

the OSTEOPATH

The magazine for Osteopaths

June 2006
£3.00

Volume 9: Issue 5
ISSN 1466-4984

In this month:

Osteopaths Act Now!

**Foster Review:
independent report**

The Back Show July '06

About RCTs

***International Journal of
Osteopathic Medicine
enclosed***



Backing Osteopathy

GENERAL OSTEOPATHIC COUNCIL



The General Osteopathic Council

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

T: 020 7357 6655 F: 020 7357 0011

www.osteopathy.org.uk

Contact details: services

Service	Extension number	Service	Extension number
Address changes	256	Magazine subscriptions	242
Advertising and promotion	226	Media	228/247
Assessments of Clinical Competence	235	NHS liaison	245
Chairman	246	Non-practising osteopaths returning to register	229
Chief Executive & Registrar	246	Off work certificate orders	242
Clerk to the Appeals Committee	236	Office admin	251
Communications policy	228/247	Overseas enquiries	245
Complaints about osteopaths	224	Parliamentary liaison	245
Conferences	222	Payment problems	231
Continuing Professional Development	238/240	Practice matters	222/247
Council and Committee business	01580 720213	Presentation materials	242
Database amendments	233	Private medical health insurance	247
Education enquiries	238/240	Professional indemnity insurance	233
Exhibitions	222	Protection of Title	224
FCCA enquiries	240	Recognised Qualification process	238/240
Fee payments	227	Regional Communications Network	222/228
Fitness to Practise	236/224	Registration	256
Framework of Practice	238	Research	240
Graduates	233	<i>The Osteopath</i> magazine contributions	222/228
Information service	242	VAT exemption	233
Leaflet and publication order queries	242	Website	226
Leaflet orders	242	Yellow Pages/Thomson Corporate Box	242
Locum list requests	242		

Contact details: people

Rebecca Costello 256 Registration Secretary (rebeccac@osteopathy.org.uk)	Kellie Green 236 Assistant Registrar [Regulation] (kellieg@osteopathy.org.uk)	Matthew Redford 231 Assistant Registrar [Finance] (matthewr@osteopathy.org.uk)
Vince Cullen 223 Head of Development (vincec@osteopathy.org.uk)	Sonia van Heerden 242 Information Officer (soniavh@osteopathy.org.uk)	Abdul Saadeddin 251 Facilities Officer (abduls@osteopathy.org.uk)
Pam D'Arcy 246 Assistant to Chief Executive & Registrar (pamd@osteopathy.org.uk)	Madeline Hogan 227 Finance & Registration Officer (madelineh@osteopathy.org.uk)	David Simpson 248 Head of Legal Affairs (davids@osteopathy.org.uk)
Dana Davies 224 Professional Conduct Officer (danad@osteopathy.org.uk)	Tamara Hudson 235 Development Assistant (tamarah@osteopathy.org.uk)	Nicole Tripney 222 Communications & Events Officer (nicolet@osteopathy.org.uk)
Erika Doyle 228 Assistant Registrar [Communications] (erikad@osteopathy.org.uk)	Susan McCue 226 Communications & Media Officer (susanm@osteopathy.org.uk)	Brigid Tucker 247 Head of Communications (brigidt@osteopathy.org.uk)
Marcus Dye 240 Assistant Registrar [Development] (marcusd@osteopathy.org.uk)	Gillian O'Callaghan 233 Head of MIS [Registration] (gilliano@osteopathy.org.uk)	Joy Winyard 238 Development Officer (joyw@osteopathy.org.uk)
Sarah Eldred 245 Assistant Registrar [Public Affairs] (sarahe@osteopathy.org.uk)	Jane Quinnell 01580 720213 Clerk to Council (janeq@osteopathy.org.uk)	

**Freephone helpline
for osteopaths
0800 917 8031**

Registrar's report

"Professional regulation, which has focussed on the regulation of individuals in professions, is to a large extent as strong as the individual practitioner believes it to be, and the value they place on professional self-regulation." (Royal College of Nursing 2002)

As I write this at the end of May, we have still not had a formal announcement about the Foster Review outcomes, although we continue to be hopeful about hearing something before Parliament breaks for the summer recess. The Government 'reshuffles' mentioned in last month's report are clearly having an impact. What is having an impact too, is the voice of the profession. To date, 1692 of you have returned an opinion slip, with still only 10 thinking that subsuming into a larger regulator would have benefits for the future of the profession. Most days the Department of Health (DH) receives another letter from one of your MPs, and GOsC/BOA representatives have now attended eight regional meetings to discuss the potential outcomes and future action with osteopaths.

One of the most significant of our meetings to date has been that with Mr Nic Greenfield, Acting Director of NHS Workforce. He has led the writing of the Review into Non-Medical Regulation and my personal view is that he tends towards 'larger is more effective and efficient', although with strong evidence and support to the contrary, he may be persuaded to think otherwise. That is why I was drawn to the above quote. There is certainly evidence that osteopaths believe their professional regulation to be strong. And the buy-in, hence value, placed by osteopaths on this is widely acknowledged. If not yet large in number, osteopaths have shown their willingness and commitment to believe in the value of continually maintaining standards for the benefit of their patients.

Not wanting to be complacent, however, we commissioned a review to see how the GOsC matched up to accepted norms. This review also considers the advantages and disadvantages of a move from the status quo. The Foster Information/Action pack focused on a potential loss of control, input and identity, i.e. subsuming into another regulator would lose the 'Osteopathic Council' banner which the profession currently enjoys, is widely respected and now well known. But you may now also like to read the independent review Report to further inform your opinion. If it changes your view, just let us know and we will amend your feedback accordingly.

A précis of the Report is featured on page 12 and the full document can be found on the GOsC website at www.osteopathy.org.uk/latestnews. A copy was also given to



Mr Nic Greenfield at the end of our meeting, who assured us that it would be considered.

We are now more hopeful of a positive outcome and have used the extra time to gain further advantage. The DH has also had time to look more closely at the achievements of the profession, in conjunction with the GOsC, and I believe this will now be recognized in the outcome. Nonetheless, it

would be foolish to expect that there will be no changes. The number of regulators was only one of the options under consideration, and we should be prepared for some upheaval. If so, this will be a small price to pay for retaining the granting, delivery and maintenance of osteopathic standards to protect your patients, along with securing a future for osteopaths as a discrete profession.

There is no denying that the Foster Review has commandeered a lot of our time and energies, but this has not put other activities on hold, as you will see from the plans for the next round of GOsC Conferences (page 17) and our involvement with external healthcare and consumer exhibitions (pages 20–21). Complementary medicine was once again in the media spotlight following a call for Primary Care Trusts to stop funding treatments for which there is no evidence base (page 23). Whilst we may not agree with the sentiments of this latest campaign, I think we are all in agreement for the need for more research into the benefits of osteopathic techniques. I hope you will set aside some time to read the latest issue of the International Journal of Osteopathic Medicine enclosed with this magazine.

And finally, with great appreciation, we mark our farewells to those Council Members (page 6) whose term of office ended on 8 May 2006. This was the year which ended the five-year rotation of the 12 elected osteopathic Council Members. Council relies heavily on the osteopaths you elect for their professional insight and input. Serving on Council is no easy ride and requires a tremendous dedication to the demands of office. Sometimes it is frustrating to see weeks of work, contributed in the interests of furthering the profession, so totally unappreciated or misunderstood. The highlights, however, make it all worthwhile, as I am sure Council Members would attest. For all their contributions they deserve grateful and heartfelt thanks, not only from other Members and staff of the GOsC, but also from the profession.

Madeleine Craggs,
Chief Executive & Registrar



pilates in the sun!

Are you considering using Pilates with your patients?

Claire Worman: Bsc. Sports Science Bsc. Osteopathy Cert Ed.
and
Belinda Buttery: P.Grad Dip Exercise Science HND NLP Master Pract Cert Ed.

offer The OCR Accredited
5 day Pilates Teacher Training Qualification
at Club la Santa Lanzasote
This course contributes to your CPD credits

To include:
• 7 day residential course from 28th Sep - 5th Oct 2006
• Flights and transfers
• Accommodation - based on 3 sharing
• The 5 day course
Note: Both theory and practical exam to be completed on return to UK

If you are interested please call 01252 794423
for all other UK courses please call 01784 455222

"education is our motivation"

or visit our website www.pilatestrainingsolutions.co.uk

**"education
is our motivation"**

or visit our website www.pilatestrainingsolutions.co.uk

In this issue

Key contacts	2	Research	24
Registrar's report	3	Research hub news	
GOsC news	6	Randomised Controlled Trials	
Farewell to retiring members of Council		NCOR hits back at Ernst	
In Education		Regional round-up	29
GOsC diary May 2006		Osteopaths@Worcester	
<i>Osteopaths Act NOW!</i> Campaign		London Osteopathic Society	
Independent report into Foster Review		CPD resources	30
Promoting Osteopathy: GOsC Regional Conferences		Osteopathy and cancer	
06/07		Painless practice course June 06	
More GP workshops scheduled		Clinical rehabilitation workshop September 06	
Last chance to join Team Osteopath		Osteopathic Sports Care MSc	
GOsC <i>Code of practice</i> commended		Bookshelf	34
News	20	Back chat	35
Primary Care Conference May 2006		Courses	36
The Back Show Exhibition July 06		Classifieds	38
New CAM guide for back pain			
NHS told to abandon alternative medicine			


Editor:

Erika Doyle
editor@osteopathy.org.uk

Assistant Editor:

Nicole Tripney

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

Email: editor@osteopathy.org.uk
 Telephone: 020 7357 6655
 Facsimile: 020 7357 0011
 Website: www.osteopathy.org.uk

The Osteopath • Volume 9 • Issue 5 • June 2006
The Osteopath is published by the General Osteopathic Council, Osteopathy House, 176 Tower Bridge Road, London SE1 3LU.

The Osteopath is the official journal of the General Osteopathic Council. Editorial contributions and letters for publication are welcomed, but opinions expressed by contributors or advertisers do not necessarily reflect the views of The Publishers, the Editor, the Editorial

Board, Council Members or the Committees and Officers of the General Osteopathic Council. The Publishers reserve the right to refuse any editorial contributions or advertisements without explanation.

The Osteopath is the copyright of the General Osteopathic Council.

Printed in the UK by The Magazine Print Company
www.magprint.co.uk

Advertising sales only:
The Advertisement Manager
DA Marketing & Communications Ltd,
Henrietta House,
93 Turnmill Street
London EC1M 5TQ

Telephone: 020 7608 4584
 Facsimile: 020 7608 1332
 Email: ads@damarketing.co.uk

Disclaimer:

The General Osteopathic Council does not endorse products or services advertised within *The Osteopath*.

Farewell and thanks to retiring members of Council

Council and staff thanked the five retiring members, and welcomed the five new members, at a dinner after the last Council meeting in March. The GOsC would like to take this opportunity formally to thank Jane, Nick, Ian, Brian and Kate for their contributions to the work of the GOsC and the profession.

Jane Langer who, along with Nick Woodhead, was appointed to the Council Designate in 1996, has been with the Council since its inception. Jane's contribution goes back further, as she was one of the few osteopaths involved in the King's Fund Working Party on Osteopathy (1989-1991), which subsequently led to *The Osteopaths Act 1993*, and the statutory recognition of osteopathy.



Jane's interest in osteopathy started before she could barely walk. Her father, Dr William Grunbaum, was a Hungarian doctor who came to England in 1940. He had to re-qualify as a doctor in the UK and went to Edinburgh to begin this process. Whilst there, Jane and her brother, Paul, were born and, as he had not yet completed his re-qualification studies, Jane's mother, who worked for a complementary health publisher, suggested he consider retraining in 'that osteopathy thing!' He liked the idea and trained at the British School of Osteopathy when it was situated near Buckingham Palace. Once qualified, he both lectured and practised and Jane and her brother regularly went to work with 'Dad' at his Seymour Street practice from a very early age.

Jane graduated from the College of Osteopaths in 1966 and is, therefore, approaching her Ruby osteopathic anniversary. As well as practising, she has found time to have three daughters, one of whom followed in the family footsteps, to become President of the College of Osteopaths Practitioners Association and Chairman of the Board of Governors of the College of Osteopaths for ten years 1987-1997.

During her time on the GOsC Council, Jane sat on the Commencement Order Group (Council's first committee tasked with, amongst other things, writing the original business plan, obtaining funding and employing the first Chief Executive and Registrar), the Communications, Education, Investigating, Practice & Ethics, Professional Conduct and Section 32 Committees. During the Transition phase of Council's development, she was a Professional Profile and Portfolio (PPP) assessor and interviewer, and was involved in appeals against registration. It is quite impossible to work out how many hours Jane has worked for

the Council – given her exemplary meeting attendance, it must run into thousands. Much of this work has been carried out without financial reward. [What may also not be known is that Jane funded the slate foundation plaque in the entrance hall of Osteopathy House.]

She was always an active, dedicated and supportive Council Member. She played a central role in the development and delivery of all aspects of communication activity as Chairman of the Communications Committee and was involved in a number of working groups, not least those tasked with promotional activity in the political and NHS arenas. Always conscious of the needs of the profession, effective communication with osteopaths has been key to Jane, who strongly advocated direct contact with the profession through gatherings of regional representatives, road shows, consultation exercises and instigated the GOsC Regional Conferences. She has attended of the majority of the 33 such events hosted by the GOsC over the last four years and last year, attended all but one of the nine GOsC regional events – an indication of how important Jane considers the views and concerns of fellow osteopaths.



Nick Woodhead was also appointed to Council in 1996 and elected for a further term in 2001. He qualified at the British School of Osteopathy (BSO) in 1977 and has been in practice in Nottingham since 1979. He has been actively involved in osteopathic education and training since 1982 and is a member of the Institute for

Learning and Teaching in Higher Education. This involvement reflects the significant contribution he made to Council in the areas of education and practice development.

Currently, as well as running a busy practice in Nottingham, Nick is a senior lecturer at the BSO and course leader for the PGDip in 'Clinical Practice of Osteopathy in the Cranial Field'. Nick has lectured in the USA and Australia and is a visiting lecturer at the Vienna School of Osteopathy.

During his time on Council, Nick was a member of the Education, Health and Professional Conduct Committees, and latterly, Chairman of the Audit Committee. Like Jane, his attendance record at meetings was exemplary, and his time commitment to the GOsC immeasurable. His additional work for the Council, through the Education Committee, included the development of the professional registration and recognised qualification processes, as an assessor and moderator of the initial and overseas registration portfolios, and interviewer of these applicants.

He remains an assessor for the Quality Assurance Agency. Nick's attention to detail and drive for safe and competent practice made him an obvious choice for Fitness to Practise hearings. Many remarked on his uncompromising objectivity and on his fair consideration of evidence.



Ian Swash was elected in May 2001 and served a complete five-year term. He has been in practice as an osteopath since 1976 and, as a director of a multidisciplinary clinic in North Oxfordshire providing osteopathic, orthopaedic, podiatric and radiological services, was well placed to bring a wide perspective to any debate. Ian has also been Director of Osteopathy at the Oxford School of Osteopaths, a former Chairman of The Guild of Osteopaths and a Council Member of the original British Osteopathic Association.

Significantly, Ian was a founder member of the Osteopathic Information Service and, in 1992, he created the concept of a series of annual conferences for the osteopathic profession as it approached the new millennium. He organised the first two congresses in 1993 and 1994 at the Royal Postgraduate Medical School in London. These contributions to the early development of communication between osteopaths and patients will be his legacy and, with his marketing background, made him a valuable member of the Communications Committee. Ian was also a member of the Investigating and Finance & General Purposes/Remuneration Committees. The Fitness to Practise team, amongst others, will miss Ian's efficiency in giving advice and 'telling it like it is'!



Brian McKenna was elected to Council by Welsh Osteopaths at the 2002 by-election. He became interested in manual medicine whilst travelling in North America and, on his return to the UK, applied to the British School of Osteopathy from where he graduated in 2001. He has practices in Cardiff and Hereford.

During his term, Brian was a member of the Education, Communications and Health Committees, but will be remembered most for his enthusiasm and enjoyment of research. His ability to get things done was always appreciated, as shown by his getting the Wales' research hub 'off the ground'. He also initiated and coordinated the activities of osteopaths through the South Wales Osteopathic Society, of which he was secretary. On the educational front, Brian made his mark as a Qualification assessor.



Kate de Fleury was elected at the 2004 by-election by the osteopaths in Northern Ireland. Her first experiences of osteopathy were as a teenager seeking help for back pain. Before training at the BSO and graduating in 2003, Kate worked in a mental health nursing home in

Cambridgeshire and then with disabled children. She then worked for six months in a children's home and a Leonard Cheshire home in Malaysia, returning to Northern Ireland in 2003 where she has established two clinics.

Kate was a member of both the Health and Professional Conduct Committees. Like Brian, she has brought a balance of contribution to Council as one of the more recently-qualified osteopaths.



Yellow Pages deadlines

June		July		August	
Guildford:	02/06/06	Chelmsford	04/07/06	Bath	01/08/06
Basingstoke:	02/06/06	West London	06/07/06	Leeds	03/08/06
Oxford:	09/06/06	Harrow	06/07/06	Nottingham	08/08/06
High Wycombe:	09/06/06	Exeter	12/07/06	Derby	14/08/06
Manchester South:	15/06/06	South East London	17/07/06	Chester & North Wales	16/08/06
Manchester Central:	20/06/06	Bromley & Bexley	17/07/06	Manchester North	23/08/06
Colchester:	23/06/06	Wakefield	24/07/06	Leicester	29/08/06
Ipswich:	27/06/06	Bristol	27/07/06	Coventry	31/08/06
Southend & Basildon:	29/06/06				

Cut-off dates for advertising in the GOsC Corporate Box in your local areas. Contact Yellow Pages on 0800 37 1755 prior to the final booking date if you have not been contacted by sales staff.

Visceral and Obstetric Osteopathy Courses with Caroline Stone

Returning from Australia for November 06
(next return '08/09).

YORK – 11-12 Nov 06 **OBSTETRICS AND GYNAECOLOGY***

*practice restrictions apply in UK – see website

BRISTOL – 25-26 Nov 06 **RESPIRATORY AND UPPER GIT** COURSES COST £200 PER WEEKEND

Visit www.osteopathichealthcare.com
for all course details / downloadable brochures,
paypal options / venue details etc.

Courses to accompany new book:
Visceral and Obstetric Osteopathy,*

Pub Elsevier, due Dec 06 / Jan 07.
caroline@yourosteopath.com.au

Imagine!
Your own receptionist
from as little as
£65.00 a month

IdealReceptionist
virtual reception for health practitioners

Why not try our 2 week free trial?

simply call

020 8788 6486

or send an email to
contact@IdealReceptionist.co.uk

You can also visit our website at:
www.idealreceptionist.co.uk

Embroided... in administration?
Exasperated... by lack of statistics?
Eager... to improve your practice?

Then look no further!



Makes Practice Perfect!

Gives you more time to treat patients
Improves cash-flow and financial control
Helps you analyse and market your practice
Handles all patient and practice administration

You can...
...buy it for your own PCs
...sign on to our Internet service
...even put your diary on the Internet!

Try the demonstration on our web site
www.sensible-people.co.uk

SENSIBLE PEOPLE, Romary House
26 Church Rd, Tunbridge Wells, Kent TN11 1JP
Tel: 01892 612320, Fax: 01892 612328
Email: freehand@sensible-people.co.uk

**If you work in
Healthcare
see a specialist**

We recognise that healthcare is a specialist sector, which is why we have dedicated Healthcare Managers. Financial specialists who are trained specifically for the healthcare market. And because they are typically in their role for at least 3 years, you can rely on them being around to help when you need them.

Please call 0800 821 807 quoting HLO8 to arrange for one of our Healthcare Managers to contact you. Telephone 0800 404 8180. www.rbs.co.uk. Calls may be recorded.

Make it happen



In Education

Jane Quinnell, Clerk to Council

The Education Committee (EdC) held its 44th and 45th meetings on Thursday 16 March and Thursday 11 May 2006 at Osteopathy House, with Professor Trudie Roberts in the chair for both meetings. Matters considered and/or reported included:

Continuing Professional Development (CPD)

The Rules were still to be finalised with the Department of Health. CPD annual returns were coming in at a similar pace to last year.

EdC's Terms of Reference

EdC finalised the outstanding term on research and Council accepted the Terms of Reference at its meeting on 21 March 2006.

GOsC meetings with the Osteopathic Educational Institutions (OEIs)

EdC received the minutes of the meetings held on 8 December 2005 and 3 March 2006.

National Council for Osteopathic Research (NCOR)

NCOR met on 4 April 2006 and agenda items included a review of its Terms of Reference, receiving the research officer's report and an update on the research hubs. The sub-group exploring 'adverse incidents' research also met on 4 April. The group is working towards making recommendations for how this should be taken forward, considering the complexities, and suggesting priorities.

Development department update

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

- Coordinating work with regard to Recognised Qualification (RQ) reviews of providers of osteopathic education.
- CPD development and evaluation of returns.
- Contributing to work on dealing with the Foster Review.
- Continuing work on the Osteopathy Benchmarking Project for pre-registration education.
- Work on the Development department's Business Plan and Budget 2006-07.



- Higher Education Funding Council for England (HEFCE) – the new Chief Executive of HEFCE, Professor David Eastwood, is due to take up post on 1 September 2006. It is proposed to arrange an early meeting with him as a further step in progressing the case for extra funding for osteopathy.
- Further development of the revised annual report form which will be used in the RQ review monitoring of osteopathic courses.
- Further monitoring of progress on the Department of Health's Musculoskeletal Services Framework, publication of which has now been delayed until later in the year.
- Continued working with other health regulators to identify risks associated with the implementation of the European Directive 2005/36/EC Recognition of Professional Qualifications.
- Liaising with the Department for Education and Skills about its new rules, from 2006, governing funding of students. The rules now appear to preclude students undertaking a second degree from accessing loans from the Student Loans Company unless their subject is on a pre-agreed list – osteopathy is not on the list.

Next meeting of EdC

The next meeting will be held on **Thursday 20 July 2006** at Osteopathy House and will commence at 2.00pm. The agenda for the public session will be available from Jane Quinnell approximately seven days before the meeting. Part I sessions of EdC meetings are open to members of the public.

Contact Jane Quinnell on tel: 01580 720213 or email: janeq@osteopathy.org.uk for further information, or if you would like to attend the next EdC meeting (please note that spaces are limited).

If you would like to submit an article, or have an idea for a future issue of *The Osteopath*, contact the Editor on ext. 228 or email: editor@osteopathy.org.uk.

GOsC diary May 2006

This diary shows a snapshot of some of the meetings and events the GOsC has been involved with over the past month. Should you wish to request further information about any of these meetings please contact the relevant department.

2	Tuesday	NCOR* London Research Hub meeting
3	Wednesday	Dept. of Health /Dept. for Work & Pensions - Health, work and wellbeing summit
4	Thursday	Foster Review Communications subgroup meeting Audit Committee meeting Primary Care Conference and Exhibition 2006 (4-5 May)
9	Tuesday	In-house healthcare lawyers forum GOsC/BDA* meeting with Ms Sandra Gidley MP
11	Wednesday	Education Committee meeting
15	Monday	Northern Ireland Assembly event Registrar meeting with the GOC* and NMC* Launch of Complementary and Alternative Medicine Specialist Library (NeLCAM) GOsC/BDA* meeting with Dr Howard Stoaie MP
17	Wednesday	GOsC Section 32 (protection of title) prosecution GOsC/BDA* meeting with Mr Nic Greenfield, Acting Director of NHS Workforce Parliamentary Group for Integrated and Complementary Healthcare
19	Friday	Osteopathic Regional Communications Network meeting
20	Saturday	Forum for Osteopathic Regulators in Europe (20-21 May) 12th International Ottawa Conference on Clinical Competence (20-24 May)
22	Monday	Healthcare Registrars meeting
24	Wednesday	Osteopathy in Childbirth Working Party
25	Thursday	BSD* Research Ethics Training Day GOsC/BDA* meeting with Mr John Pugh MP GOsC/BDA* meeting with Mr John Baron MP
26	Friday	GOsC visit to ESO* final year students
30	Tuesday	Registrar meeting with Ms Kim Lavelly (FiH*)
31	Wednesday	Critical Cs course planning meeting

Key	GOsC - Ext 242	Communications Dept - Ext 242	Development Dept - Ext 235
	Finance - Ext 231	Registrar Dept - Ext 246	Registration Dept - Ext 236
	Regulation - Ext 249		

*NCOR - National Council for Osteopathic Research

BDA - British Osteopathic Association

GOC - General Optical Council

NMC - Nursing and Midwifery Council

BSD - British School of Osteopathy

ESO - European School of Osteopathy

FiH - Prince's Federation for Integrated Health

It's not too late to *Act NOW!*

Sarah Eldred, Assistant Registrar (Public Affairs)

Do you support profession-led regulation of osteopathy? If you have not yet sent in your feedback form on the '*Osteopaths Act NOW!*' campaign and /or contacted your local political representative, it's not too late!

The Foster Review (named after former Director of NHS Workforce, Andrew Foster) is part of a wide-ranging review of the regulation of health professionals. It is widely believed that the outcome of this review will recommend an integration of the functions of the GOsC into the Health Professions Council (HPC), which currently regulates 13 professions allied to medicine.

The *Osteopaths Act NOW!* campaign, coordinated by the GOsC and BOA, seeks to raise awareness of the Foster Review of non-medical healthcare regulation amongst the osteopathic profession and its potential impact on osteopaths and their patients.

Following distribution of the Foster Review Information / Action pack on 13 April, there has been an overwhelmingly positive response from the profession in support of profession-led regulation. At the time of going to press, we had received 1,692 responses:

This level of concern within the profession has so far

Support profession-led regulation	1,680
Support regulation by the HPC	10
No view	2

initiated eight regional meetings of osteopaths keen to



discuss the Foster Review and what action they should take. Thank you to all those osteopaths (and students) who have responded to the campaign and written to their political representatives.

The GOsC has held briefing meetings with the following key MPs:

Dr Richard Taylor MP (Ind Wyre Forest): Member of the Health Select Committee.

Ms Sandra Gidley MP (Lib Dem Romsey): Former Lib Dem Health spokesperson, now member of the Health Select Committee.

Dr Howard Stoute MP (Lab Dartford): Member of the Health Select Committee.

Nic Greenfield: Acting Director of NHS Workforce.

John Baron MP (Con Billericay): Shadow (Conservative) Health Minister.

John Pugh MP (Lib Dem Southend): Shadow (Lib Dem) Health Minister.

Further meetings are scheduled with **Andy Burnham MP (Lab Leigh)**, the Health Minister responsible for the Foster brief and **Kevin Barron MP (Lab Rother Valley)**, Chairman of the Commons Health Select Committee. We have recently heard that the Government plans to make an announcement shortly, but no date has yet been set.

For further information, please contact Sarah Eldred, Assistant Registrar (Public Affairs) on ext. 245 and / or email: sarahe@osteopathy.org.uk

Dear Madeleine

I am writing to you on behalf of the Council of Osteopathic Educational Institutions (COEI). As you and the GOsC are aware we represent the majority of osteopathic teaching establishments providing GOsC accredited osteopathic education in the UK.

Since the inception of the Council, COEI has been intimately and successfully involved in not only maintaining the standards as set by the GOsC, but also in endeavouring to further the remits of osteopathic education nationally and internationally.

We feel therefore, that it is extremely important at this crucial time to voice the firm support of COEI for the preservation of osteopathic profession-led regulation of educational standards. In conjunction with this we wish to emphasise our belief in the need for the continued maintenance of the high level of educational standards which to date has enabled osteopathy to become the quality profession we see today.

Our resolve is to continue to provide osteopathic training of world renown, but strongly believe that this should be achieved alongside profession-led regulation of educational standards. As such we hope that both the GOsC and the BOA are successful in their endeavours to facilitate this ideal.

Yours sincerely

Melanie Coutinho BSc (Hons) DO, Chair COEI

On behalf of:

The British College of Osteopathic Medicine (BCOM)

The British School of Osteopathy (BSO)

The College of Osteopaths (COET)

The European School of Osteopathy (ESO)

The London College of Osteopathic Medicine (LCOM)

The London School of Osteopathy (LSO)

Surrey Institute of Osteopathic Medicine (SIOM)

GOsC commissions independent report into Foster Review

Abigail Masterson, Director, Abi Masterson Consulting Ltd

Introduction

As part of its information gathering, and to provide robust information to support discussions between the General Osteopathic Council and stakeholders, Council commissioned an independent report on the Department of Health Review of Non-Medical Regulation (The Foster Review). A further aim was to help ensure that any reform of the regulatory arrangements for osteopaths was fit for purpose.

A brief overview of this 21-page report is given below. The full report is available on the GOsC website (www.osteopathy.org.uk/latestnews). GOsC Chief Executive, Madeleine Craggs, says, "We urge you to read this balanced report as there is still time for you to make your views known."

The principles and goals of professional self-regulation

The regulatory framework in the UK has grown up over centuries in a piecemeal fashion (Health and Safety Commission 2004). It has been shaped in response to incidents, public demands and expectations, societal pressures, international agreements and EU directives. The various pieces of legislation governing regulation of health professionals therefore reflect the emphasis and approach of the era in which they were developed, the type of health work undertaken and the numbers and origins of registrants.

The Better Regulation Task Force has identified five principles of good practice. These are transparency, accountability, proportionality, consistency and targeting.

The importance of regulators giving advice to ensure compliance rather than concentrating resources on policing breaches of compliance is emphasised. Nevertheless, important as they are, these generic principles of good regulation do not provide any understanding of the nature of the professional activity being regulated, nor do they dictate the operational practices of the individual regulators. Recent reviews of health professional regulation identify some additional and more specific criteria for judging good practice in professional self-regulation (see full report).



How does the GOsC measure up?

The General Osteopathic Council is a relatively new regulator. Despite its relative youth, mapping demonstrates that the GOsC ably meets, or indeed exceeds, the majority of these requirements (see full report for mapping appendices).

Furthermore, some GOsC processes have already been singled out for praise in reviews of regulation. For example, good practice in GOsC guidance on relationships with patients, use of chaperones, physical examinations, professional boundaries and sexual behaviour. In addition, other regulators have sought the GOsC's advice regarding systems for obtaining Criminal Records Bureau clearance. In the context of an increasingly globalised health workforce, the GOsC has also been playing a key role in work to establish professional self-regulation of osteopaths across the EU.

The apparent issues

In terms of making a robust case for maintaining the status quo the issues appear to be:

- a) the nature and level of the risk in the light of the relative proportions of practitioners who are self employed and/or provide total episodes of care without supervision by, or involvement of, other health professions;
- b) the risks inherent in the techniques used by osteopaths and the level of specialist knowledge required to judge 'reasonableness' etc. of treatment approaches;
- c) the comparatively active engagement of the profession in the development and refinement of its regulatory processes;
- d) that the GOsC already ably delivers on the Better Regulation Commission principles;
- e) any fundamental change risks large numbers of osteopaths feeling alienated and walking away from the safeguards offered by the currently robust system of professional self-regulation.

Becoming part of the Health Professions Council (HPC): a possible proposal

Advantages and disadvantages

Advantages

The GOsC and the HPC each has its own regulatory history and this affects their current ways of working. Size also has an impact. Good quality regulation is expensive and therefore, the income of any Council is likely to have an impact on its capacity. There are also likely to be economies of scale, so that more funds are likely to be available to employ staff and develop systems.

Advantages of regulatory bodies include the opportunity to develop:

- a) common and coordinated approaches for all regulatory functions;
- b) joint approaches to communications;
- c) shared IT and back office functions;
- d) common policies and procedures;
- e) common approaches to risk management.

There are concerns that each profession under the HPC will not necessarily be represented on its Council, although all professions are represented on the Education and Training Committee. However, it is argued that representation is a strategy built on low trust, because it assumes that unless a member of the group is present in the decision forum itself, the viewpoint of that group will be ignored. The key is to find a way of giving full voice to a position and seeking to see where it can be modified without jeopardising fundamentals. This cannot be done by relying on a single person to represent it in a debate, defending it against the unforeseen.

Integration into the HPC might provide a defence for the public against 'regulatory capture'. This is where a regulator becomes sympathetic to the interests of those they regulate and acts to protect their interests.

It is doubtful whether integration within the HPC would be necessary to achieve all of these aspirations. For example, the Council for Healthcare Regulatory Excellence (CHRE) endorsed a jointly-agreed Statement of Common Values, produced by the Presidents and Chief Executives of the regulatory bodies. This statement has already influenced the latest iteration of the GOsC Code of Practice. CHRE could be used as the route towards achieving greater consistency in the regulation of health professionals.

Disadvantages

It has been recognised that there are close links between the regulation of service quality and the activities of the practitioner. Any practitioner employed within the NHS is subject to a variety of regulatory regimes. The National Consumer Council (1999) has also expressed particular concerns about private sector practice. Most osteopaths, unlike the majority of health professionals regulated by the HPC, work outside of the NHS and there may, therefore, be no other regulatory systems in operation, apart from contacts with the regulator. Consequently, it can be argued that robust and comprehensive professional self-regulation arrangements, specifically designed to manage the risks associated with that profession, are even more vital. The Better Regulation Task Force (2000) said "We think the profession itself is best placed to lead on matters of professional incompetence. This is because professional input will always be required when specialist technical issues arise." This document also identified single-handed practitioners as a particular regulatory challenge.

Other regulators have suggested that the existing HPC processes may be appropriate for the groups that the HPC currently regulates, but have expressed doubts that they are robust enough for professions that are mainly provided through private practice. Responses to a recent HPC consultation indicated that not enough awareness and attention was being given to those working single-handedly, or outside the infrastructure of a major organisation, and those who are self-employed. Nevertheless, the HPC does currently regulate two professions – physiotherapy and podiatry – who have significant numbers of practitioners in private practice (see full report at www.osteopathy.org.uk).

On the surface it might appear that giving responsibility for the regulation of osteopaths to the HPC would result in significant cost-efficiencies. However, it is possible that the current high level of engagement with their regulatory body that individual osteopaths demonstrate might decrease as they experience the impact of becoming one of a group of over 150,000 registrants, derived from 13 professions, rather than one of a 3,500-strong, individually regulated profession. For the HPC to provide the same level of expert profession-focused support currently enjoyed by GOsC registrants, is unlikely to produce any economies of scale.

Yet without such support, more might find themselves in fitness to practise difficulties and/or the public protection benefits of professional self-regulation might be diminished. Furthermore, any cost-benefit analysis would have to take account of the reality that because most osteopath registrants are self-employed, there are fewer opportunities and mechanisms at a local level to prevent inappropriate complaints being presented to the regulator. The current diversity of health regulators, coupled with the opportunities for collaborative working and sharing of good practice given by the CHRE,

offers ideal conditions for innovation in the regulation of health professions to emerge, and for peer pressure to successfully influence the early adoption of good practice.

Tighter, swifter and more effective decision-making processes are undoubtedly beneficial for governance, and it is reasonable to suggest that this might be more likely to be achieved by a smaller, uniquely focused regulator such as the GOsC. Indeed as Appendix 4 of the full report demonstrates, the GOsC deals with its professional conduct cases more rapidly than the larger HPC.

Observations

The importance of governments undertaking Regulatory Impact Assessments (RIAs) of any policy change has been noted nationally and internationally. RIAs should include a statement of need for the proposed action; an examination of alternative approaches; an examination of the benefits and costs – quantitative and qualitative – of the proposed action and the main alternatives identified by the analysis. Seeking out the opinions of those who will be affected is also deemed to be important. The Department of Health trumpets its 100% compliance with its commitment to producing RIAs and, therefore, it seems reasonable to assume that there ought to be an RIA produced in association with the Foster Report. Any such RIA is likely to be hampered by the same things that have made this review challenging, i.e. how to make

sound, defensible judgements about the relative robustness of the GOsC versus HPC procedures and processes, in the primary function of public protection, when there is no research evidence available, merely assertion and anecdote.

Osteopaths seem to value the process of professional self-regulation, as evidenced by them consistently responding to consultations in much greater numbers than registrants of other health regulatory bodies. It has been suggested that lobbying by the statutory bodies limited the scope of change under the 1999 Act which established the HPC, and so any influence on the outcome of the Foster Review is likely to be most successfully exerted by the GOsC energetically presenting the issues in such a way that they are fully understood by all stakeholders, and full and frank debate regarding the benefits and the risks of any proposed changes is encouraged.



Thomson Closing dates

June		July		August	
Altrincham	09-06-04	Weston Super Mare	08-07-06	Aylesbury	04-08-06
Crawley	09-06-04	York	08-07-06	Burton	04-08-06
Ashford	16-06-04	New Forest	08-07-06	Doncaster	04-08-06
Basingstoke	16-06-04	Crewe	08-07-06	Sandwell	04-08-06
East Cornwall	16-06-04	Eastbourne	15-07-06	Barnsley	11-08-06
Newcastle	16-06-04	Glasgow East	15-07-06	Bridgend	11-08-06
Swansea	16-06-04	Glasgow North	15-07-06	Northampton	11-08-06
Canterbury	23-06-04	Glasgow South	15-07-06	Hastings	11-08-06
Sheffield	23-06-04	Glasgow West	15-07-06	Kingston	18-08-06
Tunbridge Wells	23-06-04	Enfield	22-07-06	Lanarkshire	18-08-06
Ipswich	30-06-04	Hertford	22-07-06	Manchester	18-08-06
		Peterborough	22-07-06	Sunderland	18-08-06
		Southport	22-07-06	Bath	25-08-06
		Bolton	29-07-06	Cambridge	25-08-06
		March	29-07-06	Dudley	25-08-06
		Stamford	29-07-06	Exeter	25-08-06
		Scarborough	29-07-06	Reading	25-08-06

Cut-off dates for advertising in the GOsC Corporate Box in your local areas. Contact Thomson directories on tel: 01252 390447 prior to the final booking date if you have not been contacted by sales staff.

www.osteopathy.org.uk

To keep up-to-date with the latest GOsC, osteopathy and healthcare news, log on regularly to the GOsC Public Website: www.osteopathy.org.uk



Website features

- Latest news
- Leaflet ordering service
- Find an Osteopath online
- Osteopathy and the NHS
- Research
- CPD
- Press releases and case studies
- Picture library
- Case studies and statistics



FOUNDATION COURSE IN PRESCRIPTION ORTHOSES

This course includes: - practical podiatric biomechanics, foot techniques, gait analysis and instructions on how to prescribe and cast custom made orthoses.

Did you know orthoses can help with chronic and acute pain such as:

- ▶ **Fore-Foot:** Pes cavus, pes planus, calluses, bunions, cramping, metatarsal pain and neuromas.
- ▶ **Rear-Foot:** Heel pain/spurs, growing pains, Achilles tendonitis and plantar fasciitis.
- ▶ **Gait:** Knee, hip, pelvic and lower back pain, diabetes, arthritis and poor posture.

Pegasus orthoses have evolved over a 15 year period under the management of one of the UK's leading podiatrists. Our orthoses sell themselves because they have a 100% success rate. We make a thinner, lightweight and more versatile product than anyone else. Our product is made of one piece, rather than several components and therefore can easily fit into any shoe and satisfy the needs of even the most demanding of cases.

By prescribing Pegasus orthoses you will complement your patient's healthcare with the best orthoses available in the world today, whilst significantly boosting your income.



"Having worn orthoses for the best part of my career, I am now enjoying fantastic results with the Pegasus insoles.
Many Thanks"

Professor Laurie Hartman
Osteopath

CALL TODAY TO REGISTER FOR THE FOLLOWING COURSES
SPACES ARE LIMITED

Sunday 18th June, Sunday 27th August and Sunday 8th October

Tel: +44 (0) 1923 260452

- ▶ Course location: The Stanborough Centre, Watford, Hertfordshire, WD25 9JL.
- ▶ 1 day course costs £175 per delegate.
- ▶ Cost includes refreshments, starter pack & certificate of attendance for 7 HOURS CPD.

Pegasus Orthoses (UK) Ltd 10 Abbots Road Abbots Langley Herts WD5 0AZ
Tel: 01923 260452 email: info@pegasusorthoses.co.uk

Promoting Osteopathy – GOsC Regional Conferences 2006/7

As reported over the past few months, plans for the next season of GOsC Regional Conferences are well under way. All aspects of the event planning have been influenced by feedback from past conferences and the recent profession-wide survey. The GOsC has also enlisted the help of a working group to develop the programme and ensure the conferences are as relevant and beneficial to the profession as possible. The group comprises members of the Communication Committee and osteopaths with a special interest in this area.



Theme

Feedback over the past few years has shown a notable interest in promoting and marketing osteopathy and so this will be the focus for 2006/7. It has been suggested that in business most people are driven to a greater or lesser degree by three primary motives: making a name, making a living and making a difference. Achieving any or all of these goals is intrinsic to success in professional life. The 2006/7 Conference programme offers an opportunity to explore the means of ensuring osteopathy is a flourishing, respected and effective practice in UK healthcare.



Proposed programme

Session I

Promoting the professional identity – the GOsC role and your role

- Consolidating "osteopathy" within a competitive market
- Generating professional pride / confidence / cohesion – what needs to be done?
- Creating and communicating clear and consistent messages
- GOsC promotional activities – do they exist?

Session II

Researching the product

- Market research as an effective promotional tool
- Practice-wide survey – auditing your practice
- Gathering and sharing data
- Knowing your audience and their needs

Session III

Unique selling points – making a difference

- How does osteopathy make a difference?
- What makes a patient choose an osteopath over other healthcare providers?
- Identifying and communicating the unique selling points of osteopathy
- The power of 'Word of Mouth Marketing'

The GOsC can now confirm the dates and venues as listed below and will publish venues and further details of the programme along with booking forms in the July issue. **Should you have any questions about the conferences, please contact Nicole Tripney on tel: 020 7357 6655 ext. 222 or email: nicolet@osteopathy.org.uk.**

GOsC Regional Conferences 2006/7

Series I: Autumn 2006

Saturday 30 September 2006
Saturday 14 October 2006
Saturday 11 November 2006

Region 1: Northern England – Leeds area
Region 2: South-West England & South Wales – Bristol area
Region 3: London & Eastern Counties – North London/M25 area

Series II: Spring 2007

Saturday 3 February 2007
Sunday 4 March 2007
Saturday 24 March 2007

Region 4: Central England & North Wales – Kidderminster area
Region 5: Scotland & North-East England – Edinburgh area
Region 6: London & South-East England – Gatwick area

More GP workshops scheduled

The GOsC is planning to hold a further two interactive GP workshops during summer, as part of its objective to provide promotional support to the osteopathic profession. Equipping osteopaths with effective methods of communicating with GPs and other primary care practitioners,



these regional workshops aim to increase awareness of osteopathy and the practitioner's patient base. They offer a unique opportunity for osteopaths to work together with a view to "marketing" osteopathy with consistency and confidence.

Workshop leader and osteopath **Robin Lansman DO** says, "Reflective practice is intrinsic to building our role as primary carers. Even more so is the ability to clearly verbalise what we are aiming to achieve for our patients."

The key elements of the interactive workshops include:

- The osteopathic identity: How do osteopaths see



themselves? How do other health professionals see osteopaths?

- What are GPs needs? What can the osteopath offer?
- Establishing partnerships with local practices
- Making a presentation: preparation & delivery

- Presentation content: GOsC promotional toolkit
- Practical demonstrations: The standing exam
- Managing the sceptics

The next full-day workshops will be held at **Osteopathy House, London on Friday 28 July** and in **Taunton on Friday 4 August 2006** (venue to be confirmed). Complete and return the **enclosed booking form** to secure a place at either of these locations. Note that numbers will be limited to 24 to ensure the workshop is as effective as possible and places will be allocated on a first-come, first-served basis.

As reported previously, additional workshops will be organised based on regional demand. **Contact the Communications department on tel: 020 7357 6655 ext 242 / 222 or email: gpworkshops@osteopathy.org.uk if you wish to request a workshop in your area.**



British School of Osteopathy CPD Courses: www.bso.ac.uk/cpd

PRELIMINARY COURSE IN OSTEOPATHY IN THE CRANIAL FIELD

The basic level 5-day course is approved by the SCTF and includes the detailed anatomy and physiology specific to the involuntary approach, together with instruction in the basic principles of diagnosis and treatment procedures. Approximately half of the contact time is devoted to practical instruction in groups of 4 participants to 1 tutor giving intensive, participant-centred tuition in practical skills.

Dates: Sunday 3rd, Monday 4th, Tuesday 5th & Friday 15th, Saturday 16th September 2006
Course Fee for the 5-day course: £920. A deposit of £100 is required upon application.

Location for the above courses: The British School of Osteopathy, 275 Borough High Street, London SE1 1JE

For an application of any of the above courses to be sent to you, please contact
Gayda Arnold – 0207 089 5315 or g.arnold@bso.ac.uk

Last chance to join Team Osteopath



Osteopaths and students from around the UK will be taking part in this year's **British 10K Run on Sunday, 2 July 2006**. Starting at Marble Arch at 9.30am, the route takes runners through the

centre of London, finishing at the Cenotaph in Whitehall.

Team Osteopath will be raising much-needed funds for this year's chosen charity, **Sports Leaders UK**, which aims to promote healthier lifestyles by using sport to deliver leadership training to young people. Trainees often live in the socially and economically deprived communities of the UK and the Sports Leaders UK helps people to turn their lives around. Sports Leaders UK core values include:

- Developing leadership – teaching people the ability to organise activities, to lead, motivate and communicate with groups.

- Developing skills for life – helping people reach their true potential.
- Providing a stepping stone to employment – offering a qualification to get started.
- Encouraging volunteering in communities – motivating others to organise safe sporting activities in their communities.
- Reducing youth crime – keeping young people engaged in positive activities.
- Supporting more active, healthier communities – by providing Sports leaders to organise a range of physical activity sessions.

For further information about Sports Leaders UK visit their website at: www.bst.org.uk.

The race is open to all ages and abilities and places are still available. If you are interested in taking part, contact the GOsC Communications department on tel: 020 7357 6655 ext. 226 or email: susanm@osteopathy.org.uk.

GOsC Code of Practice commended

The **British Association of Communications in Business (CIB)** has praised the GOsC's *Code of Practice* in its annual award scheme. The **Fitness to practise folder** was entered into the prestigious CIB Awards 2006 by the designers HSAG. The judge said:

"The challenge facing the General Osteopathic Council (GOsC) was to produce a high quality, legally binding code of practice for osteopaths that is both easily understood, and updateable. On the one hand, patient expectations and law changes necessitate a flexible approach. However, cost considerations must be taken into account as GOsC is a non-profitmaking organisation, carefully scrutinised by the profession. The answer is the Fitness to Practise folder which is effective on many levels:

Firstly, because it is contained in a hardy folder, inserts can be added on a regular basis, keeping Osteopaths updated with the latest developments and changes to legislation. The expected shelf life of the *Code of practice* is five years, so its robust design works well.



The design is very much in keeping with the target audience, reflecting nature in the floral leaf motif and neutral colours. However, I have a small concern that this is at the expense of legibility in some sections – white text on grey is hard to read in some light, and the grey on white type sometimes caused eyestrain whilst reading. This is not a major criticism because the aim of the

folder is not for recreational entertainment, but it does make it harder to concentrate on the content.

The language is simple, direct and un-ambiguous – exactly as it should be for a code of practice. I really liked the tone which, whilst direct and crisp, seemed approachable as well. I especially liked the extensive index which seems very comprehensive.

Overall, this is a very effective package that will fit well in an Osteopath's office, is sturdy enough to last the 5 years expected of it, and – most importantly – written well enough to meet the demands of the audience. Although it is low cost, it looks and feels highly professional."

Primary Care 2006 - refreshing skills & knowledge

Ian Swash MSc DO DipEd FRSB MCIM, Oxfordshire

Despite the hunger amongst many osteopaths to be recognised as primary healthcare professionals, sadly, few were evident among the thousands of delegates who flocked to the 'Refresh' Primary Care conference and exhibition held at the NEC on 4-5 May.

However, those osteopaths who did make the journey to Birmingham were amply rewarded by an event which, on this occasion, lived up to its star billing as the UK's leading conference in the field of primary health and social care.

For practitioners who have still to experience Primary Care, the sheer size and scope of this event can be hard to imagine. For the organisers, the challenge of programming and catering for upwards of 4000 GPs, nurses, midwives, PCT managers, pharmacists and allied health professionals (physios, occupational therapists, dieticians etc.) disseminated over ten lecture theatres, each with its own



programme yet linked to one central timetable, is a daunting prospect. Add to this a 200 strong exhibition force and you really do have all the ingredients for a logistical disaster.

Somehow it all works, and as far as Primary Care 2006 was concerned it could not, eponymously speaking, have been more refreshing. The AHP programme in particular – packed to standing room on the second day – probably contained some of the best and most ably presented material on musculoskeletal medicine that it has been my privilege to see.

In that category, one could say that clinical physiotherapist specialist Anju Jaggi's presentation on the 'Classification and Conservative Management of Shoulder Instability' should be compulsory for all manual therapists, especially osteopaths who, if my practice is anything to go by, see an ever-increasing number of problematic shoulder joints; not all of which are the result of sports activity. Some are, of course, and for the sport orientated practitioner, Dr Zoë Hudson, the associate director and senior clinical lecturer in sports and exercise medicine at Barts and the London delivered entertaining and informative lectures on 'Rehabilitation and Return to Sports Action' and 'Effective Therapeutic Interventions for Overuse Sports Injuries'.

Other subjects covered in the AHP programme included 'Physical and Postural Management in Adults with



Complex Neuro-disability' presented by Sue Hall, Royal Hospital for Neuro-disability, London and 'Adjusting to Chronic Pain' by Dr Anna Louise Mandeville, consultant clinical psychologist, UCLH. Finally, for "craniophiles" and potential converts, Mike Harrison delivered a thought-provoking distillation of material on

the benefits of 'Cranio-Sacral Therapy for the Treatment of Neuromuscular Disorders'.

Sad then that so few osteopaths were there to see it, or to learn from informed sources what NHS Practice-based commissioning may mean for the future of musculoskeletal medicine in the private sector.

Ah well, maybe next year ...

As a regular participant at the Primary Care exhibition, the GOsC aims to raise awareness of the osteopathic profession amongst primary care practitioners. Local osteopaths once again assisted staff on the stand and sincere thanks goes to **Michael Lokko, Rosemary McCauley, Bharpoor Sohal and France Quirin** who kindly volunteered their time and clinical expertise.

Demonstrations by the osteopaths helped draw a crowd and a steady stream of positive clinical and general queries were fielded over the two days. There has been a notable shift in interest at this event over the past few years from general questions concerning what osteopathy is to how osteopaths can help in the provision of best care for patients. Questions this year focused primarily on conditions that are appropriate for referral, osteopathic provision on the NHS, commissioning osteopathy and finding local registered practitioners. There were, as always, the usual concerns about personal conditions.

A continued presence at these major healthcare events serves not only to raise awareness of the benefits of osteopathy within the primary care team and to increase osteopathic provision on the NHS but also, importantly, to reinforce osteopathy's place as a key provider of integrated healthcare.

If you would like further information about the GOsC's participation at these events, or to volunteer for a forthcoming event, contact the Communications department on tel: 020 7357 6655 ext. 222 or email: nicolet@osteopathy.org.uk.

Promoting Osteopathy at The Back Show, London, 15-16 July 2006

The Back Show is taking place at London Olympia on Saturday 15 and Sunday 16 July and will be the first consumer event in the UK to bring together back pain sufferers and specialist health professionals in the field.

Affecting people of all ages and fitness levels, 80 per cent of the UK population experience back pain at some stage in their lives. In an attempt to address this problem, The Back Show aims to provide information about current treatment options, helping sufferers to make informed choices about their care.

A broad range of exhibitors from across the country will be on hand to demonstrate the latest products, services, exercise techniques and medical advice, covering prevention, rehabilitation and management. The 'Therapies' category of exhibitors currently includes Osteopathy, Physiotherapy, Chiropractic, Sports Therapy and the Alexander and Bowen Techniques.

In addition to more than one hundred exhibitors, visitors will also be able to take advantage of free educational seminars and demonstrations, with experts exploring current research and treatments and offering practical advice.

Organisers are anticipating 8-10,000 visitors over the two days and have already launched a major national



marketing campaign across print and broadcast media.

The GOsC identified this as a potentially high profile event and are, therefore, proposing to have a substantial osteopathic presence, with the aim of maximising this event as a promotional opportunity for osteopathy.

The GOsC is involved on a number of levels:

- Prominent exhibition stand, including osteopaths keen to assist with technique demonstrations and fielding clinical and general enquiries.
- Seminar speaker and demonstration sessions to be led by osteopaths Clive Lathey (golf), Bryan McIlwraith (car ergonomics), Carina Petter (pregnancy) and Robin Lansman (body awareness).
- Free entry for all osteopaths – **voucher included below.**

Volunteers needed

Osteopaths interested in joining GOsC staff on the stand should contact the Communications Department on ext 222 or email: nicolet@osteopathy.org.uk. For more information about The Back Show, visit: www.backexpo.co.uk or tel: 0870 272 0011.





CPDO

2006

Date	Title	Tutor / lecturer	Cost	Deposit
Weekend courses				
<input type="checkbox"/> 11-12 Nov	IOT I: Lumbar & thoracic spine and ribs	Prof. Laurie Hartman	£195.00	£125.00
<input type="checkbox"/> 17-18 June	IOT III: SI joints, pelvis and LEX	Prof. Laurie Hartman	£195.00	£125.00
<input type="checkbox"/> 7-8 Oct	IOT IV: Developing and advancing osteopathic technique	Prof. Laurie Hartman	£195.00	£125.00
<input type="checkbox"/> 2-4 Nov	Visceral osteopathy: the thorax	Jean-Pierre Barral		Full
<input type="checkbox"/> 21-22 Oct & 25-26 Nov	Osteopathic care in pregnancy & optimal fetal positioning	Avenile Morgan	£395.00	£225.00
<input type="checkbox"/> New dates: 3-4 June & 1-2 July	Osteopathic Neuromuscular "rehabilitation"	Prof. Eyal Lederman	£395.00	£250.00
<input type="checkbox"/> 7-8 Oct & 11-12 Nov	Harmonic technique	Prof. Eyal Lederman	£395.00	£250.00
<input type="checkbox"/> 30 Sept -1 Oct	How to treat sports injuries: the lower body	Chris Boynes	£195.00	£125.00
<input type="checkbox"/> 24-25 June 9-10 Sep	Osteopathic care of small animals	Anthony Pusey	£465.00	£250
<input type="checkbox"/> 18 Nov	Osteopathic care of small animals: Revisited	Anthony Pusey	£105.00	Pay in full
<input type="checkbox"/> 24 June	Practical ergonomics and musculoskeletal health	Damon Peterson	£105.00	Pay in full
<input type="checkbox"/> 21 Oct	Improving motor control in the elderly: an exercise approach	Dr Dawn Skelton	£105.00	Pay in full
<input type="checkbox"/> 11 Nov	Nutritional assessment practical workshop	Dr. Adam Cunliffe	£105.00	Pay in full
<input type="checkbox"/> 17 June	Introduction to sports taping New course	Tom Hewetson	£125.00	Pay in full
<input type="checkbox"/> 4 Nov	From treatment to exercise	Matthew Walden	£105.00	Pay in full
Evening courses				
<input type="checkbox"/> 15 June	How to treat: chronic disc	Prof. Eyal Lederman	£40.00	Pay in full
<input type="checkbox"/> 28 Sept	How to treat: Frozen shoulder	Prof. Eyal Lederman	£40.00	Pay in full
<input type="checkbox"/> 26 Oct	How to treat: Tennis elbow	Prof. Eyal Lederman	£40.00	Pay in full
<input type="checkbox"/> 23 Nov	How to treat: Whiplash injuries	Prof. Eyal Lederman	£40.00	Pay in full
Evening lectures				
<input type="checkbox"/> 8 June	Prevention of falling and fractures in the elderly	Dr Dawn Skelton	£20.00	Pay in full
<input type="checkbox"/> 22 June	The myth of core stability	Prof. Eyal Lederman	£20.00	Pay in full
<input type="checkbox"/> 5 Oct	Update on mechanisms of pain and pain management	Prof. Martin Koltzenburg	£20.00	Pay in full

Name:
Address:
Telephone:
E-mail:

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

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

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

Tel: 0044 (0) 207 263 8551 / e-mail: cpd@cpdo.net / www.cpdo.net

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.

New CAM guide for back pain

BackCare, the charity for healthier backs, has compiled a new, evidence-based guide to complementary and alternative therapies for back pain.

Osteopathy features in the 'Hands-on therapies' category alongside chiropractic, massage, acupuncture and reflexology. The guide considers the scientific evidence base for each therapy, giving the reader the opportunity to compare available treatments. It states that osteopathy is most likely to help with pain that has been present for less than six weeks, muscle strains or postural conditions.

In 2005, BackCare carried out a survey amongst members and visitors to its website. Most of the 2240 who took part had suffered from back pain for over a year. They were asked which of a long list of alternative and complementary therapies they had used and how helpful they found them. The results of the survey are published in the new guide. Among those who had tried osteopathy, 36% reported benefits lasting for six months or more, 38%



reported temporary relief and 18% said it hadn't helped at all.

Author of the book and long-term back pain sufferer Christine Gratus said, "The most important aspect of the booklet is that it is evidence-based ... and states which therapies have been scientifically tested and which haven't. Most instances of acute back pain do resolve themselves in time, but people understandably want to do all they can to speed up the process and feel they are helping themselves to recover as quickly as possible."

The booklet costs £2.50 including postage and packaging. To order a copy, call tel: 020 8977 5474, or go to www.backcare.org.uk/catalog.

BackCare has also extended the operating hours of its telephone helpline and introduced a new cheaper rate telephone number – 0845 130 2704. The helpline offers impartial information, advice and support for people living with back pain, their families, employers and health professionals.

NHS told to abandon alternative medicine

On the day the Prince of Wales urged the World Health Assembly to promote an "integrated and holistic" approach, some of the UK's leading doctors called for NHS trusts to stop offering patients complementary therapies. In a letter to all 476 acute and primary care trusts in England, and published in *The Times* newspaper, the group called for the trusts to review their practices and "ensure that patients do not receive misleading information about the effectiveness of alternative medicines."

Led by Michael Baum, Emeritus Professor of Surgery at University College London, and including Professor Edzard Ernst, Professor of



Complementary Medicine at the University of Exeter, the 13 signatories expressed their concern over the funding of "unproven or disproved treatments" on the NHS: "At a time when the NHS is under intense pressure, patients, the public and the NHS are best served by using the available funds for treatments that are based on solid evidence."

Both the GOsC and National Council for Osteopathic Research issued a response to *The Times* and the GOsC distributed a press release to national, regional, consumer and healthcare print and broadcast media (see www.osteopathy.org.uk/media). In this, the GOsC calls the letter "irresponsible and counter-productive" – GOsC

Chief Executive Madeleine Craggs was quoted by the BBC as saying, "All recognise the value of evidence-based practice, but given the lack of funding for controlled trials, an interim solution may be to pilot more integrated services."

Supporters of complementary medicine, including many from within the medical profession, questioned the evidence base for some areas of orthodox medicine and applauded the role of complementary care in the well-being of patients. Dr Michael Dixon, a GP and Chairman of the NHS Alliance, said of the authors of the letter, "none of them represents any GPs or anyone in primary care. It seems to me odd that these clinical barons should be telling those of us who have to deal with daily human suffering what to do."

What you can do

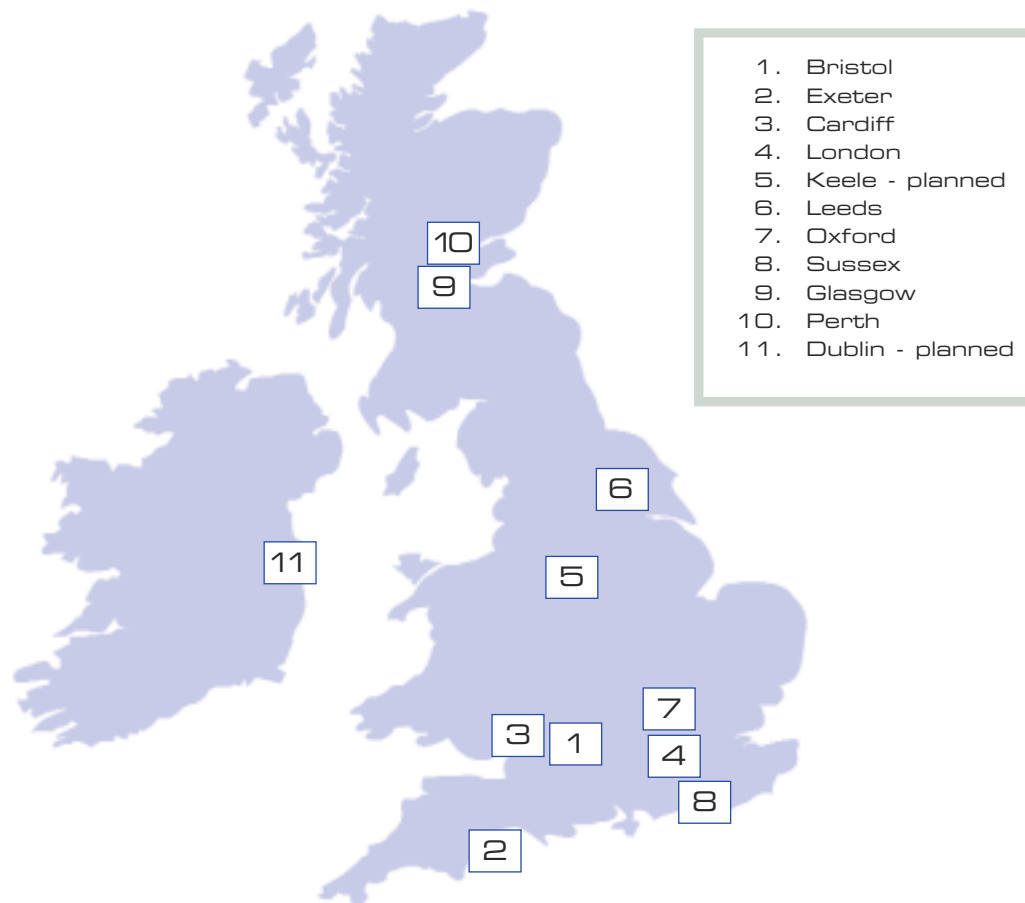
Your patients are invaluable in providing support for the osteopathic profession. Once again, we would encourage any of your patients who have shown a particular interest in this recent news story to contact their local press with their positive experiences of osteopathy. And, for you to contact us with material we can develop with the media.



NCOR Research Hubs

The number of research hubs created around the UK continues to grow. Scotland now has two hubs based in Perth and Glasgow. Two further hubs are planned based in Dublin and Keele (Staffordshire).

Location of research hubs in UK and Ireland



The development of a standardised data collection tool has been proceeding in many of the longer established hubs. Some of those hubs are now undertaking slightly different forms of activities and these are listed below.

BRISTOL

Thursday 29 June, 7–9pm

Back pain in children and school bags – what is the evidence?

Thursday 7 September, 7–9pm

Osteopathy and the treatment of hypertension – what is the evidence?

EXETER

Saturday 3 June, 10am to noon

The BEAM trial – discussing the economic implications

Saturday 7 October, 10am to noon.

GLASGOW

Monday 5 June, 7–9pm

Discussing the topic areas to be included in a standardised data collection tool for osteopathy

HAYWARDS HEATH

Sunday 11 June, 10am to noon

Examining the Ernst and Canter systematic review

Sunday 24 September, 10am to noon

LEEDS

Tuesday 20 June, 7–9pm

Examining the Ernst and Canter systematic review

Tuesday 12 September, 7–9pm

LONDON

Tuesday 11 July, 7–9pm

Examining the Ernst and Canter systematic review

OXFORD

Wednesday 13 September, 7-9pm

PERTH

Sunday 4 June, 2–4pm

Discussing the topic areas to be included in a standardised data collection tool for osteopathy.

The National Library for Health Complementary and Alternative Medicine

The National Library for Health Complementary and Alternative Medicine Specialist Library (CAM SL) was launched at the Royal London Homoeopathic Hospital on Monday 15 May, 2006. The library can be accessed at: <http://www.library.nhs.uk/cam/>.

The CAM SL is one of the 24 Specialist Libraries which are an integral part of the **National Library for Health (NLH)**,

a library and information service for the NHS, aiming to deliver a range of services on a 24-hour basis to support patient care, staff development and research.

NHS health professionals' interest in and use of complementary and alternative medicine is increasing rapidly. The CAM SL aims to provide access to the best available evidence in the field of CAM. Although the content of the library is intended primarily for health professionals and CAM practitioners and researchers, most of the information is also accessible by both patients and carers.

The CAM SL is being developed by the Royal London Homoeopathic Hospital, the Research Council for Complementary Medicine, and the School of Integrated Health at the University of Westminster. The project team led by **Dr Peter Fisher** works closely with an Editorial Board and an External Reference Group of key stakeholders including NCOR, GOsC and representatives of other practitioner organisations.

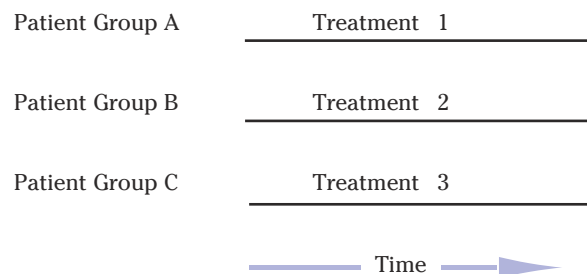
Evidence-based practice tutorial: Randomised controlled trials – an introduction

A clinical trial is a method for comparing objectively, by a prospective study, the results of two or more therapeutic procedures. It aims to compare the responses of a test group of patients receiving a new treatment with those of a **control group** (see Glossary) who are receiving a standard treatment (or existing treatment) or occasionally a placebo or no treatment at all. The use of controls is important to substantiate claims of therapeutic efficacy for a procedure.

What is a randomised controlled trial?

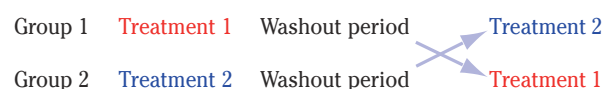
Randomised controlled trials (RCTs) are one type of clinical trial design. They are regarded by the scientific community as the "gold standard" in terms of evidence when conducting primary research into healthcare interventions. RCTs are commonly associated with pharmacological research and are less easily adapted to the study of complex interventions such as osteopathy.

RCTs can use either a parallel design or a cross-over design. A parallel design uses two or more groups of patients who are studied concurrently; each group receives one of the possible treatment interventions being studied. The parallel design is illustrated in the diagram below.

Parallel study design

Parallel design is most common; it is more likely to require larger numbers of patients than a cross-over design, but it is suitable for looking at both short and longer term conditions. Also, a parallel design trial is less likely to be affected by complications and patients dropping out than cross-over designs.

In a cross-over design, two or more therapies or treatments are administered in random order to the same group of patients. For example:

Cross-over study design

Research

Why are randomised controlled trials needed?

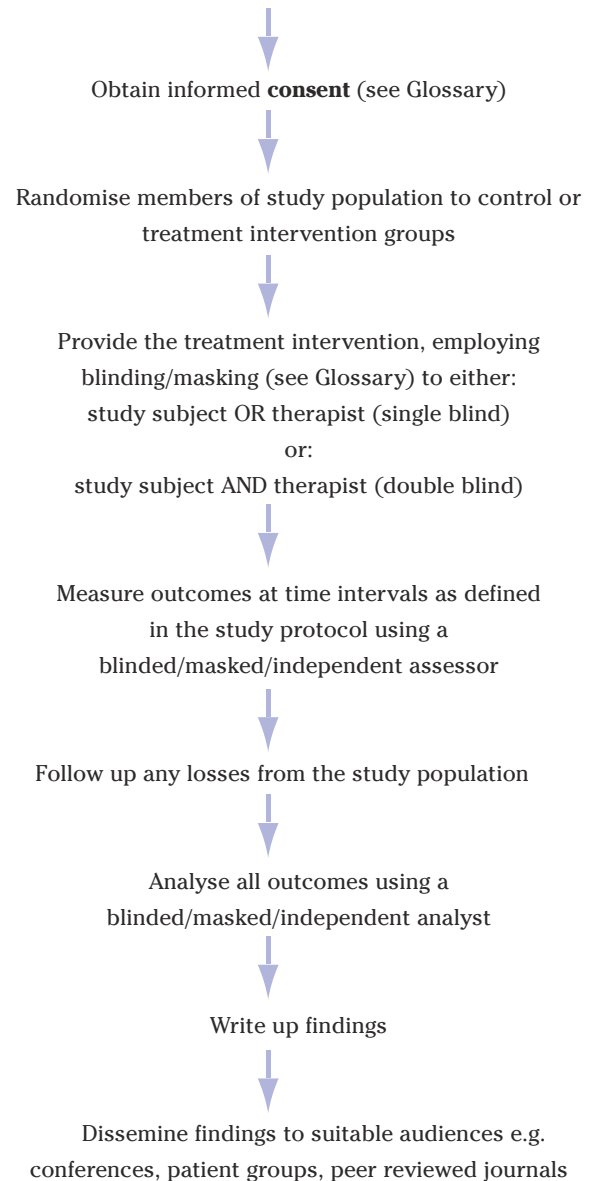
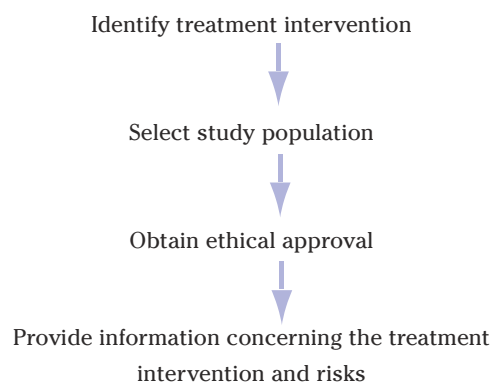
If a simple trial is conducted with no comparison (control) group, the outcome observed cannot be attributed to the treatment intervention with any great degree of confidence.

Non-randomised controlled trials may be difficult to interpret, since not all of the subjects have the same chance to receive the treatment intervention and/or the control and intervention group may differ in terms of age, sex, height, weight or other features that may be relevant to the final outcome of the study. **Random allocation** attempts to make the intervention groups as similar as possible in terms of these factors. Random allocation is achieved using tables of random numbers or computer generated random numbers, for example using sites such as www.random.org.

Concern inevitably arises over the ethical issues of assigning patients at random to an untreated group when a test treatment is believed to be advantageous. Randomisation is essential to avoid bias in assigning individual patients to test or control groups. Hence the randomised controlled trial is now regarded as the essential tool for assessing clinical efficacy.

Randomisation is one of two main strategies to minimise bias in clinical trials; the **double-blind technique** (see Glossary) is another. However, in small groups of patients, groups can still end up being poorly matched and a compromise solution is to split the groups into blocks of, say, eight patients with four patients for group A and four for group B. Another difficulty with **simple randomisation** is that the two groups can turn out to be ill-matched with respect to a variety of characteristics including age, sex or disease severity. The chance of mismatch decreases as the size of the group increases. In small scale trials **stratified randomisation** is used to avoid this difficulty. For example the subjects can be divided into age categories and random allocation to each group can be used within each category.

How is an RCT conducted?



The randomised controlled trial is only one of a number of research designs. Further information concerning other research designs will be presented in future evidence-based practice tutorials.

Glossary

Blinding/masking: This is the method of concealing the allocation of a sample of people, for example to an experimental group or a control group during the research process. This can be concealment from the individuals involved in the research process (**single blind**) or concealment from both researchers and research participants (**double blind**). The term "masking" is now commonly used in place of "blinding".

Consent: The process whereby a patient freely agrees without coercion or pressure to be involved in a research project. Consent can only be given when a full explanation of the process, potential risks and rewards

have been fully explained to the patient and presented to them as a formal document in a form in which they are able to understand (for example, translated into their language, Braille or auditory version). Written consent is required from all participants in a research study. If this cannot be given by the patient involved, it can be given by a legal representative, guardian or other responsible appointed adult at the participant's behest.

Control group: The group in an experimental process that is not exposed to an intervention/treatment. This group can then be compared to the group receiving treatment to study the effects of the intervention.

Further information concerning jargon in research groups can be found at www.ncor.org.uk in "Evidence-based practice tutorials", in the section headed Osteopathic Research.

Journal scan

Kier AL, McCarthy PW. Cerebrovascular accident without chiropractic manipulation: a case report. *J. Manipulative Therapeutics*. 2006;29:330-335.

This case study discusses the case of a patient who presented for treatment for chronic headache. The patient was a 49-year-old farmer who reported a non-traumatic chronic episodic head and neck pain which varied in intensity. Examination and X-ray results did not highlight any worrying features, merely suggesting a mechanical neck disorder.

However, the patient had raised blood pressure 180/95mmHg and a family history of stroke; the patient also reported bilateral tinnitus and vomiting when the pain was severe. The chiropractor involved referred the patient back to his GP for further investigation with no manipulative treatment being delivered. Unfortunately, the patient was admitted to hospital following a cerebrovascular accident.

The author cautions that the warning signs for the patient were in the case history even though examination and provocative testing were apparently unremarkable.

Slade SC, Keating JL. Trunk strengthening exercises for chronic low back pain: a systematic review. *J. Manipulative Therapeutics*. 2006;29:163-173.

This systematic review was carried out by two independent reviewers who followed the Cochrane Back Review Group and the QUORUM Statement guidelines to complete the review. Thirteen randomised controlled trials, appraised and judged

to be of high quality, were included. The results can be summarised as follows:

For long term pain:

- trunk strengthening is more effective than no exercise.
- trunk strengthening is less favourable than fusion in cases of severe degeneration.
- trunk strengthening is less effective than McKenzie exercises.

For function:

- intensive trunk strengthening is more effective than less intensive.
- trunk strengthening has significant effects after disc surgery.

Motivation strategies increase effectiveness. The authors concluded that it was unclear whether the observed benefits were due to tissue loading or movement repetition.

Wormesley L and May S. Sitting posture of subjects with postural backache. *J. Manipulative Therapeutics*. 2006;29:213-218.

The authors of this study investigated whether individuals who experienced backache adopt a sitting posture for longer periods and have a more flexed posture than subjects in a group who experienced no backache.

An initial questionnaire was given to subjects and those who reported a history of "serious" backache were classified as belonging to either a postural backache group or a non-backache group. The average time spent in different postures over a three-day period was established using an activity diary to plot activity every 5 minutes. The average length of sitting time was not found to be remarkably different between the two groups.

Periods of uninterrupted sustained sitting (often associated with studying) and the degree of flexion in relaxed sitting were significantly greater in the group reporting postural backache.

Research news in brief

The United States National Cancer Institute has reported their findings that an osteoporosis drug, Raloxifene, is as effective as Tamoxifen in reducing the risk of breast cancer, but demonstrates fewer side effects. (Source: www.royalsociety.org)

The Cochrane Library has recently published a study demonstrating that adding calcium to cereals has no effect in strengthening the bones of children. (Source: www.updatesoftware.com/Abstracts/AB005119.htm)

The Journal of the American Medical Association has published a study by British scientists which suggests that conditions particular to travelling on a long-haul

Research

flight, such as low air pressure and reduced oxygen, do not increase the risk of potentially lethal blood clots. The study suggests that the clotting is chiefly caused by sitting down for too long in a confined space. (Source: www.royalsociety.org)

A new drug has become available for the treatment of restless leg syndrome. Adartel will be used to treat this condition, which was first reported over 300 years ago in the London Practice of Physick. (Source: www.royalsociety.org)

Forthcoming courses and conferences

22–25 June 2006: The ESO 5th International Conference "The Dimensions of the Palpatory Space". Boxley. For further information and a registration form, please contact Corinne Jones, International and Postgraduate Manager. Telephone: 01622 671558 or email: corinnejones@eso.ac.uk.

Saturday 30 September 2006: Physiotherapy, Osteopathy and Chiropractic: Moving forward through research and practice. School of Health Professions, Robert Dodd Building, University of Brighton, 49 Darley Road, Eastbourne BN20 7UR. Registration details can be found at www.brighton.ac.uk/sohp

5–8 October 2006: 9th International Congress of the German Osteopathic Association (VOD). Wiesbaden, Germany. This includes the **Third International Symposium on Advances in Osteopathic Research** (Saturday 7 October 2006). Deadline for abstract submissions: 1 July 2006. **Abstracts can be emailed to f.schwerla@German-AFO.de**

4–5 November 2006: British Osteopathic Association's Annual Convention and Trade Exhibition.

12–14 December 2006: 14th Annual Symposium on Complementary Health Care. University of Exeter. Further information can be found at www.pms.ac.uk/compmed/symposium.

Exhibitions

Any osteopaths interested in refreshing their knowledge of anatomy may be interested in **BODIES – The Exhibition** which is being held at Earls Court, London until July. Further information can be found at www.bodiestheexhibition.com.

NCOR hits back at Ernst

Osteopaths across the country will all be aware of the widespread media coverage of a recent review of the efficacy of spinal manipulation (Ernst and Canter 2006), which hit the headlines on Wednesday, 22 March 2006. Publishing the findings in the April issue of the *Journal of the Royal Society of Medicine* (JRSM), the authors concluded that, "the data did not demonstrate that spinal manipulation is an effective intervention for any condition. Given the possibility of adverse effects, this review does not suggest that spinal manipulation is a recommendable treatment."

In response to the attack on the osteopathic and chiropractic professions resulting from the sensationalist press release issued by the RSM, the Chair of the National Council for Osteopathic Research (NCOR) **Professor Ann Moore** (right), hit back.



In an article published in the May issue of the journal *Manual Therapy* (Volume 11, Issue 2), Professor Moore and colleague Professor Gwen Jull, from the University of

Queensland, Australia, question the methodology of the review and the true value of systematic reviews. They note that several studies showing the benefits of manual therapy were omitted, pre-existing systematic reviews were not critically appraised, and the authors' comments "appeared to be selectively biased ... the systematic review is only as good as the original studies it includes and the systematic reviewers' interpretation of the studies."

They also call for all professions involved to devote time to the well-designed research and evaluation of interventions and the definition of manual therapy terminology to avoid misinterpretation.

Manual Therapy is available on a subscription basis – see www.sciencedirect.com/science/journal/1356689X. NCOR (www.ncor.org.uk) are also currently awaiting confirmation of publication of their formal response to the *Journal of the Royal Society of Medicine*.

Osteopaths @ Worcester

Foster Review briefing

Sue Brazier DO, Worcester

Osteopaths @ Worcester held a meeting on Thursday 11 May, attended by GOsC representatives **Jane Langer** and **Madeleine Craggs**, to enable osteopaths to find out more about the Foster Review.

Jane gave an update of the campaign, the role of the advisory committee and the response by the profession so far. It was a lively debate with some useful tips from colleagues on making our patients aware of the situation and how we can lobby our local MPs.

No one knows what will happen to us if we come under the HPC. Maybe nothing will change, and just

maybe we will all be grouped together and given the title 'manipulative therapist'? How would we be affected if we were merged with physios and chiropractors and given a 'new' name? We could lose our 'osteopath' title; we may not, but isn't it better the devil you know?

The gathering of osteopaths was extremely useful and for some it has brought a realization that we **must** do something to protect our self-determination and our profession in general. If you haven't registered your choice – supportive or not – please return your voting slip to the GOsC now and make your views count.

London Osteopathic Society

Hypermobility – 29 June

Tony Longaretti DO, London

Our much anticipated evening devoted to hypermobility was recently rescheduled due to the indisposition of both speakers and the revised details are as follows:

When: Thursday 29 June 2006

Where: Room G.06 UCL, Roberts Building, Torrington Place, London, WC1E 6BT (Tubes: Goodge St / Euston Road, also nearby are Warren St / Russell Square).

Programme:	6.15pm	Registration
	7pm	Prof Rodney Grahame – 'Hypermobility'
	8pm	Refreshments
	8.30pm	Josephine Halsall – 'An Osteopathic Approach to Hypermobility'
	9.30pm	Close

Cost: Members will be charged £10 and non-members £25. There is no need to book, just turn up on the night.

This topic was originally planned for 10 May, but we were able to substitute it with a very important discussion on the Foster Review, with representatives

from the GOsC. This was followed by a salutary talk by Dr Paul Lambden (pictured right), author of *The Osteopath's Guide to Keeping Out of Trouble*. Copies of the book were given away on the night to selected individuals.

Additional events are planned for September and November, so please keep an eye on the events page on our website – www.zyworld.com/los. You may have noticed that downloads on our site are now available in .PDF format, making them easier to download. Adobe Reader software, needed to view these files, is also available free so that everyone can benefit and details of past presentations, instructions on how to obtain them and viewing software can all now be accessed via our download centre.

We are keen to provide links to other regional societies on our website so that we can improve communication with the wider profession. If you are happy to be included, please email your details to Tony Longaretti, email: tony@longaretti.plus.com.



CPD resources are listed for general information. This does not imply approval or accreditation by the GOSc.

Osteopathy and cancer – a personal view

Martin Preston BSc Ost, Wiltshire

Cancer is a major health problem in our society. As primary healthcare providers, how involved should we be? Osteopaths can't cure cancer, we all know that. So what can we do? What can we offer people who may get or who may already have cancer? Should we offer them anything at all? Should we wash our hands of them and say 'not my speciality'? Should we be actively involved? How does this affect our identities as 'osteopaths'?

For me, 'patient choice' is a fundamental aspect of osteopathy. We provide impartial information so that patients can make their own decisions. We don't dictate, we only inform. So where does our duty lie?

The prevalence of cancer is still increasing. Rates have more than doubled over the last 30 years and are predicted to double again in the next 20 years (Cardy & Sikora *Cancer in 2025*).

It is not just the elderly. Cancer is increasing in all age groups. The National Audit Office reported in 2004 that five-year survival rates in England have increased by only 12% in 30 years. The Eurocare-3 study showed that five-year survival rates in the UK are below the European

average, trailing way behind France, Sweden, Germany and Austria, and only just ahead of Poland, Latvia and Estonia. This is despite the fact that billions of pounds have been spent on research. Perhaps part of the problem is that practically all the research is focussed on a limited list of orthodox treatments – surgery, chemotherapy and radiotherapy. Hardly anything is spent on finding ways to reduce incidence in the first place.

Currently, approximately one in three people develop cancer and about one in four actually die as a result. So during a career in osteopathy, if you treat a total of, say, 10,000 different people, you will have worked on about 3000 who will have cancer at some



time. Many of the others will be indirectly affected by cancer through friends and relatives. Whether we like it or not, cancer is a major part of our practice lives. What are our responsibilities to these people? What is our 'duty of care'?

As front-line healthcare providers, our first duty is to be prepared. How confident are you that you will spot a patient with cancer? What CPD courses are there to help maintain and polish our diagnostic and inter-personal skills? I have had the experience of having to send patients with suspected cancer straight back to their GP. Tact, diplomacy, consideration and confidence are all essential attributes in this situation. How many of my colleagues have been through similar events? How prepared did they feel? What do you do and how do you feel when a new patient dies within a fortnight of first seeing him?

Such experiences make you stop and think. Was there anything else I could have done? I'm an osteopath, not an oncologist. It's not my concern. I've got other patients to look after. Let me focus on them.

But ... how many of them will also develop cancer? Hundreds of them, possibly thousands. This is why I am

more and more active in providing information for my patients on simple ways to reduce the risk.

Our healthcare culture places an overwhelming emphasis on cure rather than prevention. This is seen very clearly in the approach taken towards cancer. If your kitchen sink was overflowing, would you reach for the tap or for the mop? As far as I can tell, most cancer research funding goes into the equivalent of designing a better mop while the tap is left to run.

This is illustrated by the fact that Britain had its first ever Cancer Prevention conference (www.canceractive.com), which I attended, just a few months ago. The one-day event back in November, in London, was organised by CANCERactive. Speakers came from both sides of the



allopathic/natural divide and represented research groups, campaign groups and Government.

It was claimed that prevention is central to government strategy, particularly for cancer, heart disease and diabetes. However, there was little mention about government policy on the chemicals used in consumer products. This is a political and economic hot potato and widespread use of carcinogenic, mutagenic and endocrine – disrupting chemicals is a major cause for concern.

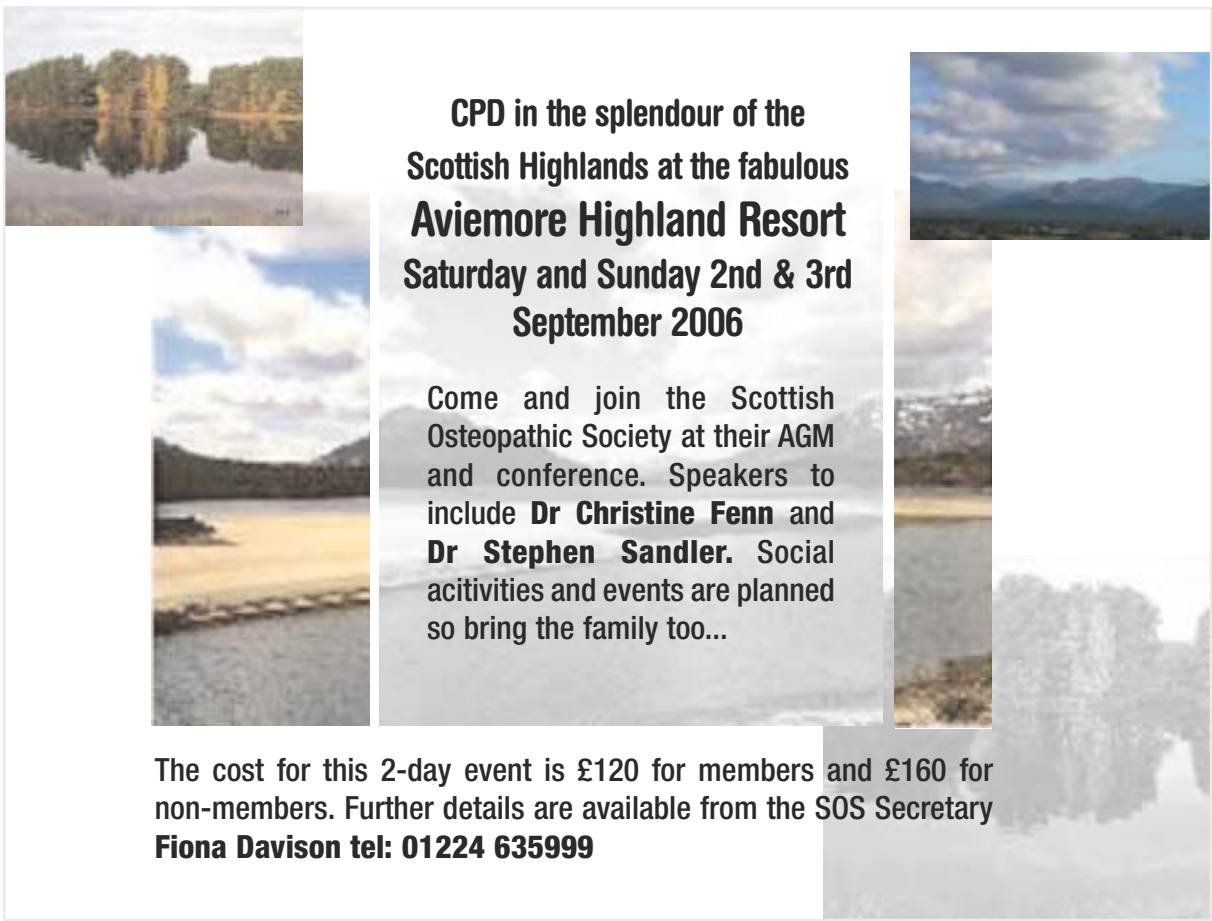
All in all, it was a fascinating day and an excellent first attempt at what I hope will become an annual event. I particularly liked the mix of orthodox and complementary attitudes and thinking, which generated an atmosphere of both debate and co-operation. In this regard I feel there is a strong parallel with osteopathy. We are in the middle ground between the two worlds – we are holistic and natural as well as being grounded on sound scientific principles.

The very occurrence of this Cancer Prevention conference marks a highly significant development in medical thinking. We see government officials and highly respected scientists sitting down and talking with

nutritionists and environmental campaigners. The social and clinical implications are immense.

In the meantime, what can we do as individual osteopaths? I have no plans to develop an expertise in the 'osteopathy of cancer'. On the other hand, I do have to accept that many of the people who come to me for help will end up developing cancer. I cannot force learning upon my patients, but I do try to educate them about how to avoid the potentially cancer-causing chemicals that can be found in so many day to day consumer products. The choice then lies with the patient.

CancerActive is running a Cancer Prevention fortnight from 13–26 November 2006. They are also compiling an index (free entry) of therapists who are prepared to treat cancer patients. They particularly recommend cranial treatment as part of the mix. For more information, visit www.canceractive.com. Martin Preston is the Team Osteopath to the Red Devils Freefall Team. If you would like to do a tandem skydive with a Red Devils instructor and raise money for CANCERactive contact Martin on T: 07786-732304 or 01672-564583



CPD in the splendour of the Scottish Highlands at the fabulous Aviemore Highland Resort Saturday and Sunday 2nd & 3rd September 2006

Come and join the Scottish Osteopathic Society at their AGM and conference. Speakers to include **Dr Christine Fenn** and **Dr Stephen Sandler**. Social activities and events are planned so bring the family too...

The cost for this 2-day event is £120 for members and £160 for non-members. Further details are available from the SOS Secretary **Fiona Davison tel: 01224 635999**

Painless practice - 25 June

On **25 June 2006**, James Butler (right) will be running a Painless Practice CPD day, 9.30am – 5pm, at the Peartree Holiday Inn, Oxford. With a range of interactive challenges and topics for debate, the course will explore a number of key areas covered in the recently published Business Development Handbook which James co-wrote with BOA Chief Executive, Michael Watson.



The course is designed to get you thinking about your practice – what makes it unique, how you can build your patient list and what you want from your business in the future – a fresh approach to development that aims to spark new ideas and workable action plans.

To reserve your place at the Oxford CPD day (at a cost of £95.00) contact James Butler on tel: 01491 659073 or email: james@painlesspractice.com.

Clinical Rehabilitation Workshop Berlin, 2 September

The Virchow Rehabilitation Centre, at Berlin's Charite Hospital, will be hosting a Clinical Rehabilitation workshop **Saturday 2 September 2006**.

Speaker and BSO Sports Clinic tutor Robin Lansman DO is putting together a three-day trip for BSO students with limited places available for qualified osteopaths. The course is also likely to be in conjunction with the Institute for Applied Osteopathy in Berlin.

The workshop will cover practical rehabilitation techniques in depth, helping osteopaths to manage patients after orthopaedic surgery, major trauma and road traffic accidents. It will also include:

- Tour of the rehabilitation centre in Virchow
- Practical use of rehabilitation equipment
- Patient mix & co-operation with referring medical doctors – types of patients treated and their conditions
- Osteopathy in Germany and Extended Amulant Physical Therapy

- 10 Exercises for upper and lower extremity - for use in practice
- Electrotherapy - overview
- Ice/Fango cold treatment & heat pack therapy

The cost of the trip is still to be confirmed – but is likely to be in the region of £325.00 per person including the workshop, flights and two nights shared, guest house style accommodation.

The group will depart from London around midday on Friday, returning Sunday. There will be a group meal on the Saturday evening and some free time to tour Berlin on Sunday.

For further information, or to register your interest, contact Robin Lansman on email: practice@bodybackup.co.uk or tel: 01628 624 544. For information on the Charite Hospital, go to http://www.charite.de/kompakt/english/p2.00_frame.html

GOsC Promotional Material Ordering Service for Osteopaths



For further information on the leaflets and posters, telephone 020 7357 6655 ext 242 or visit www.osteopathy.org.uk

You may order leaflets and posters by submitting a publication order form with your credit/debit card details or we can invoice you. Orders can be made by post, email or fax. Leaflets cost £14.50 per 100 (plus p&p).

Osteopathic Sports Care MSc applications

Mike Gray, Course Leader, Leeds Metropolitan University

The closing date for applications to join the OSCA MSc in Osteopathic Sports Care at Leeds Metropolitan University (LMU) is fast approaching – **Monday 31 July**. Please remember that for logistical reasons intakes are restricted to every two years, so this is your last chance before 2008.

The course is offered part-time over two–five years and runs on a modular basis, with each taught module conducted over two residential weekends. There are five taught modules out of a total nine.

Three modules are covered during the first year, with the initial one looking at the role of osteopathy in sport and seeing how our osteopathic concepts can be integrated into the whole sphere of the sporting environment. The second module is the obligatory research module, which examines how to assess previous research and also how to conduct it yourself. The third explores the science of training and performance and will enable you to look at the scientific basis of physical activity and the functional adaptations involved in the process. These three modules equate to a postgraduate certificate.

The second year expands on the role of osteopathy in sport by looking at how we evaluate, manage and rehabilitate within a sporting context. This is followed by a module looking at the ways that monitoring and evaluation are conducted in sport and involves biomechanics, exercise physiology, nutrition and psychology. The final module of the second year is a negotiated learning process, which allows the student to complete a small project in a special interest area in relation to osteopathy and sport. A total of six modules qualify as a postgraduate diploma and the final three modules (dissertation) result in a Masters degree.

At a cost of just over £300 per module, and with the superb facilities of LMU, the whole package offers value for money.

For an application form, please contact:

**Mike Gray, Course Leader,
Leeds Metropolitan University,
Headingley Campus, Leeds LS6 3QS
Email: m.gray@leedsmet.ac.uk
Tel: 0113 283 2600 ext 3246**

BASIC COURSE IN APPLIED KINESIOLOGY

with certified teacher from the
International College of Applied Kinesiology - UK:
Tracy S. Gates D.O., DIBAK

EIGHT MODULES MONTHLY, HELD AT WEEKENDS

Course includes:

Basic AK principles and muscle testing;
Vertebral and peripheral joint analysis;
Assess & treat glandular dysfunction;
Orthomolecular nutrition and its application.

Venue: Horsham, West Sussex
Course starts: September 2006

**Don't miss the opportunity
to learn this valuable diagnostic tool!**

For further information, contact:
**ICAK-UK Central Office
Tel: 01403 734321
Email: admin@icak.co.uk**

Are you suffering from Practice Slump, need help with an Osteopathic career move, taking on an Associate or being an Associate, setting up a new practice?

With 35 years experience, Brian Joseph
offers advice and personal coaching in
Osteopathic matters

Seminars telephone mentoring and
practice visits:

Brian S Joseph DO
Practice Management Consulting

**Telephone: 020 8458 2586
e-mail: bs.joseph@virgin.net**

A selection of illustrated reference works for the osteopathic bookshelf

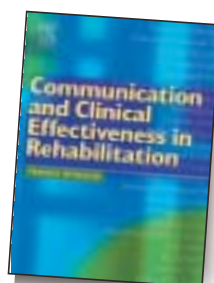
Books are available from Osteopathic Supplies Ltd,
Tel: 01432 263939, online shop: www.o-s-l.com



Arthritis – The complete guide to relief using methods that really work

Arthur C Klein
Published by Robinson
ISBN 1-84529-073-9
£9.99
561 pages

This reference text evaluates the results of public surveys exploring the differences between recommended treatments for arthritis and what sufferers of the condition say works for them. Also incorporating the results of a 2005 UK survey, this revised edition explores a wide range of current therapies, treatments and techniques currently available to arthritis sufferers. Nutritional advice and exercise regimes are also covered with 200 pages of illustrations.



Communication and Clinical Effectiveness in Rehabilitation

Frances Reynolds
Published by Elsevier
ISBN 0-7506-5665-4
£24.99
264 pages

Aimed specifically at manual therapy students working with chronic patients, this text explores the growing evidence which suggests that patient-centred communications maximises the outcomes of rehabilitation, together with the benefits of an integrated approach. Detailed case studies, extracts of patient experiences and reflective exercises aim to assist readers with their communication strategies and enhance patient care.

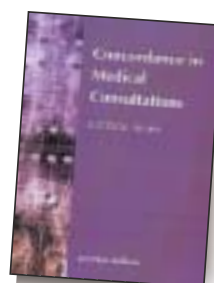


Manipulation of the Spine, Thorax and Pelvis – An osteopathic perspective

Peter Gibbon and Philip Tehan
Published by Churchill Livingstone/Elsevier
ISBN 0-443-10039-x
£45.59
269 pages

Written for manual therapists at all levels, the second edition of this text is a highly illustrated, step-by-step guide to 41 manipulation techniques commonly used in clinical practice today. Supporting theories for the safe and effective application of the techniques is also

discussed. Focusing specifically on the safe practice of high velocity low amplitude thrust techniques, the text is also supported by comprehensive demonstrations on a CD-ROM.



Concordance in Medical Consultations – a critical review

Kristian Pollock
Published by Radcliffe
ISBN 1-85775-841-2
£24.95
155 pages

The recent shift towards letting patients make treatment decisions is explored and questioned in this critical review. Providing an overview of current evidence and literature, covering such areas as patient involvement, patient consent, compliance and best practice, this text highlights the need for revision of current policy, culture and practice.



Handbook of Minerals as Nutritional Supplements

Robert A DiSilvestro
Published by CRC Press
ISBN 0-8493-1652-9
£85.00
254 pages

This handbook offers a comprehensive presentation and interpretation of the current state of research on various mineral supplements. Each chapter focuses on a particular mineral and explores the latest research pertaining to the mineral's ability to correct deficiencies which may compromise health. The text also explores positive and negative interactions between mineral supplements.

**If you would like to review
any of the featured titles
(in exchange for a free copy),
contact the editor at:
editor@osteopathy.org.uk.**

Back chat

Your letters



Dear Editor

Martin Collins' piece in the March issue of *The Osteopath* (2006) invites comment about setting up a National Archive for historical osteopathic material in the UK. This is an excellent idea. I suggest that this should be held at either the GOsC, assuming the government's response to the Foster Review goes well, or at the BOA if it doesn't go so well.

The profession owes a great deal to Martin for his service to the profession as an academic in a range of roles, including leading the BSO in recent years. Martin's commitment included training as an osteopath in the early 90's, even when he knew that his existing commitments would make the likelihood of finding time to practice limited. Martin has also promoted research for many years. He was a core initiator with Clive Standen to setting aside funds to develop some research activity at the BSO in the early '90s. Somehow Martin has managed to find time to continue his own historical research during this period, culminating in his book that has recently been published.

It would be an excellent use of money if an archive was established. I suggest that the GOsC and the BOA consider if they have any funds available for such an initiative. The total Martin mentioned was only \$6K set up costs and a further \$5K per annum for an archivist. I hope that the various schools contribute material and if they too would consider a financial donation. If something was set up I would be happy to make a personal contribution as I suspect some other osteopaths would too.

Finally, as Martin has stood down as principal at the BSO, I suspect that he may have some time on his hands. I can think of no better candidate to run the archive than Martin himself! If it comes into being, I suggest that we badger Martin into continuing to contribute to the profession by taking on the role of setting up the archive and being archivist to get the project into shape.

Steven Vogel DO, Head of Research, BSO



Dear Editor

Although I have now been retired from practice for a year, I still feel deeply attached to our profession and its future. I have seen many changes in the 48 years that I was in practice. Peter Jarvis mentioned some of these changes in his excellent letter published in the April edition of *The Osteopath*.

For many years I was Chairman of the General Council and Register of Osteopaths, and particularly in the period 1983 – 1992, I was involved in discussions with Government officers, the King's Fund and for four years was a member of a committee at the Royal Society of Medicine investigating the relationship between Complementary and Conventional Medicine. In all that time there was constant pressure for us to accept registration under the Council for the Professions Supplementary to Medicine Act.

This move to 'lump' us together with everyone from speech therapists to medical herbalists was firmly resisted by the profession, who examined the way forward through the 'consensus' meetings I chaired during those years, since it would have put us under the control of conventional medicine, and we would have had little say in our future development.

Now our profession has come almost full circle and finds itself facing choices and making decisions which faced us all those years ago.

DO NOT, I beg you, give in to pressure to give up your independent status and lose control of your future. To be amalgamated with other complementary therapies will only encourage, once again, orthodox medicine to seek control of your future. The only thing you MAY gain is less control in terms of regulation and a smaller registration fee. Hardly enough to warrant throwing away what our profession has gained.

Barry Unwin Lambert DO, Surrey

Have your say ...

If you would like to share your views or comments with other readers of *The Osteopath*, write to the editor at Osteopathy House, or email: editor@osteopathy.org.uk

Courses 2006

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

Module 5 – In Reciprocal Tension

8–12 June

Course Director Jeremy Gilbey. Organised by Sutherland Cranial College. To be held at Le Hameau De L'Etoile, Montpellier, France. Contact: tel: 01291 689908, email: admin@scc-osteopathy.co.uk (website: www.scc-osteopathy.co.uk).

"What is the patient really telling me?"

Deepening our understanding of the osteopath-patient relationship

11 June

Course Directors Mannie Sher, Fellow, British Association of Psychotherapists; Principal Consultant, Tavistock Institute, London; Danny Sher, Osteopath. Contact: tel: 020 8349 9399, email: sherdanny@hotmail.com.

Dental Factors in Osteopathic Practice Occlusion 1

17 June

Speaker Caroline Penn. To be held at Hatfield, Ross-on-Wye. Contact: email: caropenn@btopenworld.com (website: www.pennclinic.co.uk)

Introduction to sports taping

17 June

Lecturer Tom Hewetson. To be held at the Middlesex University, Archway Campus, Holborn Union Building, Highgate Hill, London, N19. Contact: tel: 020 7263 8551, email: cpd@cpdo.net.

Healthy Pregnancy

17 June

Lecturer Averille Morgan. To be held at the Middlesex University, Archway Campus, Holborn Union Building, Highgate Hill, London, N19. Contact: tel: 020 7263 8551, email: cpd@cpdo.net.

IOT III: SI joints, pelvis and lex – weekend course

17–18 June

Lecturer Prof. Laurie Hartman. To be held at the Middlesex University, Archway Campus, Holborn Union Building, Highgate Hill, London, N19. Contact: tel: 020 7263 8551, email: cpd@cpdo.net.

Basic Course in Osteopathy in the Cranial Field

17–21 June

Organised by The Cranial Academy, USA. To be held at Founders Inn, Virginia Beach, Virginia. Contact: tel: +317 594 0411, fax: +317 594 9299, email: info@cranialacademy.org (website: www.cranialacademy.org).

The Myth of Core Stability

22 June

Prof. Eyal Lederman. To be held at the Middlesex University, Archway Campus, Holborn Union Building, Highgate Hill, London, N19. Contact: tel: 020 7263 8551, email: cpd@cpdo.net.

Cranial Academy Annual Conference – Cranial in Special Needs Populations

22–25 June

Organised by The Cranial Academy, USA. To be held at Founders Inn, Virginia Beach, Virginia. Contact: tel: +317 594 0411, fax: +317 594 9299, email: info@cranialacademy.org (website: www.cranialacademy.org).

Module 5: In Reciprocal Tension

23–25 June

Organised by Sutherland Cranial College. To be held at Hawkwood College, Stroud, Glos. Contact: tel: 01291 689908, email: admin@scc-osteopathy.co.uk (website: www.scc-osteopathy.co.uk).

Module 5 IRT

23–25 June

Organised by the Sutherland Cranial College. To be held at Hawkwood College, Stroud, Glos. Contact: email: admin@scc-osteopathy.co.uk (website: www.scc-osteopathy.co.uk)

Practical Ergonomics and Musculoskeletal Health

24 June

Lecturer Damon Peterson. To be held at the Middlesex University, Archway Campus, Holborn Union Building, Highgate Hill, London, N19. Contact: tel: 020 7263 8551, email: cpd@cpdo.net.

First Aid appointed person course

24 June

Lecturer Alex Brazkiewicz. To be held at Craniosacral Therapy Educational Trust, Yoga Therapy Centre, London, N1. Contact: tel: 07000 785778, email: infor@cranio.co.uk.

Osteopathic care of small animals

24–25 June

Lecturer Anthony Pusey. To be held at the Middlesex University, Archway Campus, Holborn Union Building, Highgate Hill, London, N19. Contact: tel: 020 7263 8551, email: cpd@cpdo.net.

Osteopathic Care of Children Part 1

24–26 June

Course leaders Carina Petter and Carol Meredith. To be held at The British School of Osteopathy, 275 Borough High Street, London SE1 1JE. Contact: Gayda Arnold tel: 020 7089 5315, email: g.arnold@bso.ac.uk (website: www.bso.as.uk).

"What is the patient really telling me?"

Deepening our understanding of the osteopath-patient relationship

26 June

Course Directors Mannie Sher, Fellow, British Association of Psychotherapists; Principal Consultant, Tavistock Institute, London; Danny Sher, Osteopath. Contact: tel: 020 8349 9399, email: sherdanny@hotmail.com.

Cranio-Sacral Therapy – Introductory Day**1 July**

Lecturer Thomas Attlee. Organised by the College of Cranio-Sacral Therapy (CCST) 9 St George's Mews, Primrose Hill, London, NW1 8XE. To be held in London.

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

Neuromuscular "Re-Abilitation" – weekend course**1–2 July**

Lecturer Prof. Eyal Lederman. To be held at the Middlesex University, Archway Campus, Holborn Union Building, Highgate Hill, London, N19. Contact: tel: 020 7 263 8551, email: cpd@cpdo.net.

Introduction to cranial osteopathy**1–2 July**

Lecturer Ercilia De Marco. To be held at the Middlesex University, Archway Campus, Holborn Union Building, Highgate Hill, London, N19. Contact: tel: 020 7 263 8551, email: cpd@cpdo.net.

Module 2/3 - Osteopathy in the Cranial Field**3–7 July**

Organised by Sutherland Cranial College. To be held at Seminarhof Proitzer Muhle, Germany. Contact: tel: 01291 689908, email: admin@scc-osteopathy.co.uk (website: www.scc-osteopathy.co.uk).

Skills for Chronic Stress and Chronic Pain**A biodynamic exploration of CNS functional organisation maladaptive states and maladaptive states****5–9 July**

Speaker Katherine Ukleja. 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).

The Fluid Brain**5–9 July**

Speaker Katherine Ukleja. 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).

Cranio-Sacral Therapy Introductory Day**8 July**

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

Yoga and Osteopathy**8 July**

Speakers Rachel Ives and Dr Amanda Samson. Organised by CPD International. To be held at Greenwich University – Maritime Campus, London, SE10. Contact: tel: 07944 552093, email: office@cpdinternational.co.uk, (website www.cpdinternational.co.uk).

"What is the patient really telling me?"**Deepening our understanding of the osteopath-patient relationship****10 July**

Course Directors Mannie Sher, Fellow, British Association of Psychotherapists; Principal Consultant, Tavistock Institute, London; Danny Sher, Osteopath. Contact: tel: 020 8349 9399, email: sherdanny@hotmail.com.

Cranio-Sacral Therapy Introductory Course – Stage A of full professional training**15–20 July**

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

"What is the patient really telling me?"**Deepening our understanding of the osteopath-patient relationship****23 July**

Course Directors Mannie Sher, Fellow, British Association of Psychotherapists; Principal Consultant, Tavistock Institute, London; Danny Sher, Osteopath. Contact: tel: 020 8349 9399, email: sherdanny@hotmail.com.

Preliminary Course in Osteopathy in the Cranial Field**3 – 5 & 15 – 16 September**

Speaker Nick Woodhead. To be held at The British School of Osteopathy, 275 Borough High Street, London SE1 1JE. Contact: Gayda Arnold tel: 020 7089 5315, email: g.arnold@bso.ac.uk (website: www.bso.as.uk).

Module 2/3 Osteopathy in the Cranial Field**8 – 10 & 15 – 17 September**

Course Director Peter Cockhill. Organised by Sutherland Cranial College. To be held Columbia Hotel, London. Contact: tel: 01291 689908, email: admin@scc-osteopathy.co.uk (website: www.scc-osteopathy.co.uk).

Lymphatic Motion**9 September**

Lecturer Averille Morgan. Contact: tel: 020 7263 8551, email: cpd@cpdo.net.

Osteopathic care of small animals – weekend course**9–10 September**

Lecturer Anthony Pusey. Contact: tel: 020 7263 8551, email: cpd@cpdo.net.

How to treat: frozen shoulder – evening course**28 September**

Lecturer Prof. Eyal Lederman. Contact: tel: 020 7263 8551, email: cpd@cpdo.net.

How to treat sports injuries – the lower body – weekend course**30 September – 1 October**

Lecturer Chris Boynes. Contact: tel: 020 7263 8551, email: cpd@cpdo.net.

Classifieds

RECRUITMENT

NEAR EPPING, ESSEX. Associate required for busy, friendly, mostly cranial practice. This is an excellent opportunity for someone who is interested in cranial work, and support will be provided. For more information please contact Connie Mansueto on 01992 814 620.

FULL OR PART-TIME osteopathic assistant needed to work in a multi disciplinary practice. Excellent support given for a new graduate who is willing to work hard. Must be willing to do a rota of evening and weekend work. Fifty percent increasing to sixty percent after three months if both parties suitable. Contact – Karen Graham (Practice Manager) (0141)889-8416 (West of Scotland)

ASSOCIATE OSTEOPATH required from July. Vacancy for an enthusiastic, well motivated osteopath for 2 – 3 days per week. Excellent working conditions and good rates of pay. Successful candidate will take over an established list in a busy practice in Chester working alongside three other osteopaths. An interest in I.V.M. and treatment of children is essential. Full support via tutorials will be offered. Opportunities within the locality to acquire additional work. Please contact: SALLY DEVEREUX or DEIRDRE STUBBS on 01244 371820.

NEW ZEALAND. Great associate opportunity in Northland – the best beaches! Varied and interesting practice requires all rounder with support and development offered. Contact Ben Evans on +64 9 4343833 (+11 hrs) or ben.evans@kiwilink.co.nz

ASSOCIATE REQUIRED for clinic in Plumstead SE18. All day Wednesday or Thursday. Saturday 9-3pm. Would suit BSO / BCOM graduate. Please call 07960 165 755

ASSOCIATE OSTEOPATH required for rapidly expanding osteopath led multidisciplinary clinics on N.Wales / Cheshire borders. Motivated / Professional person with a bias towards structural and soft tissue techniques an advantage. Telephone: Bruce Hewett (01352) 731818

ASSOCIATE OSTEOPATH REQUIRED in established practice in Reigate Surrey. Applicant will have passion for their discipline with a strong desire to build on existing skills. An interest in paediatric work, in addition to the usual caseload is essential. Initially 2 days per week to include a sat morning rota. please send CV to practice manager at 81 Nutley Lane, Reigate, Surrey RH2 9HA

OSTEOPATH REQUIRED, 3 – 4 days per week, for busy multi-disciplinary practice in North Yorkshire market town. This position is ideal for a recent graduate and offers the benefit of close professional support, working as part of a team and opportunity for personal and professional development. Minimum commitment of two years. C.V. and enquiries to Mark Young, Ripon Natural Health Centre, 27 Market Place, Ripon, North Yorkshire, HG4 1BN

WE ARE LOOKING TO RECRUIT another osteopath to join our team with experience working with adults, babies and children. For more information about this position and how to apply please visit www.fop.co.uk/opportunities.html
Melinda and Andrew Cotton Fulham Osteopathic Practice
www.fop.co.uk

OSTEOPATH REQUIRED at the Blackberry Clinic in Milton Keynes, one of the largest multidisciplinary clinics in the country with own fully equipped Gymnasium including the latest Pilates equipment, seeing approx 3000 patients per month. For more information visit our web site www.blackberryclinic.co.uk

If interested please send your CV to Mrs G Bruce, Blackberry Orthopaedic Clinic, Blackberry Court, Walnut Tree, Milton Keynes, Bucks. MK7 7PB or email: gillianb@blackberryclinic.co.uk

NATUROPATHIC OSTEOPATH needed to fill vacancy near Peterborough in a rural setting. Initially 2 days per week, could become more. Working with other Osteopaths, Acupuncturists and Naturopaths. The clinic puts a strong emphasis on lifestyle, prevention, risk assessment and patient management. Call Alison on 01487 830877.

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.

COMMERCIAL

HARLEY STREET W1, ROOM TO LET quiet spacious room with electric couch, wireless broadband access, in multi-disciplinary medical practice. Mondays and / or Thursdays 9.00am – 6.00pm, suit registered osteopath with own client list. Tel: Dr Alice Greene on 07815 763 570

FOUR BEDROOM HOUSE & PRACTICE (Derbyshire). Modern fittings, well maintained. Ample car parking. Practice run part-time. Turnover £67K (gross) Good Will Free property value to secure sale (\$199,000). Accounts available 4 years. Contact: 0789 6573194.

OSTEOPATHIC TREATMENT ROOMS FOR SALE Stockport Cheshire. Ground floor, fully furnished and self contained with parking. On A6 within 5 minutes of town centre. About 800 case records, McManus treatment table available. \$79,950 s.t.c. Contact Buckley & Co. 0161 480 3880 for full details.

WEST END OF LONDON TREATMENT ROOM:- Prestigious suite in prime location near Baker Street station with excellent transport facilities and parking free of congestion charge. Day and evening sessions available at low rental. Tel: 020 8201 7200 or 07984 801 231

GOODWILL FOR SALE: NOTTINGHAMSHIRE. Thriving practice established 30 years, with scope for expansion. Located in centre of busy market town, situated on main road with excellent transport links. Half an hour from beautiful Peak District. Ground floor accommodation, on site parking, two fully equipped consulting rooms. Excellent working relationship with GPs and local orthopaedic surgeons. Contact Lisa on 07845 873074, or email mallfree@doctors.org.uk

TREATMENT TABLE, Akron popular electric, as new condition, 4 years old, buyer collects. Cost of same model new is \$900.00, this one is yours for \$750.00, onro. Contact Chris on 01780 764756. (Stamford, Lincs).

PRACTICE AND PREMISES FOR SALE. Croydon / Addiscombe South London. Prime location. Centre busy local shopping area. Purpose converted corner house: waiting room, reception, 2 surgeries, utility, wc, upstairs office, bedsit, kitchen, bathroom, wc. (or 1 bed flat). Detached garage and parking. Fitted to high standard. Healthy practice mainly structural (6 fig t/o) lots of scope to increase patient flow. Established Medico-Legal examination centre. www.addiscombeosteopaths.com Contact David Campbell: 07736 180111

NZ IMMIGRATION OPPORTUNITY – PRACTICE FOR SALE and ASSOCIATE OSTEOPATH REQUIRED. Taupo clinic to be sold – five day / wk clinic, seeing 50 – 60 patients per week: offers considered. Associate wanted for Rotorua and Matamata – both of these are 5 day / week clinics, currently seeing over 200 patients per week in total, with computerized client databases established over 13 years. Also, see www.bodysmechanics.co.nz for details. Please email your enquiries to: Sally or Jerry Jelenski, bodysmech@extra.co.nz and include your email, and telephone numbers.

SELLING OR BUYING A PRACTICE, advice and instructions from Brian Joseph 020 8458 2586.

I AM LOOKING FOR GOODWILL in north east/west (Yorkshire and Lancashire) preferably from a structural osteopath. All areas considered. Goodwill does not have to include the premises. Please reply in writing to box number 5487

GOODWILL FOR SALE: GILLINGHAM / KENT. Cranial and structural practice established within a Friendly environment as a part of the sunlight center, very little overheads and good referral from medical network: GP, Nurses, Health Visitor, Midwives. Contact Xavier on: 07729398425 or bodylinks@fsmail.net

NEWLY QUALIFIED? Looking for Equipped Room at reasonable rate to start your practice? In foremost South Manchester Leisure Centre with holistic approach to sport and leisure. Negotiable rate. Contact Barry or Dave, tel: 0161 912 2980; e-mail: barry.comar@traffordleisure.co.uk

COURSES

FOUNDATION COURSE IN PRESCRIPTION ORTHOSES FOR OSTEOPATHS. This course includes: - practical podiatric biomechanics, foot techniques, gait analysis and instructions on how to prescribe and cast top of the range custom made orthoses. Call to register for the following courses: - Sunday 18th June, Sunday 27th August and Sunday 8th October. Tel: 01923 260452 email: info@pegasusorthoses.co.uk

OSTEOPATHIC CENTRE FOR ANIMALS. Postgraduate diploma in osteopathy for animals. New 1 year course starts July 2006. Learn to apply your osteopathic skills to the treatment of horses and dogs using traditional osteopathic principles. For information contact STUART MCGREGOR DO. Tel: 01235 768033 Email Wantageclinic@msn.com

Advertisement rates

B&W

Cover Positions n/a

Full Page n/a

1/2 Page £150

1/4 Page £100

1/8 Page £80

2-Col

Cover Positions n/a

Full Page £250

1/2 Page £200

1/4 Page £140

1/8 Page £90

4-Col

Cover Positions n/a

Full Page £300

1/2 Page £220

1/4 Page £160

1/8 Page £100

(Classified Section)

Up to 40 words – £40, thereafter 20p per word



SUTHERLAND Cranial College

OSTEOPATHY IN THE CRANIAL FIELD

Module 2/3 on the SCC Pathway

A six day non residential course

Course Directors: Peter Cockhill BA (HONS), DO, MSCC

and Susan Turner MA, DO, MSCC

8-10 & 15-17 September 2006

Columbia Hotel, London

48hrs CPD Fee: £1380

FOUNDATION COURSE

Module 1 on the SCC Pathway

A three day residential course

Course Director: Alison Brown DO, MSCC

6-8 October 2006

Tintern Abbey, Wye Valley

24hrs CPD Fee: £795

THE SPARK IN THE MOTOR

Module 7 on the SCC Pathway

A three day non residential course

Course Director: Peter Armitage DO, DPO, MSCC

3-5 November 2006

Columbia Hotel, London

24hrs CPD Fee: £835

ROLLIN BECKER MEMORIAL LECTURE

R. Paul Lee DO, FAAO, DABMA

FLUIDS AND FIBRES:

OSTEOPATHY'S SPIRIT AND MATTER

5:00PM, 25 November 2006

Cavendish Conference Centre, London

PAEDIATRIC CLINICAL SCREENING

Pre requisite in preparation for Part I

A two day non residential course

20-21 January 2007

PAEDIATRIC OSTEOPATHY PART I

Module 9 on the SCC Pathway

A three day residential course

16-18 February 2007

PAEDIATRIC OSTEOPATHY PART II

A three day residential course

Course Director: Susan Turner MA, DO, MSCC

27-29 April 2007

Modules 5 – 9 can only be taken after successful completion of Module 2 and Module 3 or equivalent.

SCC Administration, PO Box 91, NP16 7ZS

Telephone: 01291 689908 Fax: 01291 680056

Email: info@scc-osteopathy.co.uk

Website: www.scc-osteopathy.co.uk

City & Guilds Accredited Teacher Training Centre. Charity No 1031642

Lower Limb Biomechanics

QWJ\JR
Q NNXCQN

VASYLI
THINKTANK
...from head to foot



; >,, nj { |)xqUk, n()Uv k)Kixv nl qj wl |)
nfyn{mwł n)l j y}~{nmox{), x~)xw)M_M

[nl nr€n)}qr)|~yn{k)nm-l j }rxwj ų}xxų x{ }q': B>3j k|xu}nu)Q NN

Nws,, j wqx~{xqdpqz~j ų,, kixv nl qj wl |)€mxcj wv j }rxw
j wnxv j pn{,, 7nnlyxngj }{r{}}Yqruty_j |,, ųmmv xw{ }j }n
kixv nl qj wl j ųl xwnjrxw)|~l qj |v n}j }j {j ųpj 5/qrv)/yuv/5
t wnnjy rvj wnx, n)kj lt yj rvwngj |,, 511 n| |)€mxc) ųy | 7)
Uj {wj kx~})~k}j ų {wn~}j ųyx|tjxwvp5}{n}l qrp)nf)l r|n5
ux,)m.n)j yrpj wnx{ }qx}l qnj }& x~unvpj wnx{ } }rpj

|qr|)rwx{v j }r€n)M_Mr|)Q NNxql qj {pn3)
|x{nl nr€n,, x~{l xy,, l xv yun}n}qr)| ųy)
j wnx{ }~{w}j }x}qnj mm{n| |)knux, C



Nf1 ę |r€n)M| }{tk~}x{C



canonbury
healthcare

, , , 7j |,, ų7xv 8v nml j u

, , , 7j wvkw~{,, 7xv

Yunj |n|nwnv ,, Q NN_j |,, ųUk, n()Uv k)Kixv nl qj wl |)M_M

Wv n
Y{ j }l dn
Jmm{n /
) Yx{ }l xmm
/nu
Nw j nu

~j |,, ųM_MXam{5j wvkw~{,, 5 }j }v n|/ xj n5k{ j l t un,)WW<)@b
3kamfuv t)nn}xjxwnjnyj j l dn7