

the OSTEOPATH

The magazine for Osteopaths

April 2007

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In this month:

**Reforming healthcare
regulation**

In Council: March 2007

New GOSc Chairman

Osteopathy@work

Osteopathy in Africa



Climate of change

GENERAL OSTEOPATHIC COUNCIL



The General Osteopathic Council

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Registrar's report

As we enter the new financial year, we also enter our 10th year and will soon mark the first decade of the establishment of the GOsC – some of you may recall that we were daring enough to 'open shop' on 1 April! With the passing of one decade, we enter the changes and challenges of the next.

Council Members, in designate status, predated the establishment of the GOsC. Only one of the original Members, our present Chairman, **Nigel Clarke**, remains today, but his term of office will end on 8 May 2008. He has decided to stand down as Chairman ahead of this date, to facilitate the transfer between himself and the new Chairman. The Council meeting scheduled for 1 December 2007 will be his last, so he will spend his final months on the back benches.

A Chairman designate has been elected to secure a period of adaptation. Members chose **Professor Adrian Eddleston** to lead them, hopefully for the next five years or more. This period promises challenges of its own, including a further Government review of healthcare regulation, currently planned for 2011. There is a profile of Professor Eddleston, a highly-respected and most able successor to Nigel Clarke, on page 9.

On the Council changes front, we are very sorry to lose **Bryan McIlwraith** as the member elected by the Northern Ireland osteopaths. His highly valuable contribution will be missed, but we fully understand the demands and challenges of long-distance commuting and its impact on professional and personal life. We hope Bryan will remain involved with the GOsC as his time allows.

Perhaps at this point, as the news is leaking into the public domain, I should also mention my own retirement. It was to be on the 10th anniversary of my appointment (i.e. next week, as I write this!). However, because of the complexities around the White Paper and my historical knowledge of the GOsC and the profession, I have agreed to stay on until the end of the year to be involved in the initial working groups. A panel has been established to appoint my successor and the post will be advertised shortly. I do feel sad that my time with the profession is drawing to an end, but there is much to do before I leave so, thankfully, not too much time to dwell on this.

On the White Paper front, there is not as much to report yet from the Government as I had anticipated. When Council met on 13 March 2007, however, each chapter of



the White Paper was considered. For some of the themes, for example revalidation, Council could only re-affirm the position outlined in the GOsC's formal submission to the Review consultation and empower those from the GOsC ultimately appointed to the Government's working groups to make these points forcibly. For a summary of what we know so far, see page 6.

Within the White Paper reforms, the theme with most immediacy is that of Governance. Council has already been called upon, along with all other healthcare regulatory bodies, to reflect on its discussions and reach some decisions, in principle, about its future size and constitution. Council has therefore decided, by a majority vote, and in line with fellow regulators, to reform its constitution. It will seek the earliest available opportunity for legislative change, through a Section 60 Order, to give effect to:

- a. a Council comprising not more than 15 members;
- b. all members of Council appointed by the Appointments Commission, within parameters set by the GOsC;
- c. a lay majority of one;
- d. the Chair being elected from the membership of Council.

Council did not take these decisions lightly, being particularly concerned about the first two points above. As the decisions, however, do not preclude Council from establishing a mechanism by which osteopaths can be nominated to the Appointments Commission, nor from involving professionals in working groups to support the work of a smaller Council – where this is necessary – members were reassured that their decisions were appropriate to modern regulation. We will be discussing these issues at the forthcoming meeting of Regional Representatives at Osteopathy House on Friday 27 April and will report further in due course.

As I conclude this report, I have just learnt that, very sadly, **Anthony Pusey** has lost his battle against cancer. He was a passionate supporter of this profession and a source of great inspiration and advice to us all on the treatment of animals. Next month we will reflect on his contribution to osteopathy.

Madeleine Craggs,
Chief Executive & Registrar



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Healthcare regulation reforms underway

Government has set out to overhaul the regulation of health professionals with the introduction in February of the White Paper – *Trust, Assurance and Safety – The Regulation of Health Professionals in the 21st Century*. Far-reaching reforms are intended and Department of Health (DH) officials met with the UK Health Regulators, including the GOsC, on 20 March to consider an implementation timetable and the establishment of appropriate working groups to shape these reforms.

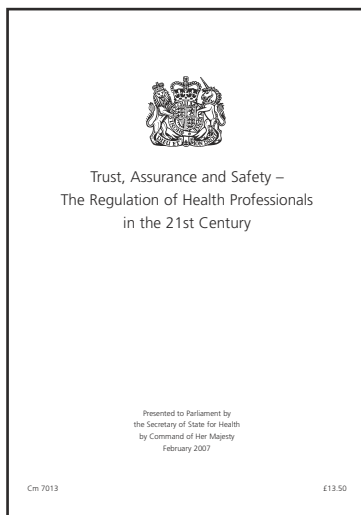
In preparation, the GOsC Council, at its 13 March meeting, considered the detail of the White Paper, chapter by chapter, to assess its implications for osteopathic regulation and practice in the UK.

For all healthcare regulators, of immediate concern are the matters relating to Governance and accountability, outlined in Chapter 1 of the White Paper. Here, in paragraph 1.2, are set out the core functions of a professional regulator, as espoused by Government. These, it is said, are:

- setting and promoting standards for admission to the register and for remaining on the register;
- keeping a register of those who meet the standards and checking that registrants continue to meet those standards;
- administering procedures for dealing with cases where a registrant's right to remain on the register has been called into question; and
- ensuring high standards of education for the health professionals that they regulate.

Council agreed that these were indeed core functions but felt that, at least for the GOsC, the critical function of public and professional education – about osteopathy and what can be expected from those entitled to call themselves osteopaths – should be emphasised. Close communication between public, patients and the profession was seen to be key to the delivery of the core functions.

First steps towards implementing the White Paper reforms have called for immediate discussion about the future size and constitution of the GOsC Council. Discussion about the proportion of lay to professional members – Government favours a lay majority – included a decision on who would qualify as a lay member. Council decided that a lay person, on the GOsC Council, should not be a non-practising, or retired, osteopath. Further, the appointment



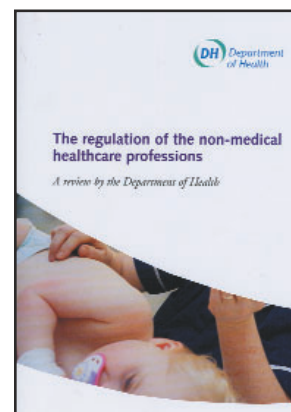
of Council's Education Committee Members should continue to be based on those best able to do the job, and it was felt that it is not appropriate to specify whether they should be osteopaths or lay.

The White Paper, at paragraph 1.20, proposes that all councils [i.e. all the councils of healthcare regulatory bodies (RBs)] "should move to a more consistent and smaller size that enables them to function more effectively as boards for their organisations, with a statutory duty to ensure that the interests of all stakeholders are

considered in their deliberations." At its March meeting, and since, the GOsC Council has debated the potential for reducing the size of the Council without adversely impacting on effectiveness and duties of accountability. The consequent decision is outlined in the Registrar's Report on page 3.

Decisions will also be required on what will need primary legislation and what can be done through Section 60 (S60) Orders, which require only Ministerial approval. Although we do not know the actual timetable yet, it's estimated that a programme of work of this magnitude, involving working groups, will need to take place over at least two years. That being said, the DH has, by necessity, already started work on the first S60 Order, which will likely contain, amongst other immediate things, amendments needed to bring current legislation into line with new discrimination and disability legislation, and the Bischoff Barrington Scheme (CRB checks).

Consideration of particularly complex areas of regulation – revalidation, the adjudication of fitness to practise cases, what information should be readily available to the public about health professionals, for example – will shortly be tackled by working groups to be established by the DH. Here, the GOsC will use its best endeavours to ensure that, on matters that have direct relevance for the osteopathic profession, it is adequately represented – and we will look at these issues in more detail in forthcoming issues of *The Osteopath* and keep you posted as matters progress.



In Council: March 2007

Jane Quinnell, Clerk to Council

The 53rd meeting of the General Osteopathic Council took place on Tuesday 13 March 2007 at Osteopathy House, with Nigel Clarke, Chairman, presiding. Matters considered and/or noted included:

National Council for Osteopathic Research (NCOR) – Annual Report and Accounts 2005–06

Carol Fawkes, NCOR Research Development Officer, presented NCOR's Annual Report and Accounts 2005-06. A copy will be available on NCOR's website in due course (www.ncor.org.uk).

White Paper:

Trust, Assurance and Safety – The Regulation of Health Professionals in the 21st Century

The Senior Management Team provided an in-depth report to Council on the proposals published in the Government White Paper on healthcare regulation. The GOsC Executive will work with the Department of Health, other healthcare regulators and stakeholders towards effective implementation of the proposals – the discussion which took place at the Council meeting would help inform this process. Additionally, it was agreed that a sub-group, comprising representatives of Council, will work with the Executive to produce proposals for further Council consideration. See also pages 3 and 6.

Financial matters

Members reviewed the financial position, including income and expenditure for 2006–07. They also noted the planned activities that had been re-prioritised, mainly due to the Foster review, and the resulting additional workloads. With regard to Council's remuneration, it was agreed to leave the daily rate at £250, but to increase the accommodation rate to £90 per night due to the rise in hotel prices.

10th Anniversary Event: 31 January to 3 February 2008

Plans are progressing for a series of events to mark the achievements of the osteopathic profession since the introduction of statutory regulation.

These will include:

- an international osteopathic research conference
- an international education conference
- an osteopathic practice conference
- a social event

It is also proposed to include the launch of a UK National Osteopathic Archive, a 10th Anniversary Review publication and, possibly, the launch of the *World Health Organisation Basic Training Guidelines in Osteopathy*.

Election of Chairman Designate of Council

The term of appointment of the current Chairman, **Nigel Clarke**, will end following 12 years of service, in May 2008. For continuity purposes, he intends to stand down at the end of the year and hand over to the newly elected Chairman before he leaves. Additionally, with the planned retirement of the Chief Executive & Registrar, **Madeleine Craggs**, at the end of

this year and the forward work that is required as a result of the Government's healthcare review, it was thought prudent to elect a Chairman Designate now.

Two nominations were received for lay Council Members, **Professor Adrian Eddleston** and **Mr Paul Sommerfeld**. A ballot was held and Professor Eddleston was elected. He will work closely with Mr Clarke over the coming months in preparation for assuming Chairmanship on 1 January 2008. See page 9 for further information.

Corporate Governance Handbook for Council Members 2007

Members received a copy of the newly produced *Corporate Governance Handbook*. This handbook replaces the GOsC Standing Orders 1998 and sets out the governance structure, its operation and the procedures followed by the GOsC. It is designed to be a useful tool for Members, codifying the fundamental aspects of the organisation into a single document.

The release of the handbook effectively coincides with the publication of the recent White Paper, *Trust, Assurance and Safety – The Regulation of Health Professionals in the 21st Century* (21 February 2007) and the beginnings of the work on governance that will flow from these proposals.

The handbook had been created as a living document and will be assessed and refined as necessary over the coming year, particularly in response to the work of the Internal Auditors. The Audit Committee will also review it annually.

The handbook will be published on the GOsC public website – www.osteopathy.org.uk – in due course.

Council for Healthcare Regulatory Excellence (CHRE)

Minutes and papers for CHRE Council meetings can be found on the CHRE website: www.chre.org.uk or via the GOsC public website (www.osteopathy.org.uk/links) link to CHRE.



Jane Quinnell, Clerk to Council

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Update reports from Committees and Senior Management Team

Reports will be available in the full minutes, when they are posted on the GOsC public website (www.osteopathy.org.uk/about_gosc) after approval at the next Council meeting.

Future Council meetings

- 14 June 2007
- 18 September 2007
- 4 December 2007
- 12 March 2008

Meetings will commence at 10.00 am at Osteopathy House. The agenda for the public session will be available on the GOsC Public Website, or from Jane Quinnell, approximately seven to ten days before the meeting. Public sessions of Council meetings are open to members of the public, including osteopaths.

Contact Jane Quinnell on tel: 01580 720213, email: janeq@osteopathy.org.uk for further information, or if you would like to attend the next Council meeting.

Chairman Elect announced

Professor Adrian Eddleston has been elected by Council, at its meeting on 13 January, to succeed GOsC Chairman Nigel Clarke when he retires from office on 31 December this year. Professor Eddleston (pictured) is currently Chairman of the GOsC Audit Committee and the Health Committee.

"It is a privilege and honour to be elected Chairman of the Council," Professor Eddleston said. "I am very impressed by the huge progress made by osteopaths, working closely with lay members of Council, in setting high standards of patient care and education. The evidence we gave to the Foster Review demonstrated this, and ensured a successful outcome, as reflected in the recent White Paper. The next task will be to ensure that any changes required allow the profession to continue to set an excellent example to others."

Professor Eddleston qualified in medicine at Oxford and Guys and became Professor of Liver Immunology and a Consultant Physician with a special interest in liver



disease and general medicine at King's College Hospital.

His interest in medical education, particularly in improving communication skills and in team working, coupled with his interest in primary care, led to his appointment as Curriculum Sub-dean and Vice-dean from 1983 to 1992. During that time, with the help of osteopath and fellow Council member, Fiona Walsh, an introduction to osteopathy was incorporated into a revised medical curriculum.

Professor Eddleston became Dean of King's College Hospital Medical School in 1992, and was appointed the first Dean of the merged medical school of Guy's, King's and St Thomas' in 1998.

After retiring in 2000, Professor Eddleston was Chair of Bromley Primary Care Trust until 2005. He is Vice-chairman of the Management Committee of the King's Fund, and was a member of the London Health Commission.

Council resignation

With regret, Council has accepted the resignation of the Member for Northern Ireland, **Mr Bryan McIlwraith**, due to practice commitments. Mr McIlwraith was a member

of the Communications, Education and Health Committees. Many thanks are due to him for his contribution to the work of the GOsC.

Council reappointment

The GOsC is delighted at the reappointment to Council of **Professor Trudie Roberts**. Professor Roberts is the appointee to Council of the Secretary of State for

Education and Skills. Professor Roberts is Chair of the Education Committee and now goes on to serve a further term of 5 years.

Osteopathy affirms its place in occupational health



A senior manager from one of Britain's largest supermarket chains was amongst other employers and HR managers hoping to find out more about osteopathy's role in the occupational health sector at the **Health and Wellbeing @ Work conference and exhibition** last month.

A strong osteopathic presence, within both the conference programme and the exhibition, not only helped to raise the profile of the osteopathic profession amongst this key target audience, but also reflected osteopathy's growing role in helping to reduce the incidence and cost of workplace ill-health and injury in the UK.

Over 3,000 delegates – occupational health professionals, employers and HR managers, disability employment advisors and those involved with health promotion in the workplace – turned out for the inaugural two-day event in Birmingham, reflecting the importance of this issue today, not only amongst Government officials, but also at grassroots level.

In October 2005, the Government launched the Health, Work and Well-being strategy, which sees the Department of Health, Department for Work and Pensions and the Health and Safety Executive, collaborating on policy development to improve the health of the working population. But reducing the cost of lost productivity due to workplace injury and ill-health, and returning people to work quickly through effective rehabilitation and prevention schemes, has also become a key priority for employers and HR managers. This was reinforced by the number of delegates seeking further information from GOsC staff and local osteopaths on the exhibition stand about ways of implementing osteopathic schemes.

The programme

The conference programme, run in eight parallel sessions, covered a diverse range of topics, including: wellbeing; rehabilitation; long-term illness; stress management and mental health; the future of wellbeing at work; sickness absence management; musculoskeletal disorders; working with people with disabilities; age diversity; and disease management.

Osteopaths **Professor Kim Burton** and **Mr Damon Peterson** were amongst those invited to speak and they delivered their presentations to large, receptive audiences. Damon, Director of Training and Consultancy Services at Health Response UK (formerly referred to as Osteopaths for Industry),

discussed a successful pilot prevention and rehabilitation scheme undertaken within Marks and Spencer in the hope of reducing absence and improving workplace health. Damon was also joined on stage by Sue Alexandra, a former occupational health manager for M&S, who was involved in the trial. Both attested to the cost-effectiveness of the pilot scheme, but they also highlighted the disincentive for businesses to provide occupational health schemes within the current tax system. While Government wants industry to promote healthy workplaces, occupational health schemes including osteopathy, for example, are taxed as an employee benefit. As a result of these costs incurred by the employer, M&S have suspended rolling out the national programme. Health Response UK and other interested parties are currently lobbying Government officials in the hope of reversing this anomaly.

Professor Kim Burton addressed the audience about biopsychosocial concepts of rehabilitation for the management of common health problems such as back pain.



Health in the workplace statistics, 2005/06

Ill health

- 2 million people were suffering from an illness they believed was caused or made worse by their current or past work.
- 523,000 of these had been new cases in the previous 12 months.

Working days lost

- 30 million days were lost overall (1.3 days per worker), 24 million due to work-related ill health and 6 million due to workplace injury.

Musculoskeletal disorders (MSDs)

- Over 1 million people in Great Britain were affected by an MSD caused – or made worse – by their current or previous job.
- Around 43% of these (437,000) suffered from a disorder mainly affecting their back, 374,000 from a disorder mainly affecting their upper limbs or neck, and 209,000 from a disorder mainly affecting their lower limbs.
- Work-related MSDs cost employers between £590 million and £624 million every year.
- 9.5 million working days (full-day equivalent) were lost through MSDs caused or made worse by work. On average, each person suffering took an estimated 17.3 days off work in that 12 month period.

Source: Health and Safety Executive, 2005/06

Primary Care 2007

A reminder that the GOsC will again be exhibiting at this year's Primary Care conference and exhibition on **Thursday 10 and Friday 11 May** at Birmingham NEC. This is the largest national healthcare event of its kind in the UK, attracting more than 5,000 primary contact practitioners, and will once again focus on the latest clinical, Government and primary care trust initiatives.

Also helping to raise the osteopathic profile at the event is osteopath **Charles Peers** who features on the Allied Health Professional programme discussing 'An integrated approach to acute and sub-acute low back pain.'

Attendance at this event is free of charge for all practising health professionals. To register, contact the Primary Care event team on tel: 0151 709 8979 or register online at www.primarycare2007.co.uk.

Volunteers – we need your help!

The GOsC is, as always, looking for volunteers to help out on the exhibition stand at Primary Care and other forthcoming national health exhibitions. **Contact the Communications Department on ext. 222 or email: nicolet@osteopathy.org.uk for further information.**

Join Team Osteopath 2007!

It is time once again to invite enthusiastic volunteers to join **Team Osteopath** for the annual **British 10K London Run**, which is taking place on **Sunday 1 July 2007**. The Team, now in its third year, has so far raised over £7,000 for charity. We hope that 2007 will see the largest running team yet.

Open to participants of all ages and abilities, the race is free to enter, although you will be required to raise a minimal sponsorship amount for a designated charity (yet to be confirmed).

The run offers a great opportunity to get fit, provide an excellent example to your patients and meet colleagues and students from across the UK, while at the same time enhancing the public profile of osteopathy and raising much-needed funds for a worthy cause.

If you are interested in joining this year's Team Osteopath – or perhaps recruiting a group in your local area to join us (they need not be osteopaths) – please contact the Communications Department on tel: ext 226 or email: susanm@osteopathy.org.uk. Places are limited so please contact us as soon as possible to ensure your participation. For further information visit the official British 10K London Run website at: www.thebritish10klondon.co.uk.



GOsC diary March 2007

This diary presents a snapshot of some of the meetings and events the GOsC has been involved with over the past month. For further information about any of these meetings please contact the relevant department.

1	Thursday	Health & Wellbeing @ Work conference and exhibition, Birmingham Section 32 prosecution, Dudley Magistrates Court
4	Sunday	Scotland GOsC regional conference, Haddington
7	Wednesday	GOsC Senior Management Team planning day
8	Thursday	GOsC Disability Discrimination Act meeting
10	Saturday	Critical Cs workshop, South West England, Taunton
12	Monday	NCOR Experienced Researchers Group meeting, Osteopathy House GOsC - AURE meeting - provision of services under EU Directive 2005/36
13	Tuesday	GOsC Council meeting GOsC - DfES seminar on EU Directive 2005/36
14	Wednesday	GOsC PCC hearing GOsC presentation to final year BCOM students QAA 10th anniversary reception, 30 St Mary Axe, London
16	Friday	GOsC GP workshop, Leeds GOsC - DEIs: meeting re Disability Discrimination Act GOsC - NHS IT programme meeting, NMC
20	Tuesday	Welsh Assembly Government: Arthritis and musculoskeletal service directives launch GOsC - Healthcare Regulators Meeting, NMC
21	Wednesday	Fitness to Practise Chairmen's meeting
22	Thursday	GOsC Chairman and Chief Executive meeting with BDA president and Chief Executive
23	Friday	EU registration policy meeting
24	Saturday	Greater London and South East England GOsC regional conference, Gatwick
26	Monday	'The Osteopath:' - editorial review meeting GOsC-UKIPG main group meeting, RPSGB
27	Tuesday	PGICH meeting on healthcare regulation GOsC-RPSGB Council Meeting
29	Thursday	GOsC-CHRE CE&Rs Performance Review follow-up meeting
30	Friday	QAA/GOsC: overview of accreditation process for osteopathic courses

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AURE - Alliance of UK Regulators on Europe
BCOM - British College of Osteopathic Medicine
BDA - British Osteopathic Association
CE - Chief Executive
CE&Rs - Chief Executives and Registrars
CHRE - Council for Healthcare Regulatory Excellence

DfES - Department for Education & Skills
EU Directive 2005/36/EC - European Union Directive on the Recognition of Professional Qualifications
NCOR - National Council for Osteopathic Research
NMC - Nursing and Midwifery Council
DEIs - Osteopathic educational institutions

PCC - Professional Conduct Committee
PGICH - Parliamentary Group on Integrated and Complementary Healthcare
QAA - Quality Assurance Agency
RPSGB - Royal Pharmaceutical Society of Great Britain
UKIPG - United Kingdom Inter-professional Group

Patient survey of public healthcare in Scotland

Sarah Eldred, Assistant Registrar (Public Affairs)

A major public consultation aimed at improving NHS service provision in Scotland was announced last month by Scotland's Health Minister, **Andy Kerr MSP**.

The Patient Experience Programme will involve gathering details from patients on their experiences of the NHS, the services they received, and how they could be improved, via surveys and regional focus groups. Work on the consultation is expected to get under way shortly, with results due to be published in spring 2008.

Despite being a problem for Scotland's population, the treatment of musculoskeletal disorders is not currently high on the political agenda.

This new initiative provides an opportunity to raise awareness of the contribution osteopathy could make to public healthcare delivery in Scotland. In some instances commissioners and/or medical practitioners misunderstand the status of the osteopathic profession

today, denying patients access to appropriate and effective care.

Contributing to the consultation

The GOsC will be writing to all osteopaths in Scotland asking for details about their patients' experiences of the NHS, as well as their interaction with other healthcare professionals. This information will be used to identify possible policy gaps and to form a briefing for MSPs, civil servants and other relevant stakeholders.

Andy Kerr said: "Providing the best quality treatment and care for our patients is the top priority for NHS Scotland and patients' views are vital to health professionals in improving the services they provide." **Osteopaths might therefore wish to encourage their own patients to contribute to the consultation. For further information, contact Sarah Eldred on ext 245 or via email: sarahe@osteopathy.org.uk.**

Minister launches plan to tackle MSDs in Wales

A new approach to help tackle one of the biggest causes of disability in Wales was announced by the Minister for Health and Social Services last month.

*Services Development and Commissioning Directives: Arthritis and Chronic Musculoskeletal Conditions*¹ seeks to improve the health, well-being and quality of life for people living with arthritis and chronic musculoskeletal conditions² in Wales. Using a similar approach to the Department of Health (England) Musculoskeletal Services Framework³, these directives focus on the importance of prevention, early assessment and diagnosis, patient-centred care and facilitating and managing patient independence – principles that are integral to osteopathic practice.

As in the rest of the UK, and Europe, Wales is experiencing an alarming growth in patients suffering from musculoskeletal disorders (MSDs). MSDs are the most frequently reported chronic condition by patients and the most common cause of severe long-term pain and physical disability in both young and old. In Wales, £90 million is spent each year on incapacity benefits for individuals suffering with back pain alone⁴.

Welsh Health and Social Services Minister, Dr Brian Gibbons AM, said "Services are struggling to keep pace with the growing numbers of people consulting health professionals [about arthritis and musculoskeletal

conditions], the rise in prescription numbers, and the demand for more resources needed to tackle these life long conditions. Further pressures are also projected on these services as the number of older people in our society increases⁵."

The osteopathic profession is well placed to help tackle this challenge; therefore, the GOsC has been talking to the Welsh Assembly Government to ensure that patients have wider access to osteopathic care. As community and primary care services are expanded to include a wider healthcare team, it is encouraging to see that the Welsh directives include osteopathic interventions for the treatment of low back pain.

From December this year, care pathways will be developed by commissioners (within local health boards) in partnership with health professionals and with support from patients and the public.

¹ *Service Development and Commissioning Directives: Arthritis and Chronic Musculoskeletal Conditions*. Welsh Assembly Government, January 2007

² Key categories of arthritis and musculoskeletal conditions include osteoarthritis, inflammatory arthritis, connective tissue disease, back pain, bone disease, soft tissue rheumatism and chronic musculoskeletal pain.

³ *The Musculoskeletal Services Framework*. A joint responsibility: doing it differently. Department of Health. July 2006.

⁴ Department for Work and Pensions

⁵ *Service Development and Commissioning Directives: Arthritis and Chronic Musculoskeletal Conditions*. Welsh Assembly Government, January 2007



CPDO

2007

Date	Title	Tutor / lecturer	Cost	Deposit
Weekend courses				
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6-7 Oct	IOT I: Cervical spine, CD and UEX	Prof. Laurie Hartman	£195.00	£125.00
3-4 Nov	IOT II: Lumbar & thoracic spine and ribs	Prof. Laurie Hartman	£195.00	£125.00
28-29 April	IOT III: SI joints, pelvis and LEX	Prof. Laurie Hartman	£195.00	£125.00
25-27 Oct	Visceral osteopathy: the abdomen	Jean-Pierre Barral	Fully booked	
30 June	Healthy Pregnancy	Averille Morgan	£115.00	Pay in full
17-18 Nov	Lymphatic motion	Averille Morgan	£195.00	£125.00
28-29 April & 16-17 June	Neuromuscular "re-abilitation" (part I & II)	Prof. Eyal Lederman	£395.00	£250.00
22-23 Sept & 20-21 Oct	Harmonic technique (part I & II)	Prof. Eyal Lederman	£395.00	£250.00
6-7 Oct	How to treat sports injuries: the lower body	Chris Boynes	£195.00	£125.00
19-20 May	Treating the back and neuropathic leg pain	Philip Mouleart	£195.00	£125.00
23-24 June	Osteopathic care of small animals	Anthony Pusey	£225.00	£150.00
23 June	Practical ergonomics and musculoskeletal health	Damon Peterson	£115.00	Pay in full
16 June	Introduction to sports taping: principles and practice	Tom Hewetson	£115.00	Pay in full
30 June	Current concepts in the management of tendonopathies	Glenn Hunter	£115.00	Pay in full
22 Sept	The experience of pain - a multidimensional exploration	Ian Stevens	£115.00	Pay in full
17 Nov	Practical clinical nutrition	Dr. Adam Cunliffe	£115.00	Pay in full
Evening courses				
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17 May	How to treat: Frozen shoulder	Prof. Eyal Lederman	£40.00	Pay in full
24 May	How to treat: Tennis elbow	Prof. Eyal Lederman	£40.00	Pay in full
11 Oct	How to treat: Whiplash injuries	Prof. Eyal Lederman	£40.00	Pay in full
1 Nov	How to treat: Impingement syndrome	Prof. Eyal Lederman	£40.00	Pay in full
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Survey suggests rise in food intolerance

Osteopaths are increasingly being asked about food intolerances by their patients, according to research conducted by Cambridge Nutritional Sciences (CNS).

The study, conducted in September 2006, involved questioning 500 health professionals with an interest in nutrition, of whom 20% were either osteopaths or chiropractors.

According to the survey, 70% said that they believed there to be more food intolerances than five years ago, and 56% were concerned that too many

people were self-diagnosing – a practice that can result in people putting themselves on restrictive and unhealthy diets.

Food intolerance may affect almost any organ and manifests itself by producing a variety of symptoms including migraines, irritable bowel syndrome, constipation, insomnia, and chronic fatigue.

The results of the survey highlight the increasing need for osteopaths to offer sound nutritional advice to patients as part of their package of care.

BSO supervisors' training day

Robin Lansman DO, London

Dissertations can be the beginning of a useful exploration process for the undergraduate osteopathy student and the supervisor. They can even benefit the osteopathic profession as a whole, as some of the best research work may be published or presented at inter-professional conferences.

A dissertation is the student's piece of work and the ideas must be his or her own. The supervisor may help with the direction of the research, act as a sounding board or help to maintain a specifically osteopathic perspective on the whole project. Research methods and ethical considerations are two of the issues that may arise at scheduled meetings during the several terms of work.

The supervisors are the link between the student and the osteopathic school and they offer mentoring and the first stage SWOT (strengths, weaknesses, opportunities and threats) analysis of the piece of work before it is



ultimately graded. The whole process is designed to test the student on many levels during the journey from initial idea to final presentation.


The British School of Osteopathy (BSO) research team, which manages the dissertation process, held a training day on 10 February to enable more than 30 BSO tutors and lecturers to consider all these issues and

more. The primary aim of the day was to enhance the BSO's supervision process.

During the day's full programme, tutors explored the issues in groups led by **Hilary Abbey**, **Jo Dear**, **Steve Vogel** and **Roberta Herrick**. Thanks to them all for their enthusiasm for osteopathic research. I came away with a better idea of what is expected from me as a supervisor and certainly feel more confident about supervising students in the coming year.

www.osteopathy.org.uk

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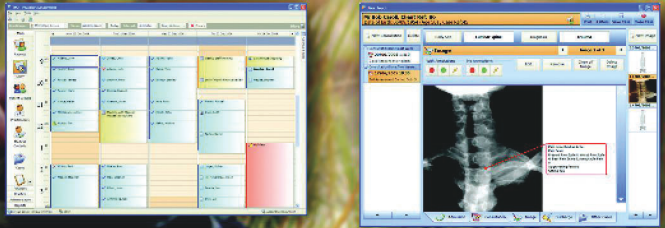
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A celebration of naturopathy



The British Naturopathic Association is marking 100 years of naturopathy in the UK with a special historic event – **A Celebration of Naturopathy** – on **Saturday 19 May 2007** at Regents College, London. Recognising the achievements of the profession over this period, the event will not only provide an opportunity to reflect but will also look to the future.

The highlight of the day will be a special awards ceremony. Five well known naturopaths, who have made an outstanding contribution to the field nationally and internationally, will be awarded Fellowships of the BNA. Those being honoured include Leon Chaitow, Joseph Goodman (posthumously),

Denis Keily, Roger Newman Turner and Keki Sidhwa. Each will be presented to the delegates by a colleague, with a short tribute to their life and work.

The Fellows will also address the conference on aspects of naturopathy:

- **Leon Chaitow:** the vital role of manual methods in naturopathy
- **Linda Goodman:** in honour of Joe Goodman
- **Denis Keily:** mind, body and spirit
- **Roger Newman Turner:** the art and science of naturopathy
- **Keki Sidhwa:** naturopathy: past, present and future

In addition to these lectures, Jennifer Harper-Deacon, one of the association's most high profile members, will give a personal view of naturopathy in the 21st century. Jennifer has over 15 years of postgraduate study and practice in the field of Western complementary, traditional Eastern and naturopathic medicine, and is also a journalist and author. A trade show will complement the programme. **For further details about the event or to make a booking, tel: 01458 840072 or email: admin@naturopaths.org.uk.**

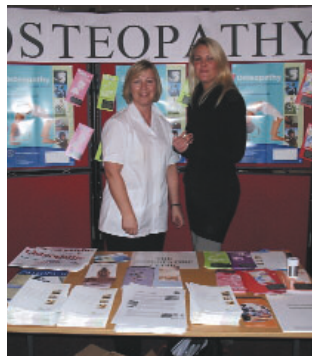
Osteopathy as a career

Sue Brazier DO, Worcester

When the GOsC asked me last year if I would organise an exhibition stand promoting osteopathy at the Hagley RC High School's careers day on 27 February, I agreed – after all, it was nearly half a year away. The GOsC duly sent me some posters and leaflets but, as the day drew near I suddenly realised that I had no osteopathic course materials to display. So I contacted the colleges asking if they could send anything that might help the students decide on osteopathy as a

career, and they did – a big thank you to Chris Hedges at the European School of Osteopathy; Fiona Menzies, British School of Osteopathy; Hilary Brown, Oxford Brookes University and June Pentecost at the College of Osteopaths, for their assistance.

There were many more students than I had estimated and the BSO pens and carrier bags – of which I thought I had too many – all went. I may not have created a vast intake of



Sue Brazier and Gemma Ware

potential osteopaths but, since the students now know what osteopathy is and how to pronounce it, they could, at the least, become future patients.

My stand was next to the physiotherapy stand and a frequently asked question was, "What's the difference between osteopathy and physiotherapy?" The physiotherapist was also kept busy and the plastic spine she had brought soon began to look like a poor twisted and mangled wreck. She too was a local practitioner who knew some local

osteopaths, which gave us something else to talk about. Gemma Ware, another local osteopath, joined me for a couple of hours and advised the students on what to expect when undertaking a degree in osteopathy.

It was an interesting day, which gave us the opportunity to promote osteopathy to both students and teachers – I am sure we will be seeing some of them in our clinics in the future!

Osteopaths join African medical expedition



Osteopath Jaskiran Aujla treats a member of the Masai tribe

Three UK osteopaths – **Deborah Smith**, **Inderpreet Saigal** and **Jaskiran Aujla** – recently joined humanitarian aid organisation, **Care Highway**, for a two-week medical expedition to Kenya. They accompanied two doctors and two other osteopaths from Spain and were supported by a logistics team of five.

The first leg of the trip saw the team working in Nairobi in a slum called Kibera – the second largest shanty town on the African continent and home to over 700,000 – where they also visited Care Highway's full-time project. Makeshift clinics were set up in rural Kenya during the second week, in which the team also treated people from the Masai tribes.

Each of the UK osteopaths give a brief account of their experience, below.

Deborah Smith BSc (Hons) Ost Med, London:

It is difficult to put into a few words the impact of a life-changing trip that was an immense challenge and an amazing experience, both personally and professionally. For me this was the ultimate CPD – seeing and treating wide-ranging, challenging conditions; being able to discuss assessment and treatment with an international team of osteopaths and doctors; and observing the doctors at work and seeking their professional opinion.

We saw a wide variety of conditions from a dislocated wrist to lumbar neuropathy, and cerebral palsy to sprained ankles. This meant really drawing on all our osteopathic resources to be as effective and efficient as possible in what could potentially be the only treatment the patient will ever receive for their condition.

Personally, the most challenging part of the expedition was working in the slums of Nairobi.

I thought I was prepared for the poverty and poor living conditions, but I was unprepared for the level of sickness and disease we witnessed. There was a startlingly high incidence of HIV and AIDS – we hardly saw anyone over the age of 50 in the slums. Many of the children were orphans and a lot were suffering with respiratory and systemic diseases, compounded by malnourishment.

It is frustrating to see so many people dying from diseases that could be prevented through simple measures, such as malaria nets, clean water and better sanitation.

The clinics we held were extremely popular and, sadly, we had to turn hundreds of people away without treatment. In one location they estimated that over 600 people were waiting to be treated – a bit overwhelming for a team of seven practitioners. There are many sad memories of some very sick adults and children who may not even be alive today but there are also happy memories of patients to whom we were really able to make a difference. For a number of patients with cerebral palsy, and other neurological conditions, we were able to teach them exercises which will hopefully have a significant impact on their quality of life.

To me that makes it worthwhile; even if we had only improved one person's life for the better it would have been worth it.

Inderpreet Saigal BSc (Hons) Ost Med, London:

My first day treating was amazing, but also like nothing I had known. I specifically remember my third day in Kibera; a 66-year-old man walked into the clinic (which on this occasion consisted of four white sheets) with no rotation within the cervical spine and obviously in a lot of pain. He had a bilateral temporal headache, severe visual disturbances, dizziness and various signs of infection. Red flag! A job for the doctors, I immediately thought. Witnessing the ever-growing queue – ten times longer than the local bank on a Friday afternoon – I was immediately reminded of my whereabouts and the fact that this was a country where people pay for their medical treatment. I needed to respond accordingly.

So after nearly an hour of slow, functional movements, smiles and a lot of reassurance, this scared old man,



*Osteopath
Inderpreet Saigal*

whose limbs were internally rotated and suffered from a locked temporomandibular joint (TMJ), leapt from the couch as he moved his neck into its full ranges of motion for the first time in two years. I cannot even begin to find the words to describe the joy I felt.

Every day the team of osteopaths were inundated with patients as we worked alongside the doctors who struggled to tend to the vast number of seriously ill. While we had knowledge, skills and medicine at our disposal, there were still so many moments where our tools amounted to nothing.

Many were dying of chronic infections, TB, malaria and AIDS. I vividly remember the ghastly images of mountains of plastic being burnt outside people's homes. It became apparent why so many, including many children under the age of five, were suffering from chronic respiratory conditions.

The most painful memory I have from the trip is the case of a one-year-old boy, who was malnourished and ill. He had been vomiting every day for two months and was crying constantly, obviously in pain. His mother appeared helpless and confused as she stood there with no emotional support. A tear came to my eye as I wondered about the fate of this little boy. It was eventually decided that Care Highway would take the infant into their newly-built orphanage. With only one space available, it did seem as though it was meant to be.

Going to Africa has taught me how life is taken for granted in the western world and that I should appreciate every day that I wake. Life is for living, so let's help people to live.

Jaskiran Aujla BSc (Hons) Ost Med, Kent

I left England on my journey to Kenya thinking that I would spend the next three weeks fulfilling my role as an osteopath. However, I soon realised I was there not only as an osteopath but also as a humanitarian.

Some of the people I met had stories that broke my heart – such as the fifteen-year-old girl with a brain tumour, whose co-ordination and speech slowly deteriorated while her mother watched, unable to afford an operation that might save her child. There were so many cases of people unable to afford the basic things we are offered free in the UK. It made me value the resources that are so readily available to us, such as the NHS.

Despite the sad moments, there were also some very funny times. The team were constantly chastising me

for wandering off to de-worm the children and give them multivitamins, instead of providing osteopathic treatment. But being with the children made me most happy – and the occasional sweet also helped to break down barriers. Playing Simon Says with a school of 400 students was an amazing experience.

I was intrigued and impressed to discover that so many people spoke both English and Swahili fluently. I did manage to pick up some Swahili – “kulegeza” or “relax” was the word I used most often with my patients.

After seeing the things that such a small team of volunteers managed to achieve, I am left with a great sense of hope for the future.



For further information about the project or to volunteer, contact Care Highway or email: chrismorrison@carehighway.org or visit: www.carehighway.org.

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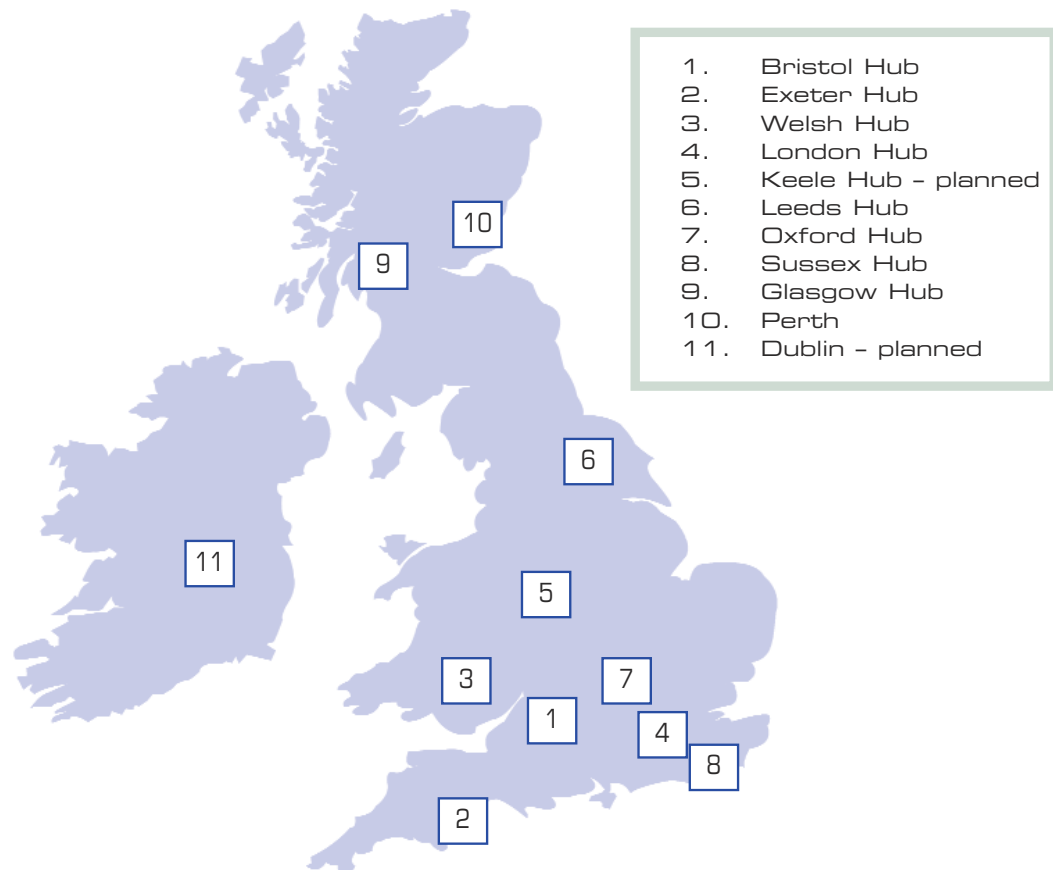
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National Council for NCOR Osteopathic Research

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Hub meetings

BRISTOL

To be confirmed.

Small project work – looking at data on referral patterns from osteopaths. The Bristol group wanted to approach a study that would try to identify the reasons for referrals and the types of practitioners (medical or complementary) to whom they were made. A data collection tool was designed for this purpose and is being piloted by the group at present. Once the pilot stage has been completed, any necessary refinements to the tool will be made and a larger period of data collection may be undertaken.

The Bristol group is also undertaking an audit of case records from the past 20 years to look at how the demographics of cervical spine symptoms are

changing, e.g. have there been changes in the professional groups, age groups and percentage of each gender affected by symptoms as work demands and computer use have changed during this period?

EXETER

Saturday 19 May, 10am to 12 noon.

Creating a consent form for clinical practice by consensus. Obtaining informed consent from patients is an issue that has caused considerable concern to many osteopaths. The Exeter group is looking at literature sources and examples of consent forms currently used within the group and are trying to develop a consent form by consensus.

Saturday 7 July, 10am to 12 noon.

Developing a patient information sheet for clinical practice through a consensus process. This will attempt to inform

patients what will happen when they visit an osteopath and give information concerning responses that can occur after treatment.

HAYWARDS HEATH

To be confirmed.

Developing a case series looking at osteopathic treatment during pregnancy and a literature review of contraindications to osteopathic treatment.

The recent publicity concerning osteopaths treating patients during pregnancy spurred this group on to develop a data collection template to attempt to demonstrate the safe and effective osteopathic management of patients during pregnancy. A case series is being created which will be submitted for publication next year.

The group is also undertaking a literature review of contraindications to osteopathic treatment, identifying absolute and relative contraindications. This work will also be prepared for submission for publication in 2008.

LEEDS

Tuesday 24 April, 7–9pm.

Developing a patient satisfaction questionnaire for osteopathic practice.

The Leeds group have decided to look at patient satisfaction questionnaires that have been developed by other healthcare practitioners. The implementation of

clinical governance has made patient satisfaction a fundamental consideration for healthcare practitioners; an increasing number of private health insurers are requesting evidence of practices' clinical governance arrangements. The group intend to develop a draft patient satisfaction questionnaire for osteopathy.

LONDON

To be confirmed.

Discussion of small project work: descriptive study looking at the role of osteopaths.

OXFORD

Wednesday 25 April, 7–9pm.

Developing an audit tool to assess changes in treatment approaches to the cervical spine since the introduction of the revised *Code of Practice for Osteopaths*. A case presentation will also be given by Hector Wells, a local osteopath who has developed a technique for detecting space occupying lesions.

The Oxford group has looked at the development of a case history sheet through a consensus process to satisfy what were regarded as minimum requirements of practice. The group is now moving on to investigate if changes have occurred in the number of cervical HVTs being carried out by osteopaths since the introduction of Clause 20 of the 2005 *Code of Practice for Osteopaths*.

Back pain statistics

Carol Fawkes BA (Hons) DO, NCOR Research Development Officer

An increasing number of osteopaths are giving presentations to their local GPs and other healthcare professionals, and statistical information concerning low back pain is commonly requested for this type of presentation. A number of electronic sources exist that produce this type of information, in addition to figures that are disseminated through published research.

The Office for National Statistics carried out a survey in 1998 that looked at social trends in the experience of back pain. The dataset looked at age, sex and number of days of back pain experienced. A summary of the dataset is shown in Figure 1. The figures given in the columns express the percentages of back pain sufferers within each age group.

Further information concerning this dataset can be found at:
www.statistics.gov.uk/StatBase/xsdataset.asp?More=Y.

Studies from general practice have shown that the rate for back pain among the British population rose steadily during the period 1988–1998. The rate of occurrence approached 70% by the age of 70. Patients who responded to the omnibus survey in 1998 reported that they had

experienced back pain for more than one day in the past 12 months. See Figure 1.

An international literature analysis was carried out more recently, in 2002, by Professor Gordon Waddell, Professor Mansel Aylward and Dr Philip Sawney. They claimed in their report that the trend for claims in connection with back pain now appears to be going into reverse. They reported a 42% decrease in annual new awards for back pain since the mid 1990s, although back pain remains a leading cause of absenteeism in the workplace. The report continues to emphasise the fact, supported by the literature, that back pain is not a discrete health problem; it is frequently associated with co-morbidities, psychological and social factors or problems.

Significant progress has been made in recent years to address management of back pain and rehabilitation. This is a timely intervention since back problems create seven million visits to GPs each year, with 80% of back problems recurring. The UK Government estimates that one million people are suffering long-term disablement due to back pain

Research

Figure 1: Number of days with back pain

		1–6 days	7–28 days	29–364 days	Whole year
Males	Age 16–24	49	35	17	0
	25–44	22	34	36	7
	45–54	19	35	29	17
	55–64	20	38	25	18
	65 and over	22	21	25	32
	All aged 16 and over	23	32	29	16
Females	Age 16–24	23	27	42	8
	25–44	21	31	41	8
	45–54	20	21	50	8
	55–64	19	24	37	20
	65 and over	8	21	47	25
	All aged 16 and over	17	25	44	15

Source: Office of National Statistics (www.statistics.gov.uk)



and 12.5% of unemployed people in the UK cite back pain as the reason they cannot find suitable employment. Surprisingly, back problems are reported to occur in equal numbers in sedentary and manual workers; 33,000 back accidents are related to the workplace.

The cost of back pain

The cost of back pain to the public purse remains significant. Statistics from the Health and Safety Executive (HSE) estimate that the number of working days lost from work is 4.5 million each year; each person taking an average of 17.4 days from work due to their back pain. The HSE estimates that 452,000 people are affected by back pain each year, which costs employers £335 million. The charity BackCare estimated that back pain costs the NHS, employers and the economy \$5 billion each year; the cost to the NHS alone is £2 billion.

Statistical information for osteopathy

As osteopathy continues to develop and mature as a profession, increasing interest is being generated concerning statistics about the profession. This interest is in the types of professional groups seen, the symptoms patients consult with, and, most commonly, the outcomes obtained and the cost of achieving those outcomes. The National Council for Osteopathic Research is in the process of developing a standardised data collection (SDC) tool for osteopathy to try and gather this type of information. The process has begun with input from members of the research hubs. Further information concerning the development of a standardised data collection tool for osteopathy will be published in the next edition of *The Osteopath*.

Sources of further information:

BackCare: www.backcare.org.uk

Department of Work and Pensions: www.dwp.gov.uk

Health and Safety Executive: www.hse.gov.uk

National Institute for Health and Clinical Excellence:
www.nice.org.uk

Office of National Statistics: www.statistics.gov.uk

Pain Ban: www.painban.co.uk



Research news in brief

Caffeine reduces risk of heart disease

Research published in the *American Journal of Nutrition* suggests that drinking caffeinated drinks protects older members of the population from heart disease. The study investigated the health records of a large population of individuals over the age of 65 and suggested that their reduced risk of cardiovascular death was more likely due to the levels of caffeine and its effect on their blood pressure.

Rheumatoid arthritis and cancer

A new study in *Arthritis and Rheumatism* has looked at the risk of death from malignancies in patients affected by rheumatoid arthritis. The study, carried out by researchers at the University of Manchester, suggests that although rheumatoid arthritis does not increase the risk of developing cancer, sufferers had a 40% higher risk of death from malignancies than people not affected by rheumatoid arthritis.

Tests to detect lung cancer

Lung cancer is a leading cause of death in the world. A genetic test has been developed that could identify if lung cancer is present months or even years earlier than is possible to do at present. Research has been carried out at Boston University School of Medicine to look at patterns of "gene expression" in cells removed from the lungs of smokers. The study, which is published in *Natural Medicine*, identifies a pattern among 80 genes that can identify the presence of lung cancer in smokers and non-smokers, thereby improving the diagnostic sensitivity of the overall bronchoscopy procedure in patients.

A study published in *Thorax* reports that researchers at the Cleveland Clinic in Ohio have developed a breath test which could attempt to identify lung cancer at an early stage of development.

Growing incidence of dementia

The rationing of care for patients with dementia has been widely reported in the press in recent weeks. This worrying development is reinforced by research commissioned by the Alzheimer's Society that suggests that the number of people suffering from dementia will increase by 154% in the next 45 years.

Obesity linked to sleep deprivation

Reports on growing levels of obesity in the UK appear daily in the news but a series of research studies are being re-examined to assess the link between sleep and obesity. One study carried out in the 1980s involving 18,000 adults, revealed a strong link between waistline size and hours of sleep. Researchers found that adults who managed less than 4 hours' sleep per night were 73% more likely to be obese than those who managed to sleep for 7–9 hours. Adults in the study who managed an average of 5 hours' sleep had a 50% greater risk of obesity and those who slept for 6 hours had a 23% greater risk of obesity. The findings were mirrored in a longitudinal study of 13,000 British children who were monitored as they matured; poor sleep at 30 months old predicts obesity at age seven. Further studies suggest that chronic sleep deprivation affected the hormones that regulate appetite and raised the risk of insulin resistance, diabetes and heart disease. A study is now being carried out at the National Institute of Diabetes and Digestive and Kidney Disease at Bethesda, Maryland to assess if the prescription of more sleep each night will have a beneficial effect on weight, body fat, and leptin and ghrelin levels.

Draft guidelines for managing osteoporosis

The National Institute for Health and Clinical Excellence (NICE) has produced draft advice concerning the management of patients with osteoporosis. This condition affects 10.6 million women over the age of 50, of whom 205 will suffer a fracture as a result. Previously medication has been prescribed to women over the age of 65, but the new advice recommends that alendronate can be prescribed to women aged 70 or over who are underweight and have low bone density confirmed by measurement.

Treating osteoarthritis symptoms

Dietary supplements for relief of the symptoms of osteoarthritis remain popular but still contentious. A new study has been carried out by the Southwest College Researchers Institute to examine the effect of giving methylsulphonylmethane (MSN), a naturally occurring sulphur compound found in many foods. A cohort of 50 men – aged 40 to 76 – was given MSN twice daily for a period of three months. The study participants reported less pain and better joint movement following the treatment.

Forthcoming courses and conferences

11–13 May: International Congress on Complementary Medicine Research, Munich, Germany. For more information see www.CMR-Muc2007.de.

12 May: 3rd International Evidence-based Physical Therapy Conference and Exhibition, Imperial College, South Kensington, London. Full details of the programme can be found at www.heseminars.com/conference_2007.htm.

1–4 June: Osteopathy and White Nights International Conference, St. Petersburg, Russia. Further details can be found at www.osteopathic-conference.org.

4–5 October: First fascia research conference, the Conference Centre, Harvard Medical School, Boston, USA. Further details can be found at www.fascia2007.com.

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Osteopaths @ Worcester

CPD initiation

Philip Sutton, osteopathy student, Oxford Brookes University



I attended my first CPD meeting with the Osteopaths @ Worcester society last year, along with more than 30 local osteopaths. The seminar was presented by osteopath **David Evans** (pictured) who discussed spinal manipulation and his research in this field.

As I am a third-year student of osteopathy at Oxford Brookes University (which means I finally get to treat patients under supervision), you can imagine how excited, yet nervous, I was at the prospect of discussing spinal manipulation with my peers – especially as I am only just learning to perfect the art.

Having just completed another day in Mill Court teaching clinic, which is a great place to learn and reflect within a protective environment amongst tutors and fellow students, I began to feel a little nervous. What would it be like being around qualified osteopaths, some of whom have been practising for years? Would I fit in? Would anything actually make sense?

The main focus of the day was 'Is spinal manipulation effective?' and as it was delivered in a lively and interesting way I managed to understand much of the content. David outlined his own research and then went on to demonstrate various techniques, manipulating my spine while my peers watched, exchanging notes and reflecting on their practice. This is when the meeting really came to life. It reminded me of technique class with everyone suddenly more relaxed – I really felt part of the group.

The osteopaths in attendance were able to offer countless examples of successful patient outcomes following manipulation. With limited scientific research at present to prove that spinal manipulation is effective, it is encouraging that the National Council for Osteopathic Research is aiming to change this. Further positive research will encourage acceptance from orthodox healthcare professions and will hopefully improve understanding of osteopathic practice and its place within modern healthcare.

The group concluded that anecdotal evidence clearly suggests that spinal manipulation has helped their patients' conditions improve, but more work still needs to be done. As I sit and ponder what my research proposal will be,

I realise there are other osteopathic techniques not yet proven by scientific research – again the proof we rely on is anecdotal. As we strive to prove the efficacy of osteopathy amongst our orthodox medical counterparts, I still have to admit to liking the slightly mysterious side of osteopathy that makes us and our treatment unique.

Forthcoming meetings

Thursday 3 May, 7pm – 10pm

Guest speaker: **Mr Nadim Aslam**, Consultant Orthopaedic Surgeon, 'Concepts of knee surgery' – this presentation provides a historical overview and explores the latest surgical techniques, including knee replacements. Mr Aslam was invited to present to the group again following his successful talk to the group last year on hip surgery.

Cost: £30.00 (includes light refreshments) **Venue: Holiday Inn Express, Droitwich (Junct 5 M5)**

Saturday 12 May, 9am – 5pm

'Boundaries' – this full-day course is an exploration of the differences between personal and professional relationships: professional boundaries, boundary crossings, boundary dilemmas and boundary violations. An overview of early indicators of potential boundary crossings will be given, together with suggested ways of dealing with these situations. ('Boundaries' will be led by Witness course providers, on behalf of the British Osteopathic Association [BOA].)

Cost: This course has been subsidised by the BOA, enabling us to have the whole day at the reduced rate of £70 per person, including lunch and refreshments.

Venue: The Bank House Hotel, Bransford, Worcester

Saturday 15 September, 9am – 5pm

'Basic Life Support with Adjuncts' – **Tony Bennison** from Health Education Seminars returns to update us on basic life support and appointed persons training. Delegates will receive an HSE Appointed Persons First Aid certificate valid for 3 years. Reserve your place now as numbers are limited.

For further information about the above courses, or to book your place, contact osteopath Sue Brazier on tel: 01905 831495 or email: sue@suebrazier.com.

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Clinic Tutor open day Wednesday 18th April 2007

The British School of Osteopathy is expanding its clinical provision, and will need a number of new clinic tutors in the next few months. We are also interested in meeting those interested in technique tutoring and lecturing. We would like to invite anyone who is interested in finding out more about teaching at the School to an open day on 18th April. As well as an opportunity to learn more about the roles, there will be sessions looking at CPD at the BSO, teaching and research opportunities and our plans for a new state-of-the-art clinic in SE1. All candidates who attend the session will be interviewed and assessed for clinic tutoring roles, and may also request assessment for lecturing and technique tutoring positions that may arise.

If you would like to be part of this innovative day, please reserve your place with Ellie Cannell by phone on 020 7089 5309 or via e-mail on e.cannell@bso.ac.uk. If you would like further information in the meantime, please do get in touch.

Places are limited and will be allocated on a first come, first served basis!

Please download an application pack from www.bso.ac.uk or e-mail recruitment@bso.ac.uk.

We do not accept CVs in place of our application form.

We welcome applications from all sections of the community. If you would appreciate information in an alternative format, please tell us when you call for an application pack. All posts are open to job sharing.

British School of Osteopathy, 275 Borough High Street, London SE1 1JE 020 7407 0222

Essex Osteopaths

Essex Osteopaths raise money for air ambulance service

Anne Gibbons DO, Chelmsford

On 28 February this year, osteopath **Anne Gibbons** presented Essex Air Ambulance with a cheque for £1,000 on behalf of Essex Osteopaths. The money was raised through subscription fees for our meetings. There was a group consensus that we would donate the surplus funds to a local charity.

Essex Osteopaths will next meet at 7.30pm on **Tuesday 22 May** at Broomfield Hospital, Academic Unit. A representative from Essex Air Ambulance has been invited to talk about the important role of air ambulances in UK healthcare today.

For further information about the meeting, or to book a place, contact Anne Gibbons on tel: 01245 283626 or email: agibbons1@aol.com.



(L to R) Anne Gibbons; Essex Osteopaths secretary Sue Hendrick; Dr Glyn James, Essex Air Ambulance

Waltham Forest Osteopathy

Waltham Forest update

Julia Spicer BSc (Ost), Woodford Green

The above group was formed two-and-a-half years ago with the aim of approaching the local primary care trust about the provision of osteopathic services within Waltham Forest. Osteopaths working in and around the area were invited to attend. Our efforts in this area of provision are ongoing and, in the meantime, we are still meeting and holding discussions – various healthcare providers have been invited to give presentations. In 2006 these have included:

- Obesity – epidemiology and underlying mechanisms: the role of diet and exercise
- Introduction to MRI scanning
- Manipulation with disc problems
- Clinical examination of children – DVD and discussion
- Introduction to trigger point therapy
- Inflammatory skin disease – **Dr Anthony Bewley**, Consultant Dermatologist
- Core stability – practical exercise class with **Brad Allen**, personal trainer

So far in 2007 we have twice visited Holly House Private Hospital, where we saw the new Diagnostic Centre and had presentations from **Dr Butt** Consultant Radiologist, who also works at the Royal National Orthopaedic Hospital. His first presentation concerned lumbar degenerative disorders; the second was a presentation on reading and interpreting MRI scans.

Our most recent meeting was held at Churchill Medical Centre, Chingford, London where we watched a presentation given by **Stephanie Smith**, Alexander technique teacher. Future meetings are to include presentations on podiatry and orthopaedic surgery.

If you are not a member of the group but would like to attend future meetings, contact the Secretary, Daryl Herbert via email: daryl.herbert@btinternet.com or on tel: 07879 691344. Attendance at each meeting costs £5. or £25 for the year. The Chairman of the group is Steve Sandler and Treasurer, Ben Medniuk.

Regional round-up

London Osteopathic Society

London meetings update

Tony Longaretti DO, London



Last November **Matthew Avery**, from the Thatcham Motor Research Centre, gave a presentation about the effects of motor vehicle accidents on some types of cars and their passengers. He also gave us advice, for instance about adjusting the headrest, where possible, to provide optimum protection. The subsequent talk on whiplash injury, from osteopath **Tim Oxbrow**, focused on the prognoses in various situations and with differing people.

On 20 February osteopath **Gerry Gajadharsingh** asked whether the osteopathic profession can help in human sub-fertility. His presentation included consideration of the biochemical indicators useful in measuring and ameliorating this condition. Osteopath **Diane Kheir** (pictured) followed with a presentation dealing with pelvic pain and Pilates exercises, indicating the correct and incorrect ways of undertaking them. **Professor Frank Willard** joined the group in March to address the subject of palpation of homeostatic dynamics, an approach to osteopathy in the cranial field.

LOS members can download copies of talks from our website.

Our next meeting, on **Wednesday 2 May**, will be devoted to 'The highs and lows of sugar: psychological and nutritional perspectives on poor blood glucose control'. The speakers, **Martin Lloyd-Elliott** and **Roderick Lane**, are collaborating on a book about children's nutrition. Martin Lloyd-Elliott is a chartered psychologist who has insulin dependent diabetes and has worked for many years on emotional and psychological issues related to food and sugar. Roderick Lane is a naturopath, author of *The Adam and Eve Diet* and founder of the London College of Naturopathic Medicine. He specialises in endocrine disorders and the role they play in psychological and physiological dysfunction.

The cost of the meeting is £15 to members and £30 for non-members, payable at the door. **The venue is Room G.06 University College London, Roberts Building, Torrington Place, London WC1.** The nearest underground stations are Goodge St, Euston Square and Warren St. **For further information, please see the LOS website: www.zyworld.com/los.**



MSc in Paediatric Osteopathy

The Osteopathic Centre for Children (OCC) has been training osteopaths in paediatrics since 1991. In 2005 the OCC and the British School of Osteopathy (BSO) collaborated to offer the first Masters course in Paediatric Osteopathy in the UK. The degree is validated by the University of Bedfordshire.

The next intake for the MSc course in London and Manchester will be September 2007. The course is of relevance to osteopaths treating children in general osteopathic practice and osteopaths intending to specialise in the osteopathic care of children.

Applicants must be registered with the GOsC and must have completed a postgraduate Sutherland Teaching Foundation approved course (BSO or SCC) before October 2007. A good osteopathic degree (or equivalent) is required. All applicants must provide an enhanced criminal records disclosure.

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

Closing date for applications 30th June, 2007.

For a prospectus and application form, please see website www.occ.uk.com or www.bso.ac.uk or telephone Sonia Nelson-Cole on 020 7490 5510.

OCC Registered Charity Number 1003934.

BSO Registered Charity Number 146343

Breath of Life Conference

The 4th biennial Breath of Life Conference will this year be held in London on **26–27 May 2007**. As in previous years, the purpose of the event is to facilitate debate and provide the opportunity for cranial practitioners to widen their exposure to new and established approaches to holistic healthcare.

This year's line-up includes **Dr Masaru Emoto**, a researcher into the subtle properties of water, whose writings explain how our bodies are affected not only by our own thoughts, but by the thoughts and words of those around us. This theory has numerous implications for how we live our lives and relate to each other on a daily basis.

James Oschman PhD, biologist, physicist, and researcher, whose work focuses on the role of energetics in healthcare, will also feature on the programme. He will be offering a post-conference workshop '**The Living Matrix and Trauma Energetics**' on **28–29 May**, which is open to those who are unable to attend the conference.

Prof Jaap van der Wal, associate professor of anatomy and embryology at the University of Maastricht, Holland, will speak about his passion for human

embryology and how biology expresses the essence of human spiritual development. Other speakers include **Dr Mae Wan Ho**, physicist, researcher and author of *The Rainbow and the Worm*; **Franklyn Sills**, author of *Craniosacral Biodynamics*; and **Katherine Ukleja**, a leading teacher of biodynamic craniosacral work.

Each speaker will give a 90-minute presentation, and a panel discussion with all the speakers will complete the weekend.

Cost: £225. This includes refreshments and admission to all lectures. **Venue:** The Brunei Gallery, School of Oriental and African Studies, 10 Thornhaugh Street, Russell Square, London, WC1. **For further details and booking forms, contact:** Rachel Glynn,

Conference Administrator, Flat 1, 16A Oaklands Road, Bromley, Kent BR1 3SL, England Tel: 020 8460 2122

Email: info@breathoflifeconference.co.uk

Website: www.breathoflifeconference.co.uk



James Oschman PhD



Prof Jaap van der Wal

Osteopathic Sports Care MSc

Ian Whyte DO, Osteopathic Sports Care Association Coordinator

The new cohort of students at Leeds Metropolitan University studying for their MSc in Osteopathic Sports Care has recently completed their second module of the nine-module qualification. With 18 students, it is the second largest Master's group in the university and comprises osteopaths from all over the country who want to explore their interest in sport at a much higher level.

To date, the standard of work by the students has been notably high, which is very encouraging for the lecturers. It is hoped that the course will continue to evolve and improve in response to the views of students and lecturers.

As the university sponsors a stand at the Headingley Sports Stadium, students have welcomed the offer of complimentary tickets to watch Leeds Tykes rugby union team who have run out winners on each of the three occasions. Students are encouraged to observe any



functional adaptations in the players throughout the match and also enjoy the added perk of corporate hospitality.

The university has been incredibly supportive of the MSc course and osteopathy in general and plans are on track to offer an undergraduate course in autumn 2007 (subject to achieving a Recognised Qualification). An osteopathic clinic will also open in spring and already strong links have been forged between the undergraduate and postgraduate pathways.

Osteopaths interested in undertaking the MSc course should contact: Louise Potter, Osteopathy Course Leader,

Faculty of Health, Leeds Metropolitan University, Civic Quarter, Calverley Street, Leeds, LS1 3HE. Email: l.j.potter@leedsmet.ac.uk **or contact:** Ian Whyte, Stone Osteopaths, 19 Lichfield Street, Stone, Staffordshire, ST15 8NA. Tel: 01785 816481.



SUTHERLAND

Cranial College

Osteopathy in the Cranial Field

Module 2/3

A SIX DAY NON RESIDENTIAL COURSE

Course Director: Peter Cockhill DO, BA (Hons) MSCC

Date: 14-16 and 21-23 September 2007

Venue: Columbia Hotel, Lancaster Gate, London

48hrs CPD, Fee: £1380

SCTF approved

Module 2/3 is an in-depth exploration of the principles and practice of Osteopathy in the Cranial Field, following the inspiration of Dr W.G. Sutherland. The course presents Sutherland's 'Five Phenomena'; reviews centering and monitoring and explores palpatory differences among structures at different levels of function. The second half of the course considers principles of diagnosis and treatment and their application to the whole body; including the fascia, face and intra-osseous problems.

Course Content: The relevance of embryology in osteopathic practice. The cranial vault and base: anatomy and clinical considerations. The concept of the Reciprocal tension membrane in palpation, diagnosis and treatment. The anatomy of the central nervous system and palpating the CNS via external contacts. The ventricular system, the circulation and the concept of the fluctuation of the cerebrospinal fluid. The importance of the sacrum and pelvis in Sutherland's hypothesis of the Involuntary Mechanism. Fascia and diaphragm. The anatomy of the face and an introduction to diagnosis and treatment of problems relating to the face. Principles of diagnosis and treatment using the involuntary mechanism.

Tutor ratio 1:4

The Functional Face

Module 8

A THREE DAY RESIDENTIAL COURSE

Course Director: Cherry Harris MSc (Ost Med) DO MSCC

Date: evening 17-20 October 2007

Venue: Dartington Hall, Devon

24hrs CPD, Fee: £970

A ONE DAY RESIDENTIAL WORKSHOP (OPTIONAL)

Date: 21 October 2007

Venue: Dartington Hall, Devon

8hrs CPD, Fee: £220

Course Aims: -to explore how developmental movements from conception, through the neonatal period, childhood and adulthood lay the foundation for the structure of the face. Together with consideration of how special senses, occlusion and environmental factors might influence this dynamic interplay between structure and function throughout life.

Course Objectives: By the end of this course the student should have an understanding of the following:

- 1) Development and relational mechanical and involuntary motion considerations of upper, middle and lower face.
- 2) The development of occlusion and its relationship to the cranial base and whole body mechanics.
- 3) The place of osteopathy in a multidisciplinary treatment approach to malocclusion and TMJ dysfunction syndromes.
- 4) Links between structural, nutritional and dental integrity and the mechanics of the voice.

For further info www.osteopathicclinic.co.uk/functionalface

Tutor ratio 1:4

Eligibility: SCC Module 2 and 3 or BSO/STCF equivalent.

Osteopathic Education

A SIX DAY course over three separate weekends
with preparatory work and home study between course dates

Facilitator: Alison Brown DO MSCC

Date: 26-27 January 2008, 23-24 February 2008,
29-30 March 2008

Venue: The Pierian Centre, Bristol

SCC Administration, PO Box 91, NP16 7ZS
Telephone 01291 689908 / Fax 01291 680056

Email: admin@scc-osteopathy.co.uk

Website: www.scc-osteopathy.co.uk

City & Guilds Teacher Training Centre Charity No 1031642

MSc in pain management

Nick Snelling DO, Bristol

After a number of years in practice, I was starting to feel the need for another intellectual challenge. I was also beginning to question and challenge some of the ideas and concepts I had been taught as an osteopath and I looked around at a number of courses, from neuroscience and ergonomics to sports medicine and osteopathy.

Since most of the patients I see complain of pain, and we were taught little about this at undergraduate level, I eventually decided on an MSc in Pain Management. I particularly wanted input from other health professionals to find out how they would deal with the range of patients we see. Another attraction was the fact that I could do the course part-time as a distance learning package, interspersed with residential weekends. I chose the University of Wales College of Medicine as it has a good reputation and the course was the first established MSc in pain management.

The aims of the course matched my own perfectly, and were to:

- develop a critical approach to pain management in the health setting;
- integrate knowledge in pain from different discipline areas such as the biological, psychological, sociological, pharmacological sciences;
- challenge traditional approaches to conceptualising pain;
- challenge traditional treatments regarding pain;
- develop a multidisciplinary knowledge based on pain;
- encourage research activity to both consolidate and extend current theories, approaches and treatments regarding pain.

I attended my first weekend with some trepidation, two days after getting off a plane from Africa. I had spent the better part of five months not wearing shoes or sleeping indoors and had been out of the country for five years. I will never forget the rising sense of panic as an enormous file of notes was placed in front of me, and we were counselled on how this was not going to be easy,

and how much work was going to be required. I wondered what on earth I had let myself in for. I was the only osteopath amongst a varied group of GPs, specialist pain nurses, anaesthetists, physiotherapists, psychologists and a couple of neurosurgeons.

My initial fears started to recede that evening, with the help of a few pints at the local bar. Over the time spent on the residential weekends, I soon discovered that some of the most valuable learning was done over lunch and at the bar. I thoroughly enjoyed meeting all the health professionals from such varied backgrounds and soon discovered that few of them knew much about osteopathy.

The course consisted of 10 modules over a two-year period, which included research and statistics, ethics, the physiology and pharmacology of pain, behavioural and other psychological approaches, and physical therapy and pain management.

We had to complete assignments of around 3,000 words at the end of each module and it was usually possible to make the assignments relevant to practice. If we passed all these we would receive a postgraduate diploma in pain management, and a 20,000-word dissertation would give us a Master's degree.

The course was a long, hard slog, but well worth it in the end. I have gained a much better understanding of pain issues, of how other professionals deal with patients in pain, and about how osteopaths can fit into a good pain service. I was given a prize for the best dissertation at the end of the course, and was able to present my dissertation at the Welsh Pain Society annual meeting. I made many good friends and useful contacts and would thoroughly recommend this course to any open-minded osteopaths who would like a challenge. **For further details about the course, contact: The Course Team, MSc in Pain Management, Department of Anaesthetics and Intensive Care Medicine, University of Wales College of Medicine, Heath Park, Cardiff, CF14 4XN; email: mscpainm@cardiff.ac.uk; tel: 029 20743215.**

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

Courses 2007

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

How to treat chronic lower back pain

26 April

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

Paediatric osteopathy

27–29 April

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

Osteopathy, movement and physical activity (1st seminar)

27–29 April

Speakers Jean Francois Favre, Alain Ceccaldi, Frank Maze. Organised by the Fundacio Escola d'Osteopatia de Barcelona. To be held in Spain. Contact: tel: +93 480 25 15 (website: www.eobosteopatia.com)

Sunflower therapy training course – module 4

27–29 April

Organised by the Sunflower Academy. To be held at the Reve Pavillion Health Clinic, Guildford. Contact: tel: 01483 531498, email: academy@sunflowertrust.com

The role of nutrition in inflammation and musculoskeletal conditions

28 April

Speaker Antony Haynes. Organised by Osteopathic Professional Education North Ltd. To be held at Leeds Metropolitan University. Contact: tel: 0113 638 2984 (website: www.open-ed.co.uk)

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

28–29 April

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

Neuromuscular "re-abilitation" part 1

28–29 April

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

Biodynamics (level 3)

4–7 May

Speaker James Jealous. Organised by the Fundacio Escola d'Osteopatia de Barcelona. To be held in Spain. Contact: tel: +93 480 25 15 (website: www.eobosteopatia.com)

Evidence based physical therapy conference & exhibition

12 May

Organised by Health Education Seminars. To be held at Imperial College, South Kensington, London. Contact: tel: 01202 568898, email: info@heseminars.com (website: www.heseminars.com)

Module 4 – WG Sutherland's osteopathic approach to the body as a whole

16–20 May

Course Director Susan Turner. Organised by the Sutherland Cranial College. To be held at Hawkwood College, Stroud.

Contact: email: admin@scc-osteopathy.co.uk (website: www.scc-osteopathy.co.uk)

How to treat frozen shoulder

17 May

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

Sunflower therapy training course – module 5

18–20 May

Organised by the Sunflower Academy. To be held at the Reve Pavillion Health Clinic, Guildford. Contact: tel: 01483 531498, email: academy@sunflowertrust.com

SAT 'Specific adjustment techniques' level 1

18–21 May

Speaker Gez Lamb. Organised by the Fundacio Escola d'Osteopatia de Barcelona. To be held in Spain. Contact: tel: +93 480 25 15 (website: www.eobosteopatia.com)

Refining technique – the cervical spine

19 May

Speaker Laurie Hartman. Organised by Osteopathic Professional Educational North Ltd. To be held at Leeds Metropolitan University. Contact: tel: 0113 3682984, email: mail@open-ed.co.uk (website: www.open-ed.co.uk)

Treating the back and neuropathic leg pain

19–20 May

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

Paediatric clinic and seminar day

22 May

Speakers Stuart Korth, Sue Allen and Kok Weng Lim. Organised by the Osteopathic Centre for Children. To be held at the Osteopathic Centre for Children, Manchester. Contact: tel: 0161 277 9911

How to treat tennis elbow**24 May**

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

Emotion, meditation and the seven transverse diaphragms**26–27 May**

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

Breath of life conference**26–27 May**

Speakers include Dr Masaru Emoto, Dr Mae Wan, Stanley Keleman, Dr James Oschman, Franklyn Sills, Katherine Ukleja and Prof Jaap van der Wal. To be held at the Brunei Gallery, School of Oriental and African Studies, London WC1. Contact: Rachel Glynn, tel: 020 8460 2122, email: info@breathoflifeconference.co.uk (website: www.breathoflifeconference.co.uk)

The living matrix and trauma energetics**28–29 May**

Speaker Dr James Oschman. To be held at the Yoga Therapy Centre, 90–92 Pentonville Road, London N1. Contact: Rachel Glynn, tel: 020 8460 2122, email: info@breathoflifeconference.co.uk (website: www.breathoflifeconference.co.uk)

How to treat hamstring injuries**31 May**

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

Cranial nerves manipulation**1–3 June**

Speaker Jean-Pierre Barral. Organised by the Fundacio Escola d'Osteopatia de Barcelona. To be held in Spain. Contact: tel: +93 480 25 15 (website: www.eobosteopatia.com)

Spinal manipulation for the athlete**5 June**

Course Director John Gibbons. Organised by Peak Sporting Performance. To be held at Oxford University Sport, Jackdaw Lane, Oxford OX4 1EQ. Contact: tel: 07850 176600, email: j.gibbons@peaksport.co.uk (website: www.peaksport.co.uk)

Muscle testing and postural assessment**6 June**

Course Director John Gibbons. Organised by Peak Sporting Performance. To be held at Oxford University Sport, Jackdaw Lane, Oxford OX4 1EQ. Contact: tel: 07850 176600, email: j.gibbons@peaksport.co.uk (website: www.peaksport.co.uk)

Knee joint assessment**7 June**

Course Director John Gibbons. Organised by Peak Sporting Performance. To be held at Oxford University Sport, Jackdaw Lane, Oxford OX4 1EQ. Contact: tel: 07850 176600, email: j.gibbons@peaksport.co.uk (website: www.peaksport.co.uk)

Yoga as therapeutic exercise – evening course**7 June**

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

Part 2 – Developing palpation – osteopathy in the cranial field (spaciousness, details and emotion anatomy)**8–10 June**

Speaker Ian Wright. To be held at the Knocklofty Country House Hotel, Co. Tipperary, Ireland. Contact: tel: 00353 52 38800

Osteopathic versatility and the connective tissue**8–10 June**

Speakers Jean Francois Favre, Alain Ceccaldi, Frank Maze. Organised by the Fundacio Escola d'Osteopatia de Barcelona. To be held in Spain. Contact: tel: +93 480 25 15 (website: www.eobosteopatia.com)

A biodynamic view of osteopathy in the cranial field: phase 1**9–11 June**

Speaker: Christian Sullivan. To be held in Scotland. Contact: tel: 01225 868282, email: enquiries@churchstreetpractice.co.uk

Sunflower therapy training course – module 6**15–17 June**

Organised by the Sunflower Academy. To be held at the Reve Pavillion Health Clinic, Guildford. Contact: tel: 01483 531498, email: academy@sunflowertrust.com

Introduction to sports taping: principles and practice – weekend course**16 June**

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

Neuromuscular "re-abilitation" part II**16–17 June**

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

Foundation course in prescription orthoses for osteopaths**17 June**

Lecturers Edward Buckwald and Chris Eke. Organised by Pegasus Orthoses. To be held at the Stanborough Centre, Watford. Contact: tel: 01923 260452 email: info@pegasusorthoses.co.uk



British School of Osteopathy

CPD Courses: www.bso.ac.uk/cpd

COGNITIVE BEHAVIOURAL APPROACHES IN PRACTICE

This is a 3-day postgraduate course about integrating cognitive behavioural theory and approaches with osteopathic practice. Each day will be linked to the other days but will have a specific theme:

- Day one - history, theory, principles and dysfunctional beliefs
- Day two - applying CBT principles to distress and depression in people with pain
- Day three - fear and anxiety in people with pain

Teaching methods will be a mixture of lecture/presentations and practical workshops.

Participant numbers limited to 20.

Course Leaders:

Dr Tamar Pincus, Reader in Psychology at Royal Holloway, University of London, Associate Professor, The British School of Osteopathy. Tamar has taught and worked with osteopaths for more than 10 years. Her highly regarded work on the relationship between psychological factors and pain has been published in international journals such as *Spine* and *Pain*.

Steven Vogel, Osteopath, Head of Research at the British School of Osteopathy. Steven has worked with Tamar and others and has published numerous articles. He advocates osteopaths drawing on current research appropriately to enhance their practice.

Guest Speaker:

Dr Lance McCracken, Consultant Clinical Psychologist, Pain Management Unit, Royal National Hospital for Rheumatic Diseases, Bath. Lance has published widely. He conducts research into behavioral and cognitive processes of pain-related disability and suffering and has a strong interest in the development of interdisciplinary treatment methods.

Dates: 15th April, 29th April & 20th May 2007

Deadline for applications: 23rd March 2007

Course Fee: £450.00

VISCEROCRANIUM AND DENTAL CONSIDERATIONS

The aim of the course is to familiarise practitioners with this inter-disciplinary area, and provide an opportunity to review their approach to the diagnosis and management of problems within the stomatognathic system. The potential of this area to contribute to more global patterns of dysfunction has long been recognised.

Material covered will include:

- Practical workshops on treatment of facial disorders by senior OCF faculty
- Occlusal and bite difficulties, their diagnosis and management, by a dental surgeon with a special interest in TMJ dysfunction.

This course is open to practitioners who have satisfactorily completed two BSO Preliminary courses (or SCC equivalent) and had a minimum of a year's clinical practice in this field.

Course Leader: Nick Woodhead

Dates: 7th & 8th July 2007

Deadline for applications: 18th June 2007

Course Fee: £380.00

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.

Course Leader: Nick Woodhead

Dates: 2nd, 3rd, 4th September and two of the following dates yet to be confirmed 14th, 15th, 16th September

Course Fee for the 5-day course: £950.00. 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, please contact Gayda Arnold – 0207 089 5315 or g.arnold@bso.ac.uk

RECRUITMENT

CAMBRIDGE (FEN DITTON): Position open for a reliable, independent and conscientious associate osteopath in an established practice within a medical centre, 1.5 days per week. Please contact Victoria Davies on 01223 295345 or email info@victoriadavies.com for further details.

CORK – IRELAND. Associate wanted for thriving, friendly paediatric / family practice. Min 1 year experience necessary. Must have an interest in IVM, functional, and gentle structural techniques. 4 days/week. Start May 2007. Please send C.V. to Alex Daly. Teresa Kelly & Associates, Village Green House, Douglas West, Cork, Ireland. Tel: 00353214896161.

NEW ZEALAND: Locum / associate in North Island in busy osteopathic practice alongside other osteopaths. A great place to work in a great place to play. Please contact Oliver or Damian at info@osteopathy.net.nz and see www.osteopathy.net.nz

COMMERCIAL

ROOM TO LET IN HARLEY STREET, W1. Large quiet room available Thursdays 8.30am – 6.00pm, with electric couch, wireless broadband access, CPD meetings in multidisciplinary medical practice. Would suit established osteopath with own list. Contact Alice on 07815 763 570.

CONSULTING ROOM TO LET IN BRINKWORTH, near Malmesbury, Wiltshire. A large bright room with waiting room and WC. Quiet area in village with parking. Available two days a week. For more details Phone. 01666510229 or email: Karen_osborne@btopenworld.com

GOODWILL FOR SALE IN NORTH-WEST. Thriving practice established 10 years. Scope for expansion. Multidisciplinary clinic. Excellent

reputation. 7 consulting rooms. Ideal location. Excellent transport links and parking. Easy access to beautiful countryside. Building and practice can be purchased together or separately. Whole range of techniques necessary, from IVM and cranial to structural. Relocation abroad. Tel: 07775 815 892. Email: sylvain.gateaud@hotmail.co.uk

ESTABLISHED PRACTICE FOR SALE in a lovely upmarket Health and Fitness club in Buckingham. Excellent links with GP's, health visitors and midwives. Full-time reception cover with low overheads. The practice is mixed structural and cranial, with an excellent reputation. Last 2 years turnover has been on average £47,900 per year, and this is with working 2.5 days per week, so great scope for expansion. Owners are emigrating. Phone 0845 838 5517

TREATMENT ROOM FOR RENT within Chester city centre. Clinic furnished to a high standard in sought after location. Patient parking available. Suitable for osteopath, physiotherapist, acupuncturist, reflexologist, complementary and holistic therapists. Therapist would work on a self employed basis. Flexible days and times available, weekdays, weekends, evenings. Please ring 01244 409569 for more information.

GOODWILL FOR SALE. Two busy days at two well run long established multidisciplinary clinics in South Wales. Ripe for expansion, good supportive environment, low overheads. Easy access to excellent countryside, cheap housing. Some IVM skills necessary. Call Chris Harris 07900927692 or bigchris100@hotmail.com

TREATMENT / CONSULTING ROOM AVAILABLE TO RENT. Modern established dental clinic. Ideal town centre location in Kettering, Northamptonshire. Would suit professional established osteopath with own list. All enquiries to Dr Sabharwal on 01536 411150 or 07811 402567

HONG KONG – F/Time Osteopath Wanted

Balance Health, a well established private practice is seeking a F/T Osteopath to join the team. We are seeking someone with a positive work ethic, strong structural and rehabilitation skills including interests in women's health & paediatrics. Multidisciplinary natural health clinic, 5 treatment rooms with f/time administrative support. Good remun + housing package, with flexibility & variety. Strong patient base and referral network.

This is an attractive career and lifestyle move for the right person. Min 2 years experience.

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email kerryklose@balanceasia.com.hk
website: www.balanceasia.com.hk

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ACUPUNCTURE / DRY NEEDLING 23-24 June 2007

Intensive practical dry needling course
based on modern neurophysiology by
Dr Anthony Campbell MRCP in Central London.

Introductory and postbasic courses also taught
by arrangement on-site at clinics nationwide.

**Details from Dr A Campbell, 8 Oak Way,
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Tel 0208 368 3418, email: ac@campbell.org.uk**

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Friday May 25th 2007
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Forest of Arden, Birmingham

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For one date only in the UK, the combined talents of two world renowned practitioners and presenters, a "Dream Team"* - Howard Dananberg and Trevor Prior. This is an opportunity not to be missed.

Two old friends and members of the Vasyli Think Tank™, will be combining their vast talents to bring you the definitive workshop on lower limb biomechanical evaluation, manipulation and treatments.

They have specifically designed the program to ensure their combined wealth of biomechanical knowledge is translated into practical, clinically based information acquired over years of treating many thousands of patients.

They will use "real life" studies to demonstrate how you can achieve fantastic results with your own patients using techniques demonstrated on the day. This workshop is ideal for all practitioners involved in performing biomechanical assessments of their patients gait, function and posture

Sessions will include: fundamentals of gait, sagittal plane biomechanics, leg length evaluation, lower back pain from a sagittal plane perspective, foot & ankle pathologic entities, manipulation techniques of the lower extremities, unification theory for podiatric biomechanics and practical demonstrations.



TREVOR PRIOR: (BSc Hons FCPodS MChS)

Director of Premier Podiatry Limited and P2L, Trevor currently consults as a Podiatric Surgeon at Homerton University Hospital in the UK. His areas of speciality include foot surgery, sports injuries, biomechanics and gait analysis, orthoses and diabetic foot complications.



HOWARD J. DANANBERG: DPM: Recognised by Podiatry Management Magazine as one of the most influential Podiatrists in America. His theoretical and practical application of his pioneering work in sagittal plane biomechanics is recognised worldwide. Howard is en route to presenting at the World Congress of the Fédération Internationale des Podologues (FIP) in Copenhagen.

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* Dream Team - definition: the best possible combination of people to perform a task: Encarta dictionary - English UK.