stowmarket,

which includes a large children's clinic and a clinic within the local GP Practice. Tim has been involved in undergraduate teaching at the BSO for nearly ten years, in Embryology & Developmental Biology, Human Form & Function and the Neuromuscular Skeletal System. He is also involved in postgraduate teaching and course design at various centres in the UK and mainland Europe, mainly covering 'integration of osteopathic skills'.

As usual, the meeting will be held at Singing Hills Golf Club, Albourne, 9.30am – 1pm, with sandwiches and a natter in the bar, at a cost of £25 per head.

Please apply to Jeremy Buck at The Drive Osteopathic Clinic, 72 The Drive, Hove, East Sussex, BN3 3PE. Tel: 01273 203820.

A healthy debate

Steve Bach DO, Norwich

The autumn 2004 programme proved a success, with a particularly good attendance at the emergency aid day. Our regular meeting featured a talk by **Martin Booth** on the benefits of setting up a limited company, especially with regard to tax. **Melvyn Jessup** presented us with a series of multiple choice papers from the American osteopathic undergraduate examinations, which proved both

challenging and surprising. The evening concluded with an open discussion on the practice of selling supplements or other merchandise to patients. What followed can best be described, as a 'full and frank exchange of views'. We all parted as friends though (I think).

For more information, call Steve Bach on tel: 01603 765 298 or email: steveost@waitrose.com.

Northern Counties Society of Osteopaths

Re-Abilitation in Leeds

Timothy Corbishley BSc Hons (Ost) PhD, Darlington

The Northern Counties Society of Osteopaths (NCSO) was very pleased to welcome **Dr Eyal Lederman** to Leeds over the weekend of 22–23 January, to share his experience with ACTIVE Re-Abilitation of musculoskeletal dysfunction. Over the weekend, Dr Lederman explained the basic principles of rehabilitation, with the emphasis on patients without nervous system damage. He had us all standing on one leg and drawing large figures in the air with the other foot: even more challenging with your eyes closed.

Although the basic principles were very familiar, Dr Lederman drew them together with the aid of his

practical experience, to make for a very useful couple of days. I put them into practice when I returned to my clinic the following day.

We must all thank our host at Leeds Metropolitan University, Mr Ray Lloyd, who kindly provided a very comfortable venue. On a more personal note, I have now been organising postgraduate meetings for the NCSO since 1998 and feel that I have done enough. I, therefore, would like to announce my decision to retire as secretary after our next meeting in March.

If anyone is willing to take up the baton, please contact Tim Corbishley on tel: 01325 466 022.

Essex Osteopaths

Pain management

Tim Oxbrow has agreed to come to Essex Osteopaths to talk about pain management on **19 April 2005**, at Broomfield Hospital Academic Unit, Chelmsford, at 7.30pm. As you may be aware, Tim has spoken

successfully at many groups around the country and his expertise and knowledge in this field have made him a speaker one cannot afford to miss.

For details please contact: Anne Gibbons, Rochford Road Clinic on tel: 01245 283626.



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London Osteopathic Society

Working in the NHS

Tony Longaretti DO, London

For many people, the lasting impression they have of the NHS is embodied in the image of Matron Hattie Jacques in the Carry On films. Today's NHS is a very different organisation, as attendees learnt at the London Osteopathic Society's (LOS) meeting on Tuesday 18 January.

The speaker was committee member and osteopath **Martin Pendry** (pictured), who offered some insight into working within the NHS. This is an organisation that is both complex and constantly changing. With the osteopathic profession growing at the rate of 7.5% per year and with many members interested in working within the M25 boundary, a post within the health service may seem highly desirable. Opportunities for osteopaths exist within the NHS but we usually do not read the publications in which they are advertised, and engagement as a sessional osteopath is becoming less common. Those seeking payroll employment should understand the structure of the unit they are hoping to join and the criteria which must be met.

Martin's lecture touched on this and the two questions you are most likely to be asked: "How can you be so precise about your diagnosis?" and "What is cranial osteopathy?". With private referrals, the referring practitioner is likely to ask about the philosophy of the practice, clear guidance on the referral criteria, and practice statistics e.g. patient age range, conditions treated, average number of appointments required etc. As a regulated profession we are in a position to educate other professions.



Martin was preceded by **Professor Larry Goodyer**, Head of Leicester School of Pharmacy, whose talk concentrated on how drugs work, why they may have unwanted side-effects, and how these adverse reactions might affect the musculoskeletal system. All drugs are, in essence, poisons and it is part of the pharmacist's job to overcome the body's natural resistance towards them. The talk concentrated on the action on cell membrane receptors and on enzyme blocking activity (inhibition of cell transport mechanisms and counteracting invading organisms were both ignored for the purposes of the talk). When discussing opioids it was noted that codeine is equivalent to morphine in effect. Unfortunately, the opioid which relieves pain also causes the side-effects of nausea, constipation, respiratory depression and dependence. However, with a carefully titrated dose, the patient could become tolerant of the side-effects but not of the analgesic benefits. The reason the terminally ill patient requires more of the drug is not due to tolerance but because the pain is worsening.

The mode of action of NSAIDs and unwanted side-effects on the stomach were also illustrated, followed by a discussion on adverse drug reactions (ADR) and contraindications. Apparently, the Government would like to include NHS Direct in addition to the yellow card method for ADR reporting.

Both MS PowerPoint presentations are available to members on our website – www.zyworld.com/los.

New societies off to a great start

Robert Simmons BSc (Ost) DO, Shepperton

We have had a surprisingly successful response following the inaugural meetings of both the Surrey and Hampshire Osteopathic Societies and, due to the commitment and enthusiasm of the members present, we have great things to look forward to. Obviously, CPD is at the top of our agenda and I hope, in time, to introduce other important subjects such as greater communication

and transference of ideas and opinions to GOsC; ways of improving the working environment for the osteopath e.g. pensions, maternity leave, insurance, cheaper start-up loans and other specialist areas such as computers, accounting and research etc.

For more information, or if you would like to get involved, call Robert Simmons on tel: 01932 770601.

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14/01/2005 Friday

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09:30	Mrs P. Welfley	
10:00	Mr J. Cronshaw	
10:30	Mr A. Heath	
11:00	Mr M. Underwood	
11:30	Mr B. Viana	
12:00	Mrs P. Viana	
12:30	Mr G. Vianozzini	
13:00	Mrs F. Harabowala	
13:30		
14:00	Mr S. Aggar	
14:30		
15:00		
15:30		
16:00	Mrs M. Allen	
16:30	Mr A. Thomas (FULL ASSESS)	
17:00		
18:00	Mrs B. Alton	
18:30	Mr R. Watson	
19:00	Mr G. Depla	
19:30	Mr O. Kozubik	

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South Wales Osteopathic Society (SWOS)

Moving forward

Brian McKenna BSc (Hons) Ost, Cardiff

2004 saw some big changes, with the society venturing into new areas. We were keen to be more than just a provider of CPD. We wanted to help promote the profession and support local osteopaths and their businesses. That's why the society has invested in IT equipment, including a laptop computer, that members can hire for a one-off charge of £10. It can be used to design practice leaflets and stationery and for talking to groups using MS PowerPoint presentations.



Brian McKenna

We set up the SWOS web site at www.osteopathywales.com to promote the profession and keep members informed of upcoming events. It has a searchable database of the members who contributed to its construction, information for the public and shortly, we will be launching an email discussion group for osteopaths, which we hope to link to the website. We also established a group advertising scheme, where 18 local osteopaths clubbed together to purchase advertising space in a Welsh national Sunday paper, including an 0870 number for the public to call for referral to their local osteopath.

We have initiated a mentor network for newly qualified osteopaths moving to the area and a register of special interests to aid inter-referral, as well as the usual round of CPD events.

Forthcoming meetings in 2005

The Immunological Basis for Osteopathic Practice

Taj Deoora MSc, DO (Hons), Dip Phyt. is coming to speak

to us about immunology relevant to the practice of osteopathy. She will also be presenting her ground-breaking research into the efficacy of osteopathy on neonatal lung infections compared to standard antibiotic care. Taj has worked for many years at the Osteopathic Centre for Children, at Barnet General Hospital neonatal department. She lectures on immunology for the Diploma in

Paediatric Osteopathy (DPO) course and on the Sutherland Cranial College paediatrics courses. **Saturday 2 April 2005, 11am – 2pm, Future Inn Hotel, Cardiff Bay, tel: 029 2048 7111, www.futureinns.com.**

Clinical audit

Professor Ann Moore PhD GradDip Phys, FCSP, CertEd, MMACP Director of Clinical Research for Health Professionals, University of Brighton and Director of the National Council for Osteopathic Research (NCOR), will be lecturing on clinical audit. This is of the utmost importance for all primary contact practitioners especially if you intend to interface in any way with the NHS. **Saturday 7 May 2005, 11am – 2pm, Future Inn Hotel, Cardiff Bay, tel: 029 20487111, www.futureinns.com.**

For more information or to book a place, call

Brian McKenna on tel: 07905 602335 or email:

info@osteopathywales.com.



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April

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Sutton Coldfield	08-04-05
Burnley	08-04-05
Cardiff	15-04-05
Hendon	15-04-05
Huddersfield	15-04-05
Watford	15-04-05
Birmingham Central	22-04-05
Tameside	22-04-05
Telford	22-04-05
Torbay	22-04-05
Isle Of Wight	29-04-05
Oxford	29-04-05
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May

Basingstoke	06-05-05
Colchester	06-05-05
Macclesfield	06-05-05
Milton Keynes	06-05-05
Wisbech	06-05-05
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Newcastle	20-05-05
Swansea	20-05-05
Canterbury	27-05-05
Sheffield	27-05-05
Tunbridge Wells	27-05-05

June

Ipswich	03-06-05
Weston-Super-Mare	10-06-05
York	10-06-05
Crewe	10-06-05
Eastbourne	17-06-05
Glasgow East	17-06-05
Glasgow North	17-06-05
Glasgow South	17-06-05
Glasgow West	17-06-05
Enfield	24-06-05
Hertford	24-06-05
New Forest	24-06-05
Peterborough	24-06-05
Southport	24-06-05

July

Bolton	01-07-05
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Slough	01-07-05
Aylesbury	08-07-05
Burton	08-07-05
Doncaster	08-07-05
Sandwell	08-07-05
Barnsley	15-07-05
Bridgend	15-07-05
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Recruitment of Editor

The **International Journal of Osteopathic Medicine**, published by Elsevier, is set to become one of the major international journals in the field of osteopathic medicine. It is now published in four issues, both paper based and online on the ScienceDirect platform.

We are looking to appoint a third editor, preferably based in the UK, to join the existing editors to broaden the internationality of the journal. This is an exciting opportunity to join the Editorial team to take the journal forward in the next stage of its development. This is a challenging role which will include handling manuscripts electronically through the peer review process, working to deadlines, offering strategic leadership to the Journal Board and Editorial colleagues and marketing the journal in a range of forums both nationally and internationally. The role will also include the active commissioning of copy and promoting the profile of osteopathic research in the osteopathic field and related health professions.

In the first instance please send an expression of interest to Melanie Tait, Senior Publishing Editor, by 15 April 2005. Please send supporting documentation of a curriculum vitae, together with a paper identifying how candidates would develop IJOM and clarify its focus for the next decade (no more than 1500 words) by **10 May 2005**. These should be sent by email to Melanie Tait at m.tait@elsevier.com.

Further information about the role and responsibilities is available from the same source.

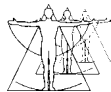
Recruitment of Editorial Board

IJOM is also looking to appoint international representatives to the Editorial Board. The Editorial Board members play an active role in the editorial development of the journal. They will also be expected to review papers, write for and encourage submissions to the journal, and raise the profile of the Journal internationally.

Please write with a copy of your curriculum vitae and a covering letter supporting your application to Melanie Tait, Senior Publishing Editor, by **13 May 2005**.

Elsevier offer a package of benefits to Editorial Board members.

www.intl.elsevierhealth.com/journals/ijos



CPDO

programme 2005

By popular demand additional dates:

9-10 April / IOT I: Lumbar & thoracic spine and ribs / Prof. Laurie Hartman / £185.00 / deposit £125.00

31 March / How to treat: Chronic trapezius myalgia / Prof Eyal Lederman / £35.00 (evening course)

26 May / How to treat: Frozen shoulder / £35.00 (evening course)

New workshop	<p>Post-op care of patients Prof. Eyal Lederman DO PhD One-day theoretical and practical workshop. How to treat patients after common joint surgery (LB, hips, knees and shoulders).</p>	<p>Saturday, 9 April 05, 9.30-17.00 Cost: £105.00 CPD hours: 7</p>
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	Date	Title	Tutor / lecturer	Cost	Deposit	CPD hours	Student * cost
Weekend courses	9-10 April	IOT I: Lumbar & thoracic spine and ribs.	Laurie Hartman	£185.00	£125.00	14	-
	7-8 May	IOT II: Cervical spine, CD and UEX	Laurie Hartman	£185.00	£125.00	14	-
	24-25 Sept	IOT III: SI joints, pelvis and LEX	Laurie Hartman	£185.00	£125.00	14	-
	26-27 Nov	IOT IV: Developing and advancing osteopathic technique	Laurie Hartman	£185.00	£125.00	14	-
	30 Sept-2 Oct	The Pelvis & Genito-Urinary System	Jean-Pierre Barral	£385.00	£235.00 Remaining £150.00 by 1 Sep 05	21	-
	29-30 Oct & 19-20 Nov	Osteopathic care in pregnancy & optimal fetal positioning (part I & II)	Averille Morgan	£375.00	£200.00	28	-
	9 July	Understanding infant language	Cherry Bond	£95.00	£95.00	7	£50.00
	14-15 May & 25-26 June	Osteopathic neuromuscular "re-abilitation" (Part I & II)	Eyal Lederman	£365.00	£200.00	28	£145.00
	8-9 Oct & 12-13 Nov	Harmonic Technique (part I & II)	Eyal Lederman	£365.00	£200.00	28	£145.00
	21 May	Visceral osteopathy: the abdomen	Phil Austin	£95.00	£95.00	7	£50.00
Evening courses	3-4 Dec	Visceral osteopathy: The thorax and three diaphragms	Franz Buset	£175.00	£125.00	14	-
	18-19 June+ 10-11 Sept	Osteopathic care of small animals (part I & II)	Anthony Pusey	£365.00	£235.00	28	-
	2 July	From treatment to exercise	Matthew Walden	£95.00	£95.00	7	£50.00
	23 June	How to treat: Acute disc	Eyal Lederman	£35.00		3	£15.00
	24 Nov	How to treat: Whiplash injuries	Eyal Lederman	£35.00		3	£15.00
	5 May	SOT II: Thoracic spine and ribs	David Tatton	£35.00		3	£15.00
	6 Oct	SOT III: Upper extremity & upper cervical spine	David Tatton	£35.00		3	£15.00
	10 Nov	SOT IV: Lower back and pelvis	David Tatton	£35.00		3	£15.00
	10 March	Technique – the female perspective: upper body	Fiona Walsh	£35.00		3	£15.00
	27 Oct	Technique – the female perspective: lower body	Fiona Walsh	£35.00		3	£15.00
Evening lectures	3 Nov	Pathway to better health	Stuart Robertson	£35.00		3	£15.00
	12 & 19 May	Chapman's Reflexes	Phil Austin	£70.00		6	£50.00
	12 May	Clinical nutrition: Introduction to human nutrition - relevance to manual therapy disciplines	Adam Cunliffe	£20.00		2	£10.00
	19 May	Clinical nutrition: Overweight and Obesity	Adam Cunliffe	£20.00		2	£10.00
	20 Oct	Clinical nutrition: The uses and misuses of supplements	Adam Cunliffe	£20.00		2	£10.00
	17 Nov	Clinical nutrition: Sports Nutrition	Adam Cunliffe	£20.00		2	£10.00
	10 March	Medicolegal reporting	Paul Grant	£20.00		2	£10.00
	16 June	Medicolegal aspects of clinical practice	Paul Grant	£20.00		2	£10.00
	27 Oct	Medicolegal: Being an expert witness	Paul Grant	£20.00		2	£10.00

All workshops are held at Middlesex University, Archway Campus, London N19

Name:

Address:

Telephone:

E-mail:

Total deposit enclosed: _____ All deposits and payments are non-refundable and non-transferable to other dates.

Details of the venue, starting times and a copy of the programme will be sent to you with confirmation of your booking. In case of cancellation of courses or lectures all deposits will be refunded. The course organisers reserve the right to change the course contents and substitute leaders without advance notice. The organisers hold no responsibility for the contents and clinical application of the material taught on the courses

All cheques should be made to CPDO Ltd. and sent to the office address:

CPDO Ltd. 15 Harberton Road, London N19 3JS, UK

Tel: 0207 263 8551 / e-mail: cpd@cpdo.net / www.cpdo.net

Communicating with disabled patients

Melina Harrison BSc (Hons) Ost, Reading

When is the right time to offer a blind patient assistance? What if they have a guide dog – do they still need you to assist? Where does the dog go when you treat? Do you offer a deaf patient a pen and paper to help them communicate?

How about a patient in a wheelchair? Have you ever found yourself addressing the person pushing the wheelchair instead of the patient in it? Do you kneel down to the level of the person in the chair or remain standing? Thanks to a brilliant course I attended last month, I know the answers to these questions now.

The half-day course is run by presenters **Stacey Stockwell** and **Caroline Wenhold** from Total Communication (TC) Training. They have a 'real life' perspective on disability. Stacey is an excellent presenter, able to get across this serious message that is, at the same time, punctuated with stories that will have you laughing in the aisles. Co-presenter Caroline, an Olympic gold medallist swimmer, is herself deaf.

TC Training provides disability awareness for professionals and staff who deal with members of the public. As you are no doubt aware, the Disability Discrimination Act (DDA) requires all companies, services and organisations – corporate, private and Government-owned – to ensure that disabled people have the same access to goods, services and premises as able-bodied people. Major amendments to this Act came into force on 1 October 2004, requiring all organisations, regardless of size and premises, to show they are making reasonable adjustments to comply with the Act. An important and positive step towards this is to receive training on how better to communicate and interact with disabled people.

All the delegates on my course, which included dentists, university lecturers, vets and many local business owners, admitted to various worries about communication with disabled people. Most of us can identify with at least one of the following concerns:

- Embarrassing ourselves by trying and failing.
- Not knowing how to communicate.
- Worrying about getting it wrong and offending the disabled person.

- Saying the wrong thing e.g. "Did you see that?" to a blind person.
- Not having enough time to make the effort

The course helped to address the trepidation that so many of us feel when faced with someone who is different



The TC training team

to us – why we feel this way and how to overcome this. The course opened my eyes to the 'real lives' of people with disabilities, not just my legal obligations, – but what it must be like for a wheelchair user to go to a friend's wedding and not be able to get into the church or attend the country club reception.

We have all been told that a high percentage of problems that are investigated by the GOsc Fitness to Practise committees need not have happened if communication between patient and osteopath had been better. The course taught me that handing a pen and paper to a deaf person, for example, could be the wrong thing to do.

So, even if all your doorways are not 80 cm wide to fit the average wheelchair, going on a course like this shows you are taking the DDA seriously and are committed to providing an equal service to all of your patients.

Before I left, I booked my receptionist on the next course. I wanted her too to have the confidence to communicate with disabled patients in a relaxed, friendly and effective way. After all, she is the front line of my clinic.

Caroline has since become a patient of mine and I am proud to say that she has attended all her appointments alone (leaving her interpreter at home). She understands that she is suffering from brachial neuritis perfectly well and as you would expect from any international athlete, she is playing a very active role in her own recovery.

TC Training run courses throughout the UK, training just about anyone who is committed to providing an equal service to all of their customers. They can run courses on your site at a time that suits you. I can't recommend them highly enough and the confidence their course gave me will go far beyond my work life.

For more information, TC Training can be contacted on tel: 01189 547 222, email: info@tctraining.net, www.tctraining.net.

Osteopathic Neuromuscular Re-abilitation

Towards a new discipline in osteopathy

Prof. Eyal Lederman DO, PhD

Find out how to treat the neuromuscular system after common joint and muscle injuries

Find out how to treat patients after surgery (hip, shoulder, lower back and more)

Find out how to treat conditions caused by emotional stress (painful jaw, trapezius myalgia, suboccipital pain, tension headaches and lower back pain)

Find out how to treat patients with central nervous system damage (stroke, MS, head injuries)

Find out how to test for motor and sensory changes in these conditions and how to treat them effectively.

Osteopathic Neuromuscular Re-abilitation was originally developed at the British School of Osteopathy by Prof. Eyal Lederman as part of a collaborative research with King' College, Physiotherapy Department. It was observed that the neuromuscular system is well buffered against external influences and will only change and adapt in response to specific signals. This research has led to the development of a new and highly effective osteopathic approach that can be used to influence the neuromuscular system.

This two-weekend course is both theoretical and practical. Based on his own and current neuromuscular research, Eyal will discuss the functional organisation of the motor system, how it is affected in different conditions and how Osteopathic Neuromuscular Re-abilitation can be used to re-abilitate movement dysfunction. The practical part of the workshop will develop these ideas into working clinical approaches, tests and techniques.

Prof. Eyal Lederman graduated from the British School of Osteopathy and is working as an osteopath in London. He completed his PhD. at King's College, where he researched the neurophysiology of manual therapy. He also researched and developed osteopathic Harmonic Technique. He is involved in research examining the physiological effects of manual therapy and the development of Osteopathic Neuromuscular Re-abilitation.

Prof. Lederman has been teaching osteopathic technique and the physiological basis of manual therapy at the British School of Osteopathy and is a guest lecturer in different schools in the UK and abroad. He has published articles in the area of osteopathy and is the author of the books "Harmonic Technique", "Fundamentals of Manual Therapy" and "The Science and Practice of Manual Therapy".

Dates: 14-15 May & 25-26 June 05 (two weekends)
Total CPD hours - 28

Cost: £365.00 / Students: £150.00
(Groups of five students or more: £115.00 each)

Venue: Middlesex University, Archway Campus, (North)
London N19

To book a place please send a non-refundable deposit of
£200.00, made to:
CPDO Ltd., 15 Harberton Road, London N19 3JS, U.K.



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A selection of illustrated reference works for the osteopathic bookshelf



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Principles of Neuromusculoskeletal Treatment and Management
A guide for therapists
Nicola J Petty with a contribution by Ann P. Moore
Published by Churchill Livingstone
ISBN 0-443-07062-8
£27.99, 368 pages

Written by the authors of the highly successful textbook *Neuromusculoskeletal Examination and Assessment*, this new book provides the ideal sequel and companion to that text. It introduces students and clinicians with little or no experience of managing patients with neuromusculoskeletal disorders to the various treatment and management principles that they may consider with their patients.



Hand Rehabilitation
A Quick Reference Guide and Review
(2nd Edition)
Weiss Falkenstein
Published by Elsevier Masby
ISBN 0-323-0210-9
£36.99, 484 pages

This one-of-a-kind review guide provides a comprehensive, easy-to-follow overview of hand rehabilitation. Multiple-choice questions with detailed answers provide practice and reference for the essentials of hand rehabilitation, and perforated, detachable practice questions at the end of the book are great for review anywhere. You'll also appreciate the Clinical Gems in each chapter, which provide helpful hints and important facts to remember about key topics or questions.



Clinical Examination of the Shoulder
Todd S Ellenbecker
Published by Elsevier Saunders
ISBN 0-7216-9807-7
£33.99, 210 pages

With practical, clinically focused, and highly illustrated content, this innovative reference is the first text devoted solely to the musculoskeletal examination of the shoulder joint. In addition to instability, impingement, labral, rotator cuff and biceps tests, you also get strength testing, subject rating scales, and a complete analysis of sports techniques. No other book has more clinical shoulder assessment tests.



Acupuncture, Trigger Points and Musculoskeletal Pain
Peter Baldry
Published by Churchill Livingstone
ISBN 0-443-06644-2
£51.00, 367 pages

The third edition of this highly successful book describes how musculoskeletal pain can be simply and effectively treated by acupuncture. It gives a comprehensive account of current knowledge concerning two very commonly occurring musculoskeletal pain disorders – the myofascial trigger point pain syndrome and the fibromyalgia syndrome.



Obstetric Ultrasound
How, why and when
Third Edition
Edited by Trish Chudleigh
Basky Thilaganathan
Published by Churchill Livingstone
ISBN 0-443-05471-1
£35.99, 264 pages

A highly illustrated manual that serves as a step-by-step guide for those new to obstetric, gynaecological and infertility ultrasound as well as a source of reference for the more experienced sonographer. The text aims to improve the knowledge of the sonographer and the clinician involved in the care of the pregnant woman or of the gynaecological patient.



Beat back pain
Find your way to ease the strain
Dr Ruth Chambers
Published by Infinite Ideas
ISBN 1-904902-14-6
£12.99, 240 pages

Back problems can make life real misery. In *Beat back pain* Dr Ruth Chambers unveils 52 brilliant ideas to help sufferers overcome their agony. Ruth understands the issues at hand. She deals with back injuries every day and knows that beating pain doesn't mean just filling out a prescription to disguise the symptoms. She draws on her invaluable knowledge to help people overcome the pain and get on with a normal, active life.



SPRING POSTGRADUATE EVENTS

OSTEOPATHIC LYMPHATIC TREATMENT (OLT)



Dr Bruno Chikly M.D., D.O (Hons)

SATURDAY 9 AND SUNDAY 10 APRIL 2005

This post-graduate course will present the latest status on the physiology, function and dysfunction of the lymphatic system, and how to manage it diagnostically and therapeutically. It will draw on the tradition of Still, Millard, Sutherland and Zink, as well as newer developments in lymphatic dysfunction mapping and osteopathic manipulative management. The lecture will start by giving a brief history of techniques applied to the lymphatic system, and then go on to describe the basic anatomy, physiology and pathology of the lymphatic system and its comparison to the blood vascular system. Further objectives are to explain the organisation of the lymphatic system and discuss the main indications and contra-indications to OLT. Mapping, palpations and directions of lymph flow will be demonstrated as well as lympho - fascial release and drainage techniques of the lobes of the liver, the spleen, the trachea, the bronchi, the lobes of the lungs, the pleura, gums, teeth, TMJ and Eustachian tubes.

Dr Chikly is a medical doctor with extensive training in osteopathic techniques and other hands-on modalities. He has researched and published in 2001 a book on the lymphatic system "Silent Waves – Theory and Practice of Manual Lymph Drainage". He is a well-known international lecturer and lives in Scottsdale, Arizona.

Reviews from other courses held by Dr Chikly have been excellent.

UNLOCKING THE CRANIAL MECHANISM



Dr Kenneth J Lossing D.O. (USA)

SATURDAY 14 AND SUNDAY 15 MAY 2005

Dr Lossing will present a post-graduate course based on the principles originating with Dr Robert Fullord, D.O. (among others). "Unlocking" the mechanism is a process where you diagnose and treat "shock" in the membranes, the cranial sutures, nerve plexuses (nervous system) and various spinal regions, using a variety of osteopathic techniques and procedures.

Dr Lossing gave a well attended workshop at the ESO 4th International Conference in June 2004 with excellent reviews from the attendees, and we are confident that he will present a clinically valuable and entertaining course. Dr Lossing is an experienced lecturer, a graduate of the Kirksville College of Osteopathic Medicine and part of the Educational Committee and a CPD Lecturer for the American Academy of Osteopathy.

EACH DELEGATE WILL RECEIVE A CERTIFICATE OF 12 HRS TOWARDS CPD.

For more information and a registration form, please contact Corinne Jones, International and Postgraduate Manager at:

European School of Osteopathy, Boxley House, The Street, Boxley near Maidstone, Kent ME14 3DZ

Tel: 01622 671 558 Fax: 01622 662 165 Email: corinnejones@eso.ac.uk

Back chat

Your letters



Dear Editor

The UK BEAM trial is a good quality research project. It is conducted by experienced researchers who have the knowledge and skill to organise a large scale trial and obtain the millions of pounds of funding it requires. The trial is a design that takes into account many potential biases and complicated variables that may exist. It demonstrates the efficiency and cost-effectiveness of spinal manipulation in the treatment of back pain, and may be the first step to the provision of spinal manipulation on the NHS.

However, the BEAM trial is not a trial of osteopathy. The trial may provide some publicity for osteopathy and the other 'spinal manipulation' professions, but it is research conducted for the NHS about the cost-effectiveness of spinal manipulation. It has little clinical relevance to osteopathy and I am surprised it has received so much attention in the osteopathic press.

There has always been a tendency for the medical profession to see complete homogeneity in complementary medicine, rather than viewing each discipline as a separate and distinct entity with its own philosophies and principles. The publication of the BEAM trial will have reinforced the specious conclusion of many medics that osteopathy, chiropractic and physiotherapy are, in essence, the same 'therapy'.

I am also anxious that the BEAM 'package' of treatment may lead to the development of practice guidelines for osteopaths, chiropractors and physiotherapists for the treatment of back pain. I appreciate the BEAM trial has standardised treatment for the purposes of this study, but this conveys an impression that there is one diagnosis of 'back pain' and its corresponding treatment of 'spinal manipulation'. This gross over-simplification of three highly sophisticated systems, each with their own specialist diagnosis and management, could be easily misinterpreted. Will insurance companies or GPs only approve osteopaths who treat back pain according to the BEAM standardised treatment package?

I believe that research is essential to understanding more about osteopathy. I hope that the UK BEAM team

will publish further papers comparing diagnoses, techniques, aetiology and outcomes between the osteopaths, chiropractors and physiotherapists. This will provide each of the professions with useful clinical information about patients with back pain, and may reveal significant philosophical, conceptual and technical differences that distinguish our professions. This kind of practical information might even enable us to evolve a definition of osteopathy that is better than the one being used with increasing frequency – 'indistinguishable from chiropractic and physiotherapy'.

Andrew Maddick BSc DPO MRes, Hampshire



Dear Editor

I think it is great that the GOsC is advertising to the medical profession, as with the advert in the latest edition of *GMC news*.

But if they are going to quote papers, it is essential that they get it right - or we will lose credibility!

The UK BEAM trial quoted did not show the effectiveness of spinal manipulation added to GP care as being most effective, but spinal manipulation plus exercise being superior to standard GP care.

Richard Gribble MB MRCP DMSMed FRCOM, Dorset

Editor replies:

A GOsC advertisement in the February issue of GMC News, stated that the 'UK BEAM trial found that spinal manipulation, added to GP care is clinically effective and the most cost-efficient option for patients in the UK.' It did not claim to 'show the effectiveness of spinal manipulation added to GP care as being most effective'.

The message to the GP target audience focused on the cost benefits of spinal manipulation. Ian Russell, Professor of Public Health & Director of the Institute of Medical and Social Care Research, University of Wales Bangor, and a lead researcher in the trial team said, "Though the average benefit to patients was only moderate in size, back pain is so widespread and so costly to society that these benefits add up to substantial economic benefits across the UK. Our analysis also showed that the cost to the NHS was modest. Added to GP 'best care', spinal manipulation gives the best value for money."

Courses 2005

Courses are listed for general information. This does not imply approval or accreditation by the GOsC.

Module 6: Understanding the Dynamic Basicranium-

A three day residential course

18-19 March

Speaker Liz Hayden. To be held at Newport Towers, Newport, Near Berkeley, Gloucestershire. Contact: Tel: 01291 689908, email: admin@scc-osteopathy.org.uk

Introduction to Visceral Osteopathy

19 March

Speaker Phil Austin. Organised by Osteopathic Professional Education North Ltd. To be held at Leeds Metropolitan University. Contact: tel: 01423 523366, email: mail@open-ed.co.uk (website: www.open-ed.co.uk)

How to Treat Frozen Shoulder

7 April

Speaker Dr Eyal Lederman. Organised by the Centre for Professional Development of Osteopathy and Manual Therapy. To be held in London. Contact: tel: 020 7263 8551, email: cpd@cpdo.net (website: www.cpdo.net)

Module 2/3 : Osteopathy in the Cranial Field – A five-day residential course

7-11 April

To be held at the Oxley Hall University of Leeds. Contact: tel: 01291 689908, email: admin@scc-osteopathy.co.uk

Introduction to Paediatric Osteopathy Seminar/Open Day at Osteopathic Centre for Children

12 April

Speakers Stuart Korth, Gabriella Conlangelo and Kathryn Elliot. To be held in Manchester. Contact: tel: 0161 277 9911 Osteopathic Centre for Children, Manchester.

Osteopathic Approaches in Pregnancy

16 April

Speaker Averille Morgan. Organised by Osteopathic Professional Education North Ltd. To be held at Leeds Metropolitan University. Contact: tel: 01423 523366, email: mail@open-ed.co.uk (website: www.open-ed.co.uk)

Cranio-sacral Therapy Introductory Day

16 April

Speaker Thomas Attlee. Organised by the College of Cranio-Sacral Therapy (CCST). To be held in London. Contact CCST on tel: 020 7483 0120, email: info@ccst.co.uk (website: www.ccst.co.uk)

Some New Thinking about Manual Techniques

30 April

Speaker Laurie Hartman. Organised by Osteopathic Professional Education North Ltd. To be held at Leeds Metropolitan University. Contact: tel: 01423 523366, email: mail@open-ed.co.uk (website: www.open-ed.co.uk)

Structural Osteopathic Technique (Part II): Thoracic Spine and Ribs

5 May

Speaker David Tatton. Organised by the Centre for Professional Development of Osteopathy and Manual Therapy. To be held in London. Contact: tel: 020 7263 8551, email: cpd@cpdo.net (website: www.cpdo.net)

Appointed Persons' First Aid Course

7 May

Organised by Osteopathic Professional Education North Ltd. To be held at Leeds Metropolitan University. Contact: tel: 01423 523366, email: mail@open-ed.co.uk (website: www.open-ed.co.uk)

Integrative Osteopathic Technique: Cervical Spine, CD and UEX

7-8 May

Speaker Professor Laurie Hartman. Organised by the Centre for Professional Development of Osteopathy and Manual Therapy. To be held in London. Contact: tel: 020 7263 8551, email: cpd@cpdo.net (website: www.cpdo.net)

Craniosacral Therapy Introductory Weekend

7-8 May

Speaker Michael Kern. Organised by the Craniosacral Therapy Educational Trust. To be held at the Yoga Therapy Centre, 90-92 Pentonville Road, London N1. Contact: tel: 07000 785778, email: info@cranio.co.uk (website: www.cranio.co.uk)

Chapman's Reflexes

12 May

Speaker Phil Austin. Organised by the Centre for Professional Development of Osteopathy and Manual Therapy. To be held in London. Contact: tel: 020 7263 8551, email: cpd@cpdo.net (website: www.cpdo.net)

Clinical Nutrition: Introduction to Human Nutrition – Relevance to Manual Therapy Disciplines

12 May

Speaker Dr Adam Cunliffe. Organised by the Centre for Professional Development of Osteopathy and Manual Therapy. To be held in London. Contact: tel: 020 7263 8551, email: cpd@cpdo.net (website: www.cpdo.net)

Osteopathic Neuromuscular "Re-abilitation" (Part I)

14-15 May

Speaker Dr. Eyal Lederman. Organised by the Centre for Professional Development of Osteopathy and Manual Therapy. To be held in London. Contact: tel: 020 7263 8551, email: cpd@cpdo.net (website: www.cpdo.net)

Integrated Health : Coming of age**17–18 May**

Organised by the Royal Society of Medicine. To be held at the Royal Society of Medicine, 1 Wimpole Street, London.
Contact: website : www.rsm.ac.uk/academ/810-integ.htm

Chapman's Reflexes**19 May**

Speaker Phil Austin. Organised by the Centre for Professional Development of Osteopathy and Manual Therapy. To be held in London.

Contact: tel: 020 7263 8551,
email: cpd@cpdo.net (website: www.cpdo.net)

Clinical Nutrition – Overweight and Obesity**19 May**

Speaker Dr Adam Cunliffe. Organised by the Centre for Professional Development of Osteopathy and Manual Therapy. To be held in London.

Contact: tel: 020 7263 8551,
email: cpd@cpdo.net (website: www.cpdo.net)

Visceral Osteopathy: The Abdomen**21 May**

Speaker Laurence Beckwith. Organised by the Centre for Professional Development of Osteopathy and Manual Therapy. To be held in London.

Contact: tel: 020 7263 8551,
email: cpd@cpdo.net (website: www.cpdo.net)

Module 4 : WG Sutherland's Osteopathic Approach to the Body as a Whole – A four-day residential course**26–30 May**

Course director Susan Turner. To be held at Hawkwood College, Stroud, Gloucestershire.

Contact: tel: 01291 689908,
email: admin@scc-osteopathy.co.uk

Breath of Life Conference**28–29 May**

Speakers Gerda Boysen, Mike Boxhall, H.H. the 12th Gyalwant Drukpa, Hugh Milne, Dr Marshal Rosenberg, Babette Rothschild and Dr Michael Shea. Organised by the Craniosacral Therapy Educational Trust. To be held at Russell Square, London WC1. Contact: Conference Administrator, 153 Upper Westwood, Bradford on Avon, Wiltshire, BA15 2DN, email: info@conference2005.co.uk (website: www.conference2005.co.uk)

Empathy In Practice : Maximising the Benefits, Minimising the Risks**30 – 31 May**

Speaker Babette Rothschild. Organised by Breath of Life Conference. To be held at Russell Square, London WC1.
Contact: Conference Administrator, 153 Upper Westwood, Bradford on Avon, Wiltshire, BA15 2DN,

email: info@conference2005.co.uk
(website: www.conference2005.co.uk)

Primary Respiration and the Midline Advanced Training for Craniosacral Practitioners**2–5 June**

Speaker Dr Michael Shea PhD Organised by the Craniosacral Therapy Educational Trust. To be held at the Yoga Therapy Centre, 90 – 92 Pentonville Road, London N1.

Contact tel: 07000 785777, email: info@cranio.co.uk
(website: www.cranio.co.uk)

Medicolegal Aspects of Clinical Practice**16 June**

Speaker Paul Grant. Organised by the Centre for Professional Development of Osteopathy and Manual Therapy. To be held in London. Contact tel: 020 7263 8551, email: cpd@cpdo.net (website: www.cpdo.net)

Osteopathic Care of Small Animals (Part I)**18–19 June**

Speaker Anthony Pusey. Organised by the Centre for Professional Development of Osteopathy and Manual Therapy. To be held in London. Contact: tel 020 7263 8551, email: cpd@cpdo.net (website: www.cpdo.net)

How to Treat Acute Disc**23 June**

Speaker Dr Eyal Lederman. Organised by the Centre for Professional Development of Osteopathy and Manual Therapy. To be held in London. Contact: tel 020 7263 8551, email: cpd@cpdo.net (website: www.cpdo.net)

Osteopathic Neuromuscular "Re-abilitation" (Part II)**25–26 June**

Speaker Dr Eyal Lederman. Organised by the Centre for Professional Development of Osteopathy and Manual Therapy. To be held in London. Contact: tel 020 7263 8551, email: cpd@cpdo.net (website: www.cpdo.net)

Diversity and Debate in Alternative and Complementary Medicine : An academic & experimental conference for researchers & practitioners**29 June–1 July**

Organised by Alternative & Complementary Health Research Network. To be held at Nottingham University.

Contact: email: Christine.barry@brunel.ac.uk

Cranio-sacral Therapy Introductory Day**2 July**

Speaker Thomas Attlee. Organised by the College of Cranio-Sacral Therapy (CCST). To be held in London.

Contact CCST on tel: 020 7483 0120,
email: info@ccst.co.uk (website: www.ccst.co.uk)

From Treatment to Exercise**2 July**

Speaker Matthew Walden and Andrew Jackson. Organised by the Centre for Professional Development of Osteopathy and Manual Therapy. To be held in London.

Contact: tel 020 7263 8551, email: cpd@cpdo.net
(website: www.cpdo.net)

Classifieds

RECRUITMENT

LOCUM REQUIRED FOR MATERNITY COVER, with a potential for associateship at end of contract if desired. Applicants should have a good spread of techniques including some experience in cranial. 2 to 2.5 days a week from mid March to July/August 2005. Please send CV's to Mark Piraino c/o The Westway Clinic, Somers House, Linkfield Corner, Redhill, Surrey RH1 1BB (07884 477406) or by email on mark@westwayclinic.co.uk.

NEW ZEALAND: FULL-TIME OSTEOPATH required for busy friendly practice in Te Puke and Whakatane in the sunny Bay of Plenty. From April/May 2005. Please contact Anna Swindells 00 64 7 574 7454 a.swindells@clear.net.nz

ASSOCIATE OSTEOPATH REQUIRED to work in busy, friendly Crystal Palace practice. Structural only with strong soft tissue and HVT bias. 2 days per week. Ability to work independently essential with support available. Contact Michael McDonnell 020 8355 0960.

LOCUM REQUIRED to cover maternity leave in busy Hertfordshire practice. To start a.s.a.p. until September for 2/3 days including Saturdays. Good working knowledge of IVM an advantage. Please call 01992 637677.

ASSOCIATE REQUIRED IN THE STUNNING BAY OF PLENTY, Tauranga, New Zealand in friendly supportive clinic. Starting ASAP or before August 2005 for a minimum of one year. Working 4-5 days per week on a 45 minute list - potential to see 40-50 patients/week. Primarily structural practice but open to other modalities. May be able to assist with cost of entrance exams. Contact Gemma Holroyd at bellevuepractice@xtra.co.nz for more details.

LOCUM OSTEOPATH REQUIRED for busy multi-disciplinary clinic in charming coastal town in Devon. Must have good structural & cranial skills, and be experienced with children. Genuine opportunity to stay on as assistant. Immediate start. Please ring Gemma Bachle on 07811 377783.

PETERBOROUGH AREA- Combined Osteopath and Naturopath needed 2 days per week (to suit) for long established multi-therapy clinic. Need to include 1 late evening. To join team of busy therapists with wide range of combined disciplines. Huge untapped potential for growth. Call Alison on 01487 830877.

REGION: LONDON, POSITION: OSTEOPATH (Part-time). Sona are looking for registered osteopaths in select corporate sites in the Central London and Canary Wharf areas. We require Osteopaths: To be registered with BUPA and PPP, a minimum 5 yrs qualified, Have appropriate qualifications and training, Show a keen interest to establish a client base and work with other therapists onsite. Hours of work - Part time, negotiable. Salary - Fee Split. Response address: Please send CV to: E-mail - a.draycott@sonahealth.com

OSTEOPATH/S REQUIRED FOR BUSY multi-disciplinary clinic established over 6 years ago near Heathrow airport. Knowledge of cranial and children would be an advantage. Initial Wednesday and Saturday slots are available. Contact Peter Garnham on 07774 671704 for more information.

ESSEX COSTAL CLINIC REQUIRES Osteopath to join our friendly team. 3-4 days per week (plus alternate Sat.) starting July 2005 (poss. sooner). Must be structurally based and have good manipulative skills. Enthusiasm, confidence and excellent people skills essential. Please contact Wendy Saxby Tel. 01621 851703, Fax CV 01621 852473. asap.

NEAR EPPING, ESSEX, ASSOCIATE WANTED for busy, friendly, cranial practice. 1-2 days per week. Enthusiasm essential, support provided. For more information please contact Connie Mansueto on 01992 814 620.

WEST LONDON; OSTEOPATH WANTED to either operate on rental of practice two days a week or as an associate. Please contact Shenene on 0207 935 2393 or e-mail sgosteol@btconnect.com

NEW ZEALAND: WANTED LOCUM/ASSOCIATE for busy practice in Central North Island handy to everything and beautiful locale. Working in a team for four or five days a week with full lists. Please check us out at www.theosteopathicclinic.com or phone Oliver or Alex on + 64 7 853 9699.



Diploma in Paediatric Osteopathy

The Osteopathic Centre for Children has been training osteopaths in paediatrics since 1991. The next intake for the diploma course will be September 2005. The course is of relevance to osteopaths treating children in general osteopathic practice and osteopaths intending to specialise in the osteopathic care of children.

Applicants must be registered with the GOsC and must have completed a postgraduate Sutherland Teaching Foundation approved course (BSO or SCC) before October. A good UK osteopathic degree (or equivalent) is required. All applicants must provide an enhanced criminal records disclosure.

The two-year course includes pregnancy, birth, child development and common paediatric conditions with specialist units covering delivery, respiration, infection and immunity, orthopaedics, and the central nervous system. Osteopaths must attend the OCC clinic one day a week for the duration of the course and attend the eight weekend seminars. Outcomes are assessed by regular clinical assessment, 5 case reports, a research project, end of year written exams, and clinical vivas.

Closing date 30th June, 2005

Vacancy - Clinic Assistant (full-time)

This exciting post offers excellent educational opportunities for a new graduate with a keen interest in paediatrics; it has been developed to provide intensive training and experience working with well established experienced teams, and the opportunity to treat children with all manner of complaints. The successful applicant will be enrolled on our two-year postgraduate course with free tuition and time for study. Applicants should see details above on the Diploma in Paediatric Osteopathy for entry requirements.

Closing date 30th June, 2005

For a prospectus and application form please see website www.occ.uk.com / Or telephone Sonia Nelson-Cole on 020-7490-5510.

Applications must be submitted by 30th June, 2005

Registered charity number 1003934

FULL-TIME ASSOCIATE OSTEOPATH required to join a highly motivated team within a very busy, expanding and well established multi-therapy practice situated in the rural town of Nantwich, Cheshire. Full supporting administration staff is provided and there are excellent opportunities for professional development. There is also a large equine client base and therefore opportunities for anyone interested in veterinary osteopathy. For further information call: Adam Tilstone, Telephone 01270 629933.

COMMERCIAL

ISLINGTON N1: ROOMS TO RENT in a brand new multidisciplinary Clinic and Pilates studio. Applicant should have two years' experience and be keen to work with other practitioners. The rooms are large and bright, with power rise couches, and climate control. Please send CV to lewis.slater@btinternet.com.

WOBBLE BOARDS! TOP QUALITY boards constructed from 12mm plywood, topped with cork on a hardwood peg. Standard size 38cm diameter with 15 degree tilt. (please visit <http://wobbleboards.mysite.wanadoo-members.co.uk>). Bespoke service available – let us know your requirements! Priced at £24.95 (inclusive of UK mainland delivery.) Order 5 boards or more and receive a 10% discount. To order Tel: 'Wobble Boards UK' on 01254 876728 or email SALES@philipneve.wanadoo.co.uk

WANT TO ESCAPE THE RAT RACE? FANCY A LIFE IN THE SUN? Goodwill and equipment for sale of mainly structural practice in multi-disciplinary setting established 5 years in beautiful fishing town on Costa del Sol, Spain. Golden opportunity for energetic person seeking life change. Contact: Mark on osteomark@email4us.com or (0034) 95 252 8175

HARLEY STREET ROOM TO LET in quiet, fully furnished, spacious room, with electric couch. Suitable for registered osteopath with established client list on Thursdays only, 9 – 6pm. Tel: Dr Greene on 07815 763 570.

HOLIDAY APARTMENT – NICE (France) Sleeps 2. Quiet, centrally located studio, refurbished in 2004. 2 minutes from main Promenade, easy access from airport (served by Easyjet, bmiBaby etc). £200 pw (including linen and cleaning), shorter lets available. Tel: 0115 948 4141 e-mail: nick@nottinghamosteopaths.co.uk

PRACTICE FOR SALE SEASIDE TOWN (Skerries North County Dublin) Ireland. 40 minutes on motorway from Dublin city centre. 6 years of goodwill Successfully blended structural, visceral and cranial approaches and seeing 70 plus patients per week, with a clear scope to expand. Potential for two practitioners. Wide range of patients including children, babies, pregnant women, and adults. Central location in Skerries, off-road parking, bus stop, train station. Fully equipped reception and rooms. Contact Jose, jal2003@eircom.net.

NEED A LOCUM? FEMALE OSTEOPATH with 11 years; full time experience available. Call Iona on 07765 198751 or +33 683581570 iona.gray@wanadoo.fr

WOULD YOU LIKE THE CONVENIENCE of having a practice in the West End? Suits Osteopathy, Acupuncture, Counselling, Massage etc. Rooms available various days in lovely, friendly clinic. Serviced and reasonable priced. Clients can park. Call Maggie on 0207 487 2617 or 07944 600183. E-mail: maggie@u2can change.co.uk

HAMPSTEAD NW3. TREATMENT ROOMS AVAILABLE within a private medical and dental practice. Prestigious ground floor shop-front location, various options to suit short or long term view. Excellent potential to build a quality practice. Tel. 020 7433 3252

PRACTICE FOR SALE IN NEW ZEALAND: Very busy and well established North island practice with two satellite clinics, several associates (currently employs 7 osteopaths), two receptionists and a practice manager. Over 7000 patients on file and a great reputation. Includes branding, website (www.theosteopathicclinic.com), pamphlets, marketing tools, standardised, easy to follow procedures and files. Room for further development or perfect as is. For more information contact Alex or Oliver on oliver@osteopathy.net.nz or + 64 7 853 9699

NEMECTRON EDIT 2 INTERFERENTIAL AND ENDOVAC in excellent condition. Recent full service and electrical safety certification by Nemectron engineer. Comes with trolley stand. £1100 o.n.o. Tel Peter 01494 766346

5053 – BRISBANE, AUSTRALIA. PRACTICE FOR SALE est. 6 years by BSO graduate, excellent further growth potential, little competition. 2 fully equipped consulting rooms and reception in self contained leasehold suite in landmark medical centre. Excellent lifestyle, one of the few opportunities left for UK grads to practise in Australia. Email shelznik@powerup.com.au or Tel: + 61 414 441 319

COURSES

TARKA CLINICS Ltd CPD Programme 2005

Technique Workshop Weekends in Barnstaple
with Professor Laurie Hartman

April 16/17 and October 8/9

£160 per weekend, or £300 for both weekends booked in advance (includes all refreshments)

Get your CPD and relax down in beautiful North Devon!

For further details,
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THE MAAS CLINIC IN BARBADOS,

West Indies is seeking the placement of an

Osteopath/Naturopath for a period of

two years to work in a very busy

Osteopathic, applied bio-chemistry and

nutritional private clinic. The successful

applicant would have a minimum of two

years' work experience in the field, with

sound knowledge and skills of Osteopathy,

cranio-sacral therapy, dry needling

(minimum), cold laser therapy and applied

bio-chemistry and nutrition. A naturopathic

and holistic perspective to healing is

crucial. Interested applicants should apply

by e-mail to info@themaasclinic.com and

include a current C.V. and cover letter with

available start date. Alternatively fax us

on 246.435-8456

BOX NO REPLIES: Quote Box No on outside of envelope and address to *The Osteopath*, c/o D A Marketing & Communications, Henrietta House, 93 Turnmill Street, London, EC1M 5TQ. Your reply will be forwarded to the advertiser unopened. The cost for classified advertisements is £40 for 40 words and 20 pence for each word thereafter. Please email, fax or post your copy to The Advertisement Manager at D A Marketing & Communications, fax: 020 7608 1332, email: ads@damarketing.co.uk with your contact details and we will send you a booking confirmation and invoice.

How 4 degrees can make the difference between



pain or pleasure...

The human foot was originally 'designed' for travelling on natural surfaces like earth and sand. Unfortunately, we spend every day walking on hard, flat unnatural surfaces like pavements and floors. This causes the foot to over-pronate (roll inward) to gain ground contact.

An estimated 70% of the population suffers from misaligned feet and legs as the natural 4° rearfoot varus angle is lost due to Excess Pronation.

Poor alignment of the feet often disrupts normal knee function and hip alignment and increases forces on the muscles in the lower back. Excess Pronation commonly contributes to symptoms including plantar fasciitis, achilles tendonitis, bunions, tibial stress syndrome, patello femoral pain, ilio-tibial band syndrome, lower back pain - even headaches.

A Natural Treatment Angle

VASYLI International have dedicated 25 years to the biomechanical problems caused by modern living, including the development of a natural environment for the foot. The result is a highly effective, yet simple orthotic device: ORTHAHEEL.

By restoring the foot's natural 4° angle, ORTHAHEEL



Multi-Award winning Orthotic Technology

immediately controls excess pronation and protects your patients from future biomechanical problems.

Sold over-the-counter in **1,200 Boots pharmacies** ORTHAHEEL is now also available directly to UK Practitioners, for re-selling to their patients. Just slip them in your patients shoes for instant pain relief!

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Find out for yourself how the **UK's no 1 Prescribed orthotic** can benefit your patients. If you're interested in dispensing or simply referring for ORTHAHEEL, you can order a **FREE** pair today - in your own shoe size - plus a Lower Limb Biomechanics Guide.

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