

the osteopath

International Journal of Osteopathic Medicine enclosed



inside

Reflections of

Advancing Osteopathy 2008

In Council

Revalidation for osteopaths

Changes to GOsC Register

Clinical imaging guidance

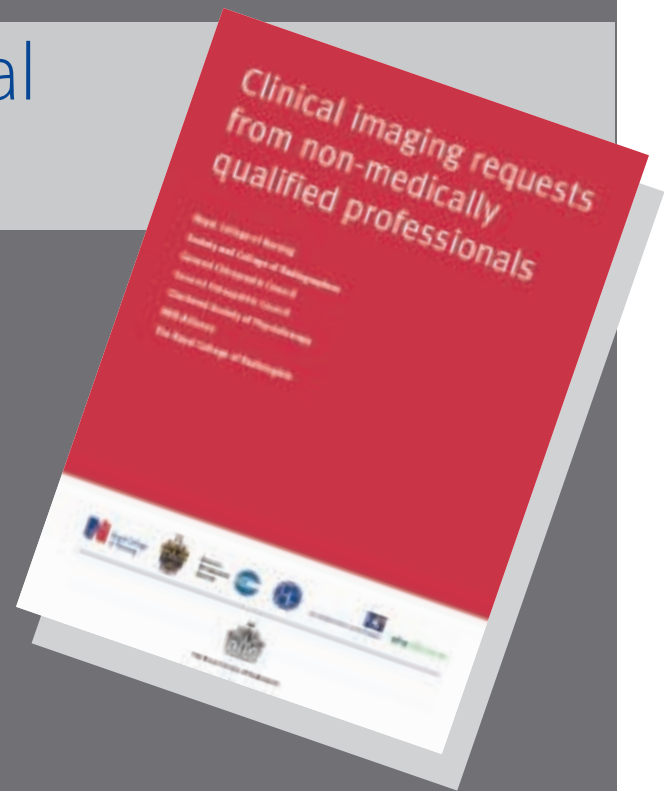
Clinical imaging referral guidance revised

Guidance for clinical imaging requests from non-medically qualified professionals have been revised to offer:

- > Best practice recommendations
- > Clear and consistent messages about the role of all health professionals involved in clinical imaging referrals
- > Improved patient outcomes and reduced waiting times

A copy of the guidelines is being sent to all radiology departments in the UK.

For the osteopathic profession, this guidance represents a tool for negotiating access to local clinical imaging services. The GOsC will shortly send a copy to all osteopaths.



For further information about the guidance, see page 27.



University of Brighton

Faculty of Health

Is a Professional Doctorate the way forward for you?

The Professional Doctorate in Health and Social Care programme is part-time, taken over four to six years, and leads to the award:

Professional Doctorate in Health Care (DHC)

If you are an experienced, UK-registered osteopath, educated to Masters Degree level, you are invited to find out more. The programme is designed to assist you to:

- > undertake critical reflection upon your own professional practice
- > develop, through your thesis and other work, an original contribution to knowledge related to practice
- > disseminate research outcomes and manage change, in order to advance practice within your profession.

The programme represents an outstanding opportunity for in-depth professional development together with the formal recognition of the award of a doctoral degree.

If you would like further information, or to arrange an informal discussion, contact the University of Brighton's Programme Administrator, Jayne Ingles, on t: 01273 644 763 or email: J.Ingles@bton.ac.uk.



4

Key contacts

Editorial

6

GOsC news

- > Advancing Osteopathy 2008
- > In Council, March 2008
- > GOsC recruiting new lay members
- > Revalidation: developing a scheme for osteopaths
- > Changes to the GOsC Register
- > GOsC appoints new Head of Regulation
- > Fitness to Practise update
- > Working toward a healthier workplace

17

health matters

International

- > Canada: big country, big potential
- > Moving practice to South Africa?

UK

- > New health and social care regulator
- > Calls for reform of workplace health
- > Linking patients to better local care?
- > Managing anti-social behaviour: a multidisciplinary approach
- > BSO launches new Masters course
- > Team Osteopath to run again
- > First MSc graduate in Animal Manipulation

22

research

NCOR

- > Research hub news
- > Conference calendar
- > Research update
- > Research – the battle for ideas

26

in practice

- > Appeal for 'humanitarian osteopaths'
- > Clinical imaging guidance launched

Regional roundup

- > Regional networking
- > Forming BONES
- > Osteopathy: head to toe
- > London's forthcoming meetings
- > Osteopathy in harmony
- > Still on Osteopathy ...
- > Sheffield's 2008 meeting schedule

CPD resources

- > 1st International Osteopathic Congress in Barcelona
- > Allergy & Gluten Free Show

Backchat

Courses 2008

34

marketplace

the osteopath

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 Chief Executive & Registrar: **Evlynn Gilvarry**

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for osteopaths** **0800 917 8031**

**Communications & Osteopathic
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Enquiries about conferences, workshops & events, *The Osteopath*, GOsC websites, Certification Mark, locum list, the media, NHS, leaflet & publication orders (including GP consent forms & off-work certificates), presentation material, Regional Communications Network.

Development **ext 238 / 235 / 240**

Enquiries about Continuing Professional Development, osteopathic education, standards of practice, Assessments of Clinical Competence, Recognised Qualification process, NCOR.

Finance & Administration **ext 227**

Enquiries about registration fees, VAT, payments.

Public affairs **ext 245 / 247**

Enquiries about national healthcare policy, parliamentary and international affairs.

Registration **ext 256**

Enquiries about annual renewal of registration, updating your Register details, non-practising status, practising abroad, graduate registration, retiring/resigning from the Register, professional indemnity insurance.

Regulation **ext 224 / 249**

Enquiries about the *Code of Practice for Osteopaths*, dealing with patient concerns, ethical guidance & consent forms, fitness to practise, Protection of Title.

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Apply yourself in the public interest

**Who makes the big decisions that affect the professional lives of osteopaths?
Who sets the standards of practice?
Who decides when an osteopath has crossed over the line of good conduct?
Who decides how best to respond when the Government suggests reforms affecting osteopaths?**

The answer to all of these questions is the elected osteopaths and the appointed lay people who sit on the General Osteopathic Council. **The input of osteopaths is critical in helping the Council to discharge its primary function – public protection.** And this will continue to be the case even though major reforms to the way Councils are composed are on the horizon.

The reforms in question arise from the Foster Review (of healthcare regulation) which highlighted the need for Councils of all healthcare regulators to be properly equipped to set the strategy and direction for their professions. With this in mind, Foster recommended that all Councils should be smaller in size, with members appointed on the basis of experience and skills.

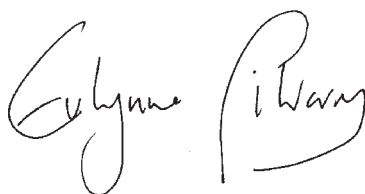
What this means for the GOsC is that from the spring of 2009 (the timetable may change but not by much) the current Council of 24 will be replaced with one comprising 14 members: seven osteopaths and seven lay members. All members will be appointed by reference to agreed criteria – relating to experience and skills – which are currently being developed by a sub-group of the existing Council. The recruitment will be conducted on behalf of the GOsC by the Appointments Commission – an independent body with immense experience in public appointments – www.appointments.org.uk/.

What this means for osteopaths is the opportunity to apply to be a member of the new Council. Obviously the number of seats is limited to seven, but the opportunity to be involved in shaping the future

development of the profession is not one to be overlooked. The GOsC, in common with all healthcare regulators, is looking ahead to a period of significant change driven by patient, public and professional concerns. To respond effectively to these concerns, the Council will need to draw on the broadest possible mix of skills and that is where osteopaths from all parts of the UK come in.

As a general guide, and to assist those who may be interested in applying, we plan to publish the draft criteria for appointment to the new Council in June. We also plan a series of meetings around the UK to explain the arrangements for the new Council, as well as some further changes relating to the composition of GOsC committees. These additional changes are aimed at enhancing the independence of fitness to practise decisions and will, in due course, offer further opportunities for the appointment of osteopaths.

We hope that many of you will be interested in becoming involved, if not immediately, in future years. The long-term wellbeing of the profession will depend on your input. Let us know what you think by emailing: newcouncil@osteopathy.org.uk.



Evlynne Gilvarry
Chief Executive and Registrar



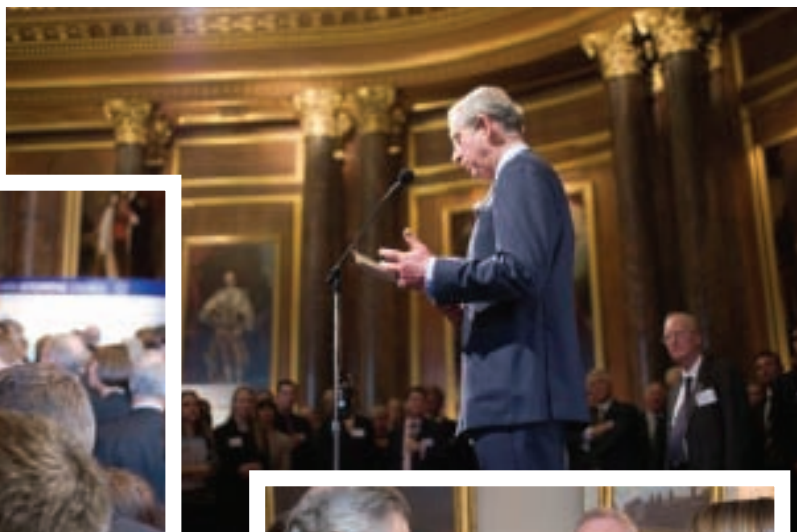
Advancing Osteopathy 2008

Celebrating UK recognition & progress

GOsC reception

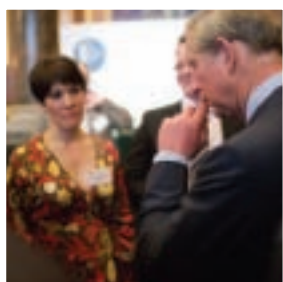
Thursday 31 January 2008

Drapers' Hall, London



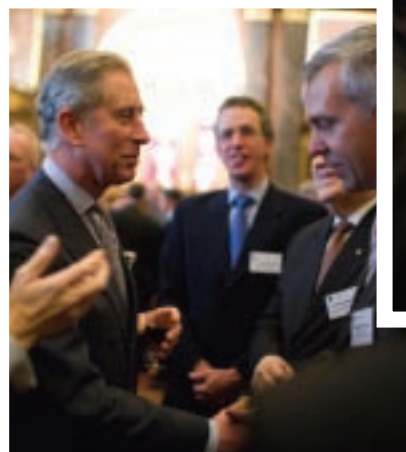
Formal launch of Advancing Osteopathy 2008, highlighting advances in osteopathic care

250 guests representing the osteopathic profession – UK and international – and the political, educational, research, consumer and wider healthcare sectors





Launch of the illustrated review of current UK osteopathic practice – *Good Health in Good Hands*



Advancing Osteopathy 2008

Celebrating UK recognition & progress

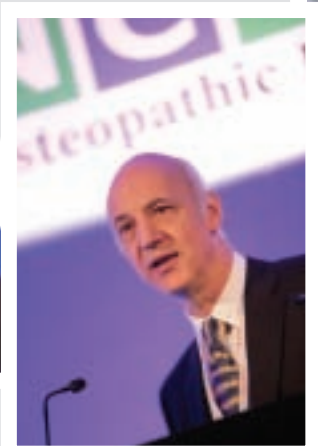
Friday 1 February –
Sunday 3 February 2008

Queen Elizabeth II
Conference Centre,
London



The UK's largest osteopathic conference to date, bringing together
1350 delegates from 20 countries





Above: Keynote addresses (LtoR): Prof John Licciardone, USA; Dr Ian Drysdale; Prof Kim Burton; Prof Raymond Lee, Uni of Brighton; and IJOM editors' Robert Moran (New Zealand) & Nicholas Lucas (Australia)

Osteopathy – art and science

Friday 1 February 2008

Hosted by the National Council for Osteopathic Research

Right: Michael Watson, BOA & Robin Kirk, London School of Osteopathy



Above: Jorge Esteves, European School of Osteopathy

Right: Dr Dawn Carnes PhD



Left: Ann Moore, Chair of conference host, NCOR



Right: Dr Louise Potter PhD





Above: (Left to Right): Tim Oxbrow; Dr James Brown, Consultant in Sport & Exercise Medicine with Carl Todd; Jonathan Lawrence; Mr John Hutchinson, Consultant Orthopaedic Surgeon, UK; Philipp Richter, osteopath, Germany

Right: Professor Adrian Eddleston, GOsC Chairman



Above: Very Important Patient, Debbie Barr



Osteopathy – good health in good hands

Saturday 2 February 2008

Hosted by the General Osteopathic Council



Above: (LtoR) Simon Fielding, first GOsC Chairman, Evlynne Gilvarry, GOsC CE&R & Mr David Tredinnick MP



Above: Conference chair Robin Shepherd

Left: (LtoR) Stuart Korth, Carina Petter, Marianne Bennison & Mr John Hutchinson

Below: Dr Nefyn Williams



Osteopathic learning & practice – a global future

Sunday 3 February 2008

Hosted by the British School of Osteopathy
and Osteopathic International Alliance



Below: Steven Vogel, UK



*Above: (From left to right): Phyllis Woodfine, UK;
Paul Orrock, Australia; Sharon Potter, UK*



*Below: Ronan O'Brien,
BSO student, UK &*



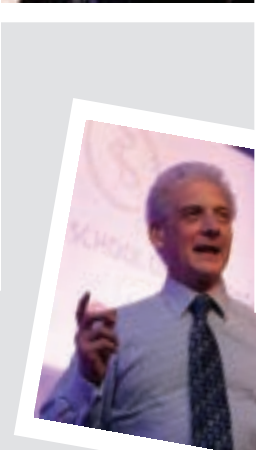
*Below: Professor
William Strampel,
USA*



Below: Peter Sommerfeld, Germany



*Above: (left to right): Clive
Standen, New Zealand;
Christian Fossum, USA;
Gary Fryer, USA;*



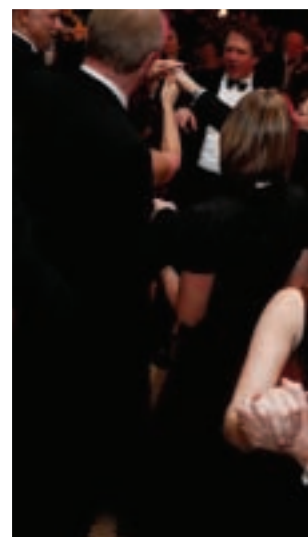
*Far left to right:
Professor Stephen Tyreman, UK;
Raimund Engel, Austria;
Michael Mullholland-Licht,
Australia; Simeon London, UK*

Gala Dinner-Dance – Osteopaths Reunited

Thursday 31 January 2008
Royal Lancaster Hotel, Hyde Park



Making the most of this rare reunion – nearly 500 practising and retired osteopaths, friends, supporters, and representatives of the international osteopathic community





"Arriving at the QEII Conference Centre on Friday morning and seeing the *Advancing Osteopathy 2008* flags flying in full view of the Houses of Parliament filled me with such pride. And that feeling continued throughout all three conferences. Never before had I shared with my professional colleagues such an 'esprit de corps'. I really feel we have arrived!"

Robin Shepherd DO, Acting Chairman, General Osteopathic Council



"The abiding memory of the event is one of positivity which, through feedback, I know is shared with others. I was amazed by the sheer number of osteopaths in attendance, which showed a real maturity and a long-awaited coming together.

The event helped highlight osteopathy on the map – more and more people are becoming aware – and it proved an excellent springboard for the coming decade. I'm already looking forward to the next event."

Dr Ian Drysdale PhD BSc Hons DO, Principal, British College of Osteopathic Medicine

I wasn't really prepared for *Advancing Osteopathy 2008* ...

I wasn't prepared for the venue; it was altogether a bit mainstream and important for mere osteopathy.

I wasn't prepared for the content of the first two days either; it was altogether a bit mainstream and important for mere osteopathy.

I wasn't really prepared for the intensity of the debate about research, either – nor the magnitude of the divide. I'm used to the collective noun for osteopaths being a "disagreement" – frequently of the vitriolic kind.

So, I wasn't really prepared for the rather mature, considered thoughtfulness of the (deeply felt) disagreements that surfaced.

All in all a very surprising event! And one that reflected a profession that has come of age – facing up to new, daunting challenges, but with the self-confidence to engage in mature debate, as it struggles to develop over the next 10 years.

I really wasn't prepared for that!

Martin Grundy BSc (Hons) Ost, Communications Committee Member, British Osteopathic Association



"For those who weren't at *Advancing Osteopathy 2008*, you missed one of the biggest and most successful osteopathic events ever. It was a great breath of fresh air and I feel reassured that osteopathy offers something important to public health worldwide. Thanks to all who spent so much time and energy sharing their passion, and for helping drive us further forward!"

Paul Vaucher, Osteopathe FSO-SVO, Representative of Swiss Osteopaths

In Council

11 March 2008, 57th meeting of the General Osteopathic Council.

Healthcare regulation

In preparation for the forthcoming Government reforms to healthcare regulation, Council is undertaking a number of streams of work, including the establishment of working groups exploring required governance changes and to assist in the development of a bespoke revalidation scheme.

Governance working group

At its first meeting in February, the group considered:

- > Principles to underpin the role of the new Council
- > Defining the role of Council
- > Draft competencies for lay and professional members of Council.

The group will next consider job descriptions for the Chair, Treasurer, Council and committee members. A review of the current appraisal system for Council members, completion of the Constitution Order (to be drafted by the Department of Health) to allow for six-month interim appointment of the Chair and the development of a suitable governance sub-structure to support Council will also be considered and reported to Council in June 2008.

Revalidation working group

Discussion at the group's first meeting considered the Government's revalidation agenda, proposed timescales, possible methods and, practicalities and risks of a revalidation scheme for osteopaths.

The group has since been drafting the outline of a measurement tool designed to assess a range of key aspects of an osteopath's practice. A proposal looking at linking the new revalidation scheme with the current Continuing Professional Development model is also under consideration. Any scheme will take consideration of the Department of Health's principles (expected in June 2008), along with recommendations made by other healthcare regulators. For further information about revalidation for osteopaths, see opposite page.

Proposed Constitution Order – new GOsC governance arrangements

In line with Government proposals concerning governance structure, which will see a new, fully-appointed Council in place by late spring/early summer 2009, the Council has agreed the following:

- > 14 members of Council (seven lay and seven professional) to be appointed by the Appointments Commission. In order to meet the lay majority requirement, an additional lay member will be added when legislation allows.
- > Members will be able to serve a maximum of two four-year terms. To avoid all terms ending simultaneously, six members will initially serve a three-year term and the remaining eight will serve the standard four-year term.
- > All new appointments to Council will need to satisfy specific competencies – currently under development.
- > The current Chair of the GOsC will serve on the new Council for a period of six months, after which he will submit to a re-appointment process. In the future, all chairs will be appointed.

Constitution of GOsC Council – interim period

As the Government's Section 60 Order covering the constitution of regulator's Councils will not be in place before the GOsC's current lay member's term of office expires on 8 May 2008, interim measures have been arranged, with the Appointments Commission agreeing to the reappointment of six current lay members and the recruitment of two lay members to fill current vacancies – see article below for further detail.

A by-election – managed by the GOsC and the Electoral Reform Services – is also under way to cover the current vacancy for a professional member representing Northern Ireland for the interim period. Results will soon be published on the websites – public and o zone – www.osteopathy.org.uk.

Strategic Plan 2008-2011

The Strategic Plan for 2008-2011, setting out the GOsC's vision and goals for the immediate future, and the supporting Business Plan were adopted by Council. The Strategic Plan is now available on the GOsC public website (www.osteopathy.org.uk).

Printed version of the GOsC Register

In the light of new research commissioned by the UK Health and Social Care Regulators which noted that printed registers are out-of-date at the time of publication and therefore misleading, Council agreed that in the interest of patient safety, the printed version of the Statutory Register of Osteopaths should be discontinued with immediate effect – see opposite page for further details.

Osteopathy House

Preparatory steps for the redevelopment of Osteopathy House continue. The redevelopment is primarily aimed at ensuring the building is fully accessible to all (as required by the Disability Discrimination Act). It is also recognised that the building needs to be updated and restructured to make better use of space. A full structural survey is being commissioned, along with a costing analysis. Council will make its final decision on the scope of the project in June, following the results of these investigations.

National Council for Osteopathic Research

Professor Ann Moore, Chair of NCOR, presented NCOR's Annual Report for 2006-07, outlining the scale of work being undertaken. The report will soon be available on NCOR's website (www.brighton.ac.uk/ncor).

> **GOsC Council meetings are open to all – see page 12 for 2008 meeting dates**

GOsC recruiting two new lay members of Council

The GOsC has approved the re-appointment of six existing lay members of Council and the appointment of two new lay members. All eight will serve a limited term, up until the creation of the new, all-appointed Council in the spring/summer of 2009.

The introduction next year of all-appointed Councils to direct the work of regulatory bodies is a central plank of the Government's current wide-ranging reforms to healthcare regulation in the UK. GOsC Chief Executive and Registrar

Evlynn Gilvarry offers more information about the recruitment process for the new GOsC Council in her commentary on page 5.

The six re-appointed lay members of Council are: **Mr John Chuter, Mr Nigel Clarke, Mrs Fionnuala Cook, Professor Adrian Eddleston, Professor Ian Hughes and Mr Paul Sommerfeld.**

The Sunday Times of 30 March 2008 carried an advertisement for the recruitment of the two

new members needed to fill existing lay vacancies on GOsC Council for this interim period. Recruitment of these new members is carried out by the independent Appointments Commission. For further information about the required competencies and application procedure, visit the Appointments Commission website: www.appointments.org.uk.

Profiles of the new lay members appointed to Council will appear in the next issue of *The Osteopath*.

Revalidation: developing a scheme for osteopaths

The Government plans to publish in June the key principles on which revalidation schemes for health professionals should be based. Individual regulators will be asked to develop schemes, based on these principles, suited to the particular circumstances of their registrants. The Government expects that all health professions will have adopted a robust revalidation scheme by 2011.

The principles are currently being developed in association with the GOSc and other healthcare regulators, and are expected to highlight the need for practicality, proportionality and an approach based on risk. It is also acknowledged that different methods of revalidation will be required depending on whether the professional is self-employed or works within the NHS or other employer frameworks.

Revalidation, a key plank of the Government's overall healthcare regulation reforms, is due to be implemented in 2010/11*. However, it is planned to conduct pilot schemes in 2009/10 to test the feasibility of schemes.

In the light of this, the GOSc has established a working party comprising osteopaths to begin work on developing a suitable scheme. The initial focus is on identifying the areas of greatest risk, so that the eventual scheme can be aimed at mitigating this. Attention is also directed at how the existing CPD scheme can be effectively woven into a revalidation scheme. The working party is studying a range of existing methods of revalidation with a view to narrowing the options down to those methods that appear to be most workable in self-employed circumstances. It is acknowledged that the biggest challenge will be to design a scheme that is robust but remains proportionate.

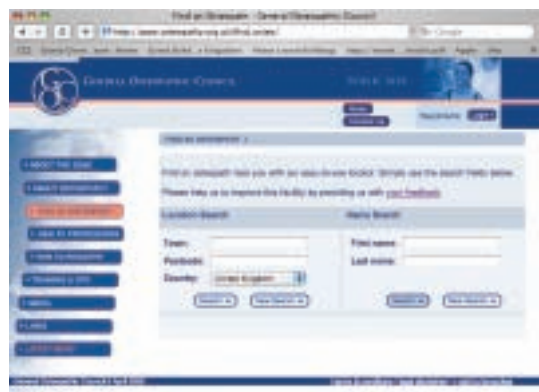
Profession-wide consultation

The GOSc plans to develop the scheme in partnership with the profession, which will involve a comprehensive programme of consultation. This will be formally launched in the autumn, with the draft principles and a questionnaire posted to all osteopaths, followed by a series of regional consultation road shows in the spring of 2009. Updates on the GOSc's revalidation work, including plans for consultation and timetable, will be published in due course on the www.osteopathy.org.uk zone.

* The Government's proposals for revalidation are set out in the White Paper, *Trust Assurance and Safety – the Regulation of Health Professionals in the 21st Century* (www.official-documents.gov.uk/document/cm70/7013/7013.pdf)

Important changes to the Register

Two key changes are being made to the way the UK Statutory Register of Osteopaths is published to ensure both patient safety and greater public confidence in the osteopathic profession. In the interest of providing accurate, up-to-date information for both the public and the profession, it is necessary to discontinue the printed Register and to include notification of sanctions placed on an osteopath.



Discontinuation of the printed Register

The Register will from 2009 be published exclusively online, on the GOSc public website (www.osteopathy.org.uk), making the current 2008 Register – the 10th issue – the last in printed format. Members of the public who do not have access to the Internet will continue to be able to request contact details of local osteopaths from the GOSc Osteopathic Information Service. Osteopaths and other health professionals will also still be able to print a list for patients from the online Register.

The decision to discontinue the printed Register was taken by the Council on 11 March and was weighed carefully against the knowledge that the Register, in book form, is popular and widely used by the profession. The final decision was, however, based on the overriding need to ensure the currency and accuracy of the Register. As the printed version is obsolete the moment it is published – recording neither those who have come off nor those who have joined the Register since that date – it is also therefore inaccurate and inherently unsafe.

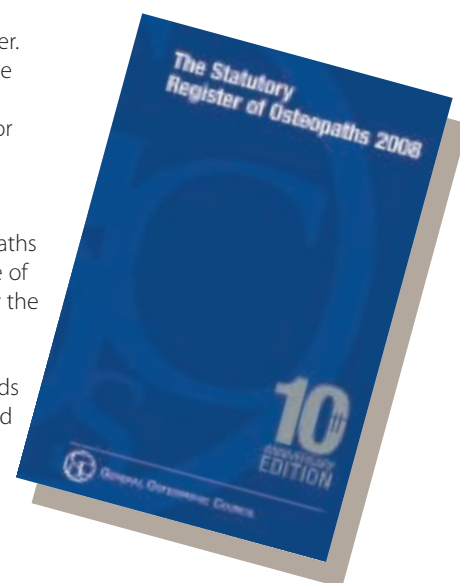
The Statutory Register of Osteopaths is the single most effective evidence of entitlement to practise and it is only the live, online Register that offers the facility for continuous updating.

The GOSc intends to use the funds saved from discontinuing the printed Register this year to finance a major overhaul of the GOSc public website, including the online Register.

Publication of sanctions

Together with fellow healthcare regulators, the GOSc is required to advise the public of any restrictions imposed on an osteopath's practice as a result of disciplinary proceedings. Therefore, from 1 July 2008, the online Register will clearly indicate when an osteopath is subject to a practice restriction. Those consulting the online Register will have the option to link to further details about the restriction(s), followed by the full finding of the Fitness to Practise hearing. The information will be displayed for the duration of the restriction applied.

Both changes are aimed at improving the information available to the public when making healthcare choices. They are equally intended to assist osteopaths in making referral and other decisions in practice.



GOsC appoints new Head of Regulation



The GOsC is pleased to announce the appointment of **Velia Soames** (above) as Head of Regulation. A solicitor with a wealth of experience in both private practice and public service, Velia comes to the GOsC from the Office of the Pensions Ombudsman. There she led a team of specialist staff responsible for analysing complaints about the management of pension schemes, advising the Ombudsman on a wide range of legal issues, and conducting litigation including judicial reviews.

Velia takes up her new post on 28 April 2008 and will be responsible for overseeing the fitness to practise department and for advising on all legislative matters which impact on the GOsC.

Future Council meetings

- > 10 June 2008
- > 16 September 2008
- > 4 December 2008
- > 10 March 2009

Meetings commence at 10.00am at Osteopathy House and agendas for the public session are available on the GOsC public website, or from Jane Quinnell, approximately seven to 10 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 or email: janeq@osteopathy.org.uk for further information, or if you would like to attend the next Council meeting.

Fitness to Practise update

On 3 January 2008, the Professional Conduct Committee reviewed the Suspension Order that had been imposed on **Mr Moishe Lewis** (Registration number: 3\765\F) and agreed that the order be lifted. Mr Lewis was found guilty in September 2007 of unacceptable professional conduct and suspended from the Register for three months, as a result of having practised without adequate professional indemnity insurance. **Mr Lewis** has since obtained adequate insurance and **returned to the Register on 5 January 2008.**

The PCC considered an application on 21 January 2008 to revoke the Interim Suspension Order (ISO) imposed on **Mr John Perrott** (Registration number: 6\5377\F) in July 2007. The PCC found the ISO to still be necessary and that **Mr Perrott should remain suspended until the allegations against him have been heard.**

Also on 21 January 2008, the PCC considered the case of **Mr John Varley** (Registration number: 3\1349\F). Mr Varley had been convicted of a criminal offence, which the PCC found to be relevant to his fitness to practise as an osteopath. The offence was incitement to supply a drug of Class B. The PCC **suspended Mr Varley's registration for a period of six months.**

On 22-25 January 2008, the PCC considered the case of **Mr Christopher Evans** (Registration number: 2\2677\F) and found him guilty of unacceptable professional conduct. The PCC found that Mr Evans had not elicited a comprehensive and relevant case history and failed to evaluate his patient's musculoskeletal health. It was decided that a **Conditions of Practice Order be imposed on Mr Evans' practice for nine months.** The conditions include the development and use of a pro-forma to ensure that an adequate case history is taken and recorded.

Further details of these cases can be found on the GOsC public website – www.osteopathy.org.uk .



Working toward a healthier workforce

Sarah Eldred, Public and International Affairs Manager

The Health and Wellbeing at Work conference and exhibition 2008 brought together over 2,000 delegates from the UK occupational health sector in March, to learn about practical ideas and tools to reduce sickness absence and ensure employees return to work more quickly after illness or injury.

Now in its second year, this event ties in with the Government's own initiatives to tackle the costs of sickness absence through musculoskeletal or mental ill health. Key to this is the need for prevention and early intervention – a philosophy advocated by the osteopathic profession for many years.

Despite competing with Crufts in a neighbouring exhibition hall at Birmingham NEC, there was a strong osteopathic presence at Health and Wellbeing. The General Osteopathic Council's exhibition stand attracted attention from delegates keen to know about osteopathic standards of practice and the potential inclusion of osteopathy in occupational health schemes. Thanks go to osteopaths Rosie McCauley and Michelle Davies for helping GOsC staff on the exhibition stand. The British Osteopathic Association was represented by osteopath Robin Lansman, who hosted a popular and practical workshop on posture.

A number of osteopaths attended as delegates this year, as the event, recognised by the Faculty of

Occupational Medicine, offered a rare opportunity to network with fellow health professionals and colleagues in the industry.

If you are interested in attending next year's event, Health and Wellbeing at Work will take place on 24-25 February 2009 at Birmingham NEC. For further details, contact Sterling Events on tel: 0151 709 8979 or email: healthatwork@sterlingevents.co.uk

Primary Care 2008 – free admission for osteopaths 21-22 May, NEC Birmingham

One of the largest national healthcare conference and exhibitions on the events calendar, Primary Care 2008 is again expected to attract more than 4,000 primary contact practitioners from a cross-section of the nation's health service. Not only providing an opportunity to network with colleagues, the diverse and practical programme, with 16 parallel streams, also offers two days of CPD. **Attendance for practising health professionals is, as always, free-of-charge.**

For further information, or to register, visit: www.primarycare2008.co.uk.

Canada: big country, big potential

Edward Paget BSc BOst, Co-founder, Alberta Association of Osteopathic Manual Practitioners & Board of Directors, Canadian Federation of Osteopathy

Two streams merge?

The World Health Organization is in the process of developing training guidelines for osteopathy which will recognise the two distinct professions of osteopathy and osteopathic medicine. Despite this international agreement, osteopaths and osteopathic physicians do not currently have the same level of recognition by national governments in all countries.

Canada is, however, a country where this could change. It is a country of great potential where, if approached with care and consideration to all parties involved, both osteopaths and osteopathic physicians could work together. This partnership would enable these osteopathic cousins to use their shared philosophy and different approaches to provide osteopathic healthcare to an ever-increasing proportion of the public.

Recent events

It was encouraging, therefore, to see osteopathic historian Jane Stark's name on the programme at *Advancing Osteopathy 2008*. Jane, who hails from Canada, gave a presentation on the Canadian education system. Such a platform was encouraging for two reasons: firstly, exposure at this event helped raise awareness of the current situation in Canada and the country's osteopathic potential; secondly, it was fortuitous that this event coincided with the Osteopathic International Alliance's (OIA) AGM. The OIA's purpose is to advance the practice of osteopathy and osteopathic medicine throughout the world, and it will therefore have an influential role over the immediate progress of osteopathy in Canada.

Due to the pressures of working in primary healthcare, it is easy to lose yourself in your own practice. In the UK, osteopaths can rest easy in the knowledge that there are organisations working tirelessly to keep the profession regulated, protected and in the public eye.

This is not the case in Canada which is, in part, due to the way Canada is governed. It is

divided into provinces, with individual governments in each province. In turn, the provinces are overseen by a federal government and it is at the provincial level that the health professions are regulated. This means that if a policy is adopted in one part of the country, it may not necessarily be followed in another. Each provincial government has to be approached individually in order to alter health policies.

Canadian osteopathic history

Osteopathic physicians have a long history in Canada, dating back to the turn of the last century. Despite small numbers, they have been organised and worked hard to obtain medical practice rights for physicians who graduate from the United States (US) medical schools, approved by the American Osteopathic Association (AOA).

Osteopathic physicians were striving for recognition in Canada long before osteopaths became a significant part of the healthcare community. In these early times, there was no need to make a distinction between the two branches and therefore, to protect themselves and the public, they lobbied hard for protection of the title 'osteopath'. This means that in some provinces it is illegal to call yourself an osteopath unless you have been trained at a medical school in the US.

Both the World Osteopathic Health Organization (WOHO) and guidelines to be published by the World Health Organization later this year thankfully recognise the two streams and there is now the need for the provincial governments to do the same. The recent work by the Colleges d'Études Ostéopathiques (CEO) and subsequently the Canadian College of Osteopathy (CCO) has particularly helped to highlight the need for change to accommodate the growing number of osteopaths, who now far out number osteopathic physicians in nearly all provinces.

Alberta

Some six months ago I moved from the UK to the province of Alberta, which has a population of roughly three million and a land mass equivalent to France. At present, Alberta has two registered osteopathic physicians, five UK-qualified osteopaths and 14 students studying at the Canadian College of Osteopathy (CCO). The osteopaths here are in the frustrating position of not being able to call themselves osteopaths due to the protection of title. This is despite numerous schools teaching osteopathy in Canada and none training osteopathic physicians.



The road for osteopathy should be quite clear: organise a national governing body; set education standards for recognised schools; and each provincial association lobby the individual governments for professional recognition. This would be a process similar to the accomplishments of New Zealand, Australia and the UK.

Two streams, one country

Apart from the obvious exception of the US, Canada is one of the few countries where osteopathic physicians are already established, which makes it difficult for the provincial associations to reverse legislation regarding protection of title. Instead, it is up to the international community of osteopaths and osteopathic physicians to lend their thoughts and actions to what could possibly be a precedent in osteopathy: co-existence and harmony between the two branches.

It has been said that this may be too 'confusing' for the public of Canada. In Alberta, it has been my experience that the general public is still largely unaware of what osteopathy is, but if collaborative action is taken quickly, the public could soon benefit from greater accessibility to osteopathic healthcare without confusion.

The future

The recently established Canadian Federation of Osteopathy (CFO) represents osteopaths across Canada in an attempt to make this vision a reality. Membership is open to any province with an osteopathic association. This body is a first, and necessary, step in the organisation and regulation of osteopaths in Canada. It has applied for membership of the OIA and if the board accepts the application it could mark the beginning of a new era in osteopathic healthcare in this country.

If both streams are recognised in the same country, the benefit to the public and the advancement of osteopathy will be tremendous.

For further information about the issues in this article, contact the Alberta Association of Osteopathic Manual Practitioners, email: info@osteopathyalberta.com or the Canadian Federation of Osteopathy, email: info@osteopathy.ca.



Moving practice to South Africa?

The GOsC has been advised that osteopaths planning to register and practise in South Africa could be affected by proposed changes there to the osteopathic qualification and registration requirements.

Information suggests that in South Africa the profession is currently developing a framework for the country's first formal qualification in osteopathy – a five-year Masters Degree in Osteopathic Medicine. The Allied Health Professions Council of South Africa (AHPCSA) – the body responsible for the statutory regulation of osteopaths – could adopt this as the minimum qualification for registration purposes. It is unclear what implications this could have for osteopaths holding a BSc qualification.

This information has come to the GOsC and BOA from the Osteopathic Association of South Africa. No confirmation of this information has yet been received from the AHPCSA.

Osteopaths affected by this are advised to seek clarification from the Allied Health Professions Council in South Africa – tel: +27 12 329-4001, email: info@ahpcca.co.za or visit: www.ahpcca.co.za.

New health and social care regulator on the horizon

Sarah Eldred, Public & International Affairs Manager

Health and adult social care services in England will be regulated by a new body – the Care Quality Commission (CQC) – from April 2009. Subject to Parliamentary approval of the new Health and Social Care Bill, the CQC will replace the current Healthcare Commission, Commission for Social Care Inspection and the Mental Health Act Commission.

By merging the above existing regulators, this new body will aim to reduce the current burden of inspection of service providers and ensure a more consistent approach to regulation across the private and public health sectors.

How will this affect osteopaths?

Osteopaths, as practitioners, will continue to be registered and regulated by the General Osteopathic Council. However, osteopathic practices providing NHS services will be required to register with the CQC. Currently, these practices should be registered with the Healthcare Commission. Failure to comply with the CQC's safety and quality standards is likely to lead to a fine or closure.

It is possible the CQC's remit could in time be extended to include primary and private sector care – the GOsC will keep osteopaths advised.

Under consultation

In March, the Government launched a formal consultation on the framework for the registration of health and adult social care providers. This consultation seeks views on which services should fall within the scope of registration and the requirements service providers will have to meet in order to register and, therefore, provide services. It is envisaged the registration process will be introduced in April 2010.

Health Minister Ben Bradshaw said:

"More services than ever before are now available in GPs' surgeries and community settings, such as those traditionally provided in hospitals, so it is essential that patients know that these services are safe and are of good quality."

To date, the establishment of the CQC has received mixed reviews from professional representatives who either welcome the need to tackle "under par" practices or fear further onerous and intrusive demands. The General Osteopathic Council will be responding to the Government's consultation which closes in June. Further updates will be published in future issues of *The Osteopath* and on the o zone – www.osteopathy.org.uk.

For more details, visit: www.dh.gov.uk/en/Consultations/Liveconsultations/DH_083625.



GOSc supports calls for reform of workplace health

Sarah Eldred, Public and International Affairs Manager

Calls for early access to preventative care in the workplace, as published in the Government's review, *Working for a healthier tomorrow*, are being supported by the General Osteopathic Council.

This report, the result of wide-ranging research and consultation into the human, social and economic costs of workplace ill health, was launched by Dame Carol Black, National Director for Health and Wellbeing, in March. An estimated 175 million working days were lost to illness, often due to stress and musculoskeletal disorders, in 2006 alone.

Health Secretary backs change

The need to tackle this occupational health crisis was also the focus of a recent speech by the Secretary of State for Health, Rt Hon Alan Johnson MP. Speaking at the British Heart Foundation's Well @ Work pilot evaluation, the Health Secretary put forward the economic and social case for workplace health reform: "Back pain alone costs employers £600 million a year, with sufferers of persistent back problems on average taking 17 days off sick per year."

Mr Johnson highlighted three essential action points:

- > Employers need to take steps to make health and wellbeing a higher priority in the workplace.
- > Government and employers must work together to improve how we identify potential health risks. Particular support will be given to smaller companies to address challenges such as back pain.
- > Government must do more to help those who have become inactive, but are able to work to get back into the workplace. Sick notes will be replaced by 'well notes', highlighting what an employee can do as opposed to what s/he cannot do. Likewise, incapacity benefit will be changed to Employment Support Allowance.



Echoing osteopathic philosophy

This call for prevention and early intervention echoes what the osteopathic profession has been advocating for many years. As regulated professionals, osteopaths are well placed to prevent occupational injury and assist rapid return to work. The GOSc will monitor the development of well notes and the impact this might have on the current 'off work' certificates issued by osteopaths. For further information about UK-wide Government policy on workplace health, visit: www.workingforhealth.gov.uk.

Linking patients to better local care?

In a bid to allow for greater public and patient influence over local health and care services, new independent groups representing patient voices in the NHS – Local Involvement Networks (LINKs) – are currently being rolled out across the country.

Replacing Patients' Forums, LINKs will be set up in 150 local authority areas, supported by £84m of central government funding over the next three years.

Each community will determine how they want their LINK to operate, and will be charged with determining local priorities, and monitoring and reviewing the care provided. Established under the Local Government and Public Involvement in Health Act 2007, the networks now have the power to enter and

view services funded by local authorities – something Patients' Forums were not permitted to do.

Membership is open to all parties interested in shaping the local health and care services, including service users, carers, community leaders and patient representatives. Groups such as charities, faith groups and business federations are also invited to get involved. Further information about LINKs is available at <http://www.dh.gov.uk/links>.



Managing anti-social behaviour: a multidisciplinary approach

Dr Humam Maki, Neuroscience Researcher, Kids Company

Antisocial behaviour has become an increasing problem in Britain, with current estimates suggesting that one out of every four adolescents demonstrates antisocial behaviour of sufficient magnitude to interfere with education, family life and community life.

Over the past eight years, the Government has significantly increased spending on youth crime, with the wider cost to the economy estimated to be in the billions per year. While not all youth crime results in criminal activity, it is estimated that in the long term each child affected with conduct disorders costs on average 10 times more than a child without (*BMJ*, No. 7306, Vol. 323).

The Kids Company – a London-based charity – recognised the plight of the capital's vulnerable youth and established a programme of support and management for those presenting with serious antisocial behaviour. Currently they cater for approximately 12,000 young people, ranging in age from three to 23. A multidisciplinary approach to the management of conduct disorders amongst children has been adopted, comprising osteopaths, psychotherapists, counselors, facilitators, reflexologists and masseurs.

When subjected to stressful stimuli, a child's response depends on the outcome of a chain of neuro-chemical reactions in the brain, resulting in the release of what's known as the stress-initiating hormones: adrenaline and corticosteroids (see: Perry BD 1999, Aston-Jones 1996 & McGaugh 2004, Kavushansky A 2006).

Persistent release of high concentrations of these hormones into the blood of a growing child seems to be affecting the neurodevelopment of certain areas in the brain, hence limiting their ability to show more thoughtful but less aggressive behaviour.

Kids Company uses a wide range of therapies that can directly, or indirectly, decrease the level of those stress-initiating hormones, in an attempt to control their damaging effect to the developing brain. The inclusion of osteopathic treatment, it is thought, could help redirect the stress hormones into parts of the body other than the brain, keeping its biochemical balance to a safe level and allowing healthy brain development.

Researching anti-social behaviour

Despite a flurry of government initiatives and psychology treatment strategies, little is known about the underlying neuro-biological causes

of conduct disorder. To investigate why troubled children find it difficult to control their behaviour and the role physical therapies and sport activities play in the management of conduct disorders, Kids Company is conducting a pilot study examining neurobiological and physiological markers of anti-social behaviour amongst a representative group of children and adolescents.

The study – a collaborative project by Kids Company and the Great Ormond Street Hospital – also involves structural brain imaging to determine the integrity of those regions that have been implicated in antisocial behaviour/conduct disorder. It is hoped the findings of this research will be held as early indicators of conduct disorder and used to diagnose children potentially susceptible to developing future antisocial behavior. It is also intended that the improved understanding of underlying causes of conduct disorder will aid the development of effective management programmes.



BSO launches new Masters course

Following validation by the University of Bedfordshire on 13 March, The British School of Osteopathy (BSO) has launched a new three-year postgraduate course – MSc Osteopathy in the Cranial Field – scheduled to commence in September 2008.

Developed by specialists in the cranial field – including BSO faculty members and external lecturers in dental and paediatric osteopathy – this course is designed for UK practising osteopaths. To facilitate participation by osteopaths based outside London and south east England, the course will be offered part-time. The research component of the course will be supported by the BSO's research team, who specialise in working with students with varying levels of experience in conducting their own research.

Europe's largest osteopathic clinic opened

The British School of Osteopathy officially opened its new, fully-accessible osteopathy clinic on Southwark Bridge Road on 1 April –

only minutes' walk from the school's existing teaching premises on London's Borough High Street. With 35 climate-controlled treatment rooms, this facility is the largest osteopathic clinic in Europe and will continue to offer accessible and affordable osteopathic treatment to the local community.

With an estimated 40,000 appointments carried out each year by supervised third- and fourth-year students of osteopathy, the clinic provides treatment for a range of patients including children, expectant mothers, people with sports injuries and people living with HIV/AIDS. Almost half of these appointments are taken up by patients who qualify for concessionary rates and a number of appointments are provided free-of-charge.

For further information about the new clinic, Masters course or the fundraising appeal, contact Deborah Hyde, BSO Communications Officer, on tel: 020 7407 0222 or email: d.hyde@bso.ac.uk.

First MSc graduate in Animal Manipulation – Osteopathic Pathway

Tony Nevin DO, Cheltenham

On Saturday 21 March 2008, osteopath Alison Tyler became the first to complete the MSc in Animal Manipulation – Osteopathic Pathway. A former graduate of the British College of Osteopathic Medicine, Alison undertook the accredited two-year course with the University of Wales and not only passed, but managed to attain a distinction. This postgraduate qualification was the brainchild of the late Anthony Pusey and although he did see Alison embark on the course, it was for others on the faculty to help see her through.

The first year is predominately academic, with lectures attended alongside McTimoney Chiropractors, at Morrell College, Warwickshire. During the second year, the students commence practical tutorials, which involve working alongside practising osteopaths at veterinary clinics all over the UK. Students also complete their research dissertation during the second year. Alison's was titled 'The effect of osteopathic treatment on equine stride length' and explored the work carried out at Avonvale Veterinary Practice with vet Dr Chris Colles, and osteopath Tony Nevin.



Alison Tyler (centre) with osteopath Tony Nevin

Alison has since been asked to return to Moreton Morrell to join the teaching faculty. She also plans to begin her new branch of osteopathic work in and around Staffordshire.

For further information on the MSc and other courses pertaining to the treatment of animals, contact the Society of Osteopaths in Animal Practice (SOAP) at www.uksoap.org.uk or tel: 01242 221 153.

Team Osteopath to run again

Daniel Ester, Foundation for Paediatric Osteopathy

It's that time of year again ... Time to dust off the trainers and join Team Osteopath for **The British 10k London Run on Sunday 6 July 2008.**



This year Team Osteopath is being coordinated by the Foundation for Paediatric Osteopathy* (FPO) and so funds raised will go toward supporting the osteopathic children's charity.

Once again, osteopaths and friends of the profession from across the UK are being called on to join and support Team Osteopath, not only to help raise funds but also, importantly, to help raise the profile of osteopathy.

Some 30,000 free osteopathic treatments are provided by FPO each year in addition to outreach osteopathy programmes for vulnerable babies in two of London's hospital neonatal intensive care units. Support is also given to education and awareness-raising programmes. To fund these services, the Foundation needs to raise £1 million each year – no Government funding is received.

The Foundation will provide all Team Osteopath 2008 participants with fundraising support including sponsorship forms, a fundraising pack and a custom running vest.

Your £29.50 registration fee will be paid for by the Foundation if you can commit to raising at least £200 in sponsorship – but more is always better! If you're interested in joining Team Osteopath 2008, please contact Esther at the FPO on tel: 020 7490 5510 or email: esther.gillham@fpo.org.uk.

For more information on the Foundation for Paediatric Osteopathy, visit www.fpo.org.uk. Visit www.thebritish10klondon.co.uk for further information about the run.

*Foundation for Paediatric Osteopathy, formerly known as the Osteopathic Centre for Children (registered charity no. 1003934)

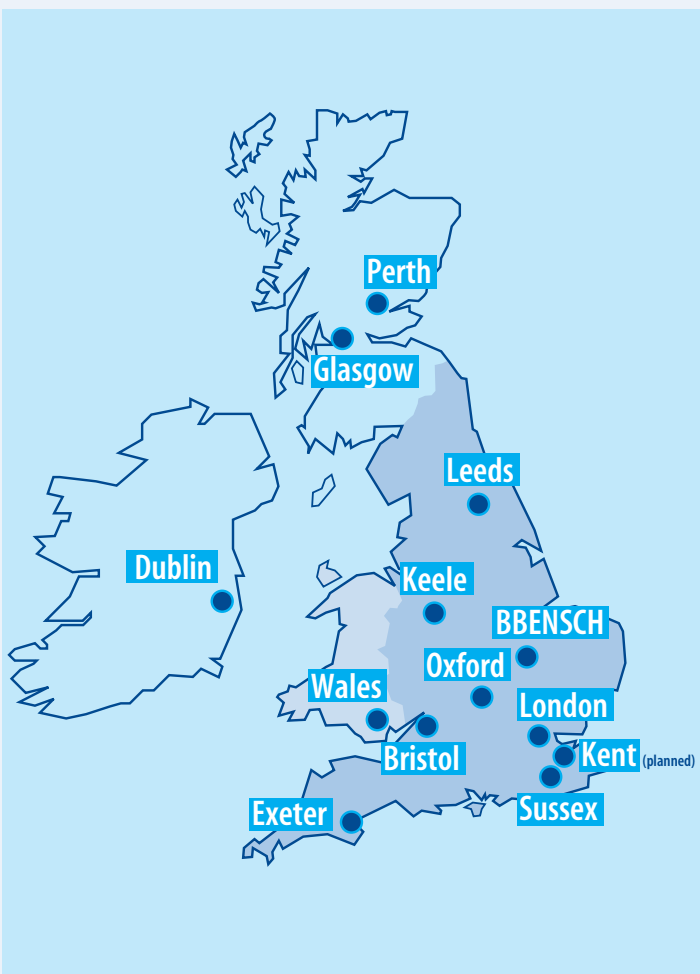
NCOR research hub news



www.ncor.org.uk

Hub meetings

For further information about the work being undertaken by these groups, contact Carol Fawkes, NCOR Research Development Officer, on tel: 01273 643 457 or email: c.a.fawkes@brighton.ac.uk.



> BRISTOL

Thursday 1 May 2008, 7–9pm
Small project work

An audit of case records from the past 40 years, looking at how the incidence of cervical spine symptoms compared to low back symptoms has changed as work demands and computer use have changed during this period.

The next meeting will also explore literature concerning the impact of shoe choice on back pain.

> EXETER

Saturday 26 April 2008, 10am to 12 noon

Developing a study looking at factors influencing retention of osteopaths in private practice

> HAYWARDS HEATH

Sunday 8 June 2008, 10am to 12 noon

Presentation of case studies looking at the lasting musculoskeletal symptoms of patients who have undergone cardiac surgery

Review of the literature looking at pain experience and treatment responses among different patient groups.

Developing a pilot study to look at job satisfaction within the osteopathic profession

> LEEDS

See www.ncor.org.uk for next meeting date

Developing a patient satisfaction questionnaire for osteopathic practice

> LONDON

See www.ncor.org.uk for next meeting date

> OXFORD

See www.ncor.org.uk for next meeting date

Discussion of topics for small group work

Conference calendar

> 10 May 2008

4th International Conference in Evidence Based Medicine

Venue: Imperial College, London.
Visit www.heseminars.com for further information or to book a place.

> 5–7 September 2008

7th International Conference on Advances in Osteopathic Research (ICAOR)

Venue: Bradenton, Florida.
Full details are available on the British College of Osteopathic Medicine's website: www.bcom.ac.uk.

> 25 October 2008

5th Chiropractic, Osteopathy and Physiotherapy Annual Conference: 'Moving forward through research and practice'

Venue: Anglo-European College of Chiropractic, Bournemouth.
Further information will soon be available on the British School of Osteopathy's website: www.bso.ac.uk.

> 14–16 November 2008

British Osteopathic Association annual convention & trade exhibition

Venue: Marriott Forest of Arden, Meriden, near Birmingham.
Further information is available on the BOA website: www.osteopathy.org.

Research news in brief

Carol Fawkes, NCOR Research Development Officer

Arthroscopy or exercise?

Many of our patients are increasingly being offered arthroscopy for investigation and symptomatic relief of disorders of the knee joint. The authors of this study investigated the use of arthroscopy for chronic patellofemoral pain syndrome (PFPS) when used with exercise and when exercise alone was employed.

A sample of 56 patients with chronic PFPS was randomised into two groups. One group received arthroscopy to the knee joint, including specific surgical procedures to address identified pathological findings. This was followed by an eight-week exercise plan undertaken at home. The second group acted as a control and undertook the home exercise plan alone. Patellofemoral pain and function was measured at nine months following randomisation using the Kuala score as the primary outcome measure. The secondary outcome measures were a visual analogue scale used to assess symptoms arising from activity and estimated direct healthcare costs.

Each group involved in the study showed marked improvements during the

follow-up. There was no difference in mean improvement when examining the Kuala scores or visual analogue scores for each group. The authors concluded that the addition of arthroscopy to the home exercise programme afforded no additional benefit in outcome to the patients in the trial.

Kettunen JA, Harilainen A, Sandelin J *et al.* Knee arthroscopy and exercise versus exercise only for chronic patellofemoral pain syndrome: a randomised controlled trial. *BMC Medicine*. 2007;5:38.



Thyroid stimulating hormone (TSH) and the bone loss cycle

New work has been presented in the *Proceedings of the National Academy of Sciences*, examining the effects of TSH on bone loss. Early work had indicated that increased levels of thyroid hormone produced bone loss in hyperthyroidism; more recent studies have suggested that the low levels of TSH that accompany high thyroid hormones may have the same effect.

The study authors investigated bone loss in rats, where their ovaries had been removed, to reproduce the type of osteoporotic symptoms present with increasing age and menopause in humans. Injections of recombinant TSH (rhTSH) were

administered and produced the effect of increasing bone strength and reduced bone loss when provided even as much as two weeks apart.

The author suggests that the activation of osteoclasts is prevented by the TSH. Further work is required to look at safety and efficacy in humans, but there is the potential for this compound to be used to prevent certain types of osteoporosis.

Sun L, Vukicevic S, Baliram R *et al.* Intermittent recombinant TSH injections prevent ovariectomy-induced bone loss. *Proceedings of the National Academy of Sciences of the United States of America*. Published online: 10 March 2008.

Better evaluation for diagnostic tests

Two recent reports have been issued to draw attention to the growth in laboratory testing to predict the onset of illness in the future. The Human Genome Project has been the stimulus for the development of such tests, but unfortunately most tests have no independent evaluation mechanism to ensure that the investigation holds some benefit for patients.

PHG Foundation, the Cambridge-based policy research organisation, has joined forces with the Royal College of Pathologists to call for greater priority to be given to the evaluation of diagnostic tests in terms of their clinical effectiveness and usefulness to patients. The charity Sense about Science has also produced a document providing guidance for patients concerning the use of direct-to-public health tests that are increasingly being promoted. Visit www.senseaboutscience.org.uk for further information and to download reports. For a copy of *The Evaluation of Diagnostic Laboratory Tests and Complex Biomarkers*, see www.phgfoundation.org.

Technology

A new mobile phone has been developed to help individuals monitor their fitness. The phone monitors heart rate, keeps track of distance run and calculates calories burned.

Arts & Science at the Wellcome Collection

A stunning display of scientific images (formerly known as the Biomedical Image Awards) is currently on display at the Wellcome Collection at Euston Road, London until the end of summer 2008.

For further information, visit: www.wellcome.ac.uk/en/wia/index.html.

Do NSAIDs help reduce the risk of breast cancer?

The study authors examined available epidemiological data concerning the relation between non-steroidal anti-inflammatories (NSAIDs) and the risk of breast cancer, together with interventional studies in established disease. The study was undertaken since it is known that NSAIDs inhibit cyclooxygenase (COX) and reduce synthesis of prostaglandin.

Different types of studies were examined and both case-control and cohort studies indicated a moderate reduction in the risk of breast cancer in women taking NSAIDs, particularly aspirin. The mechanism for this reduction is not clear, but it has been proposed that there may be a reduction in oestrogen receptor positive tumours in aspirin users. It has not been possible to estimate the dose-response effect for duration of use.

Levels of serum nitric oxide (NO) and maspin were found to be increased in breast cancer patients using aspirin; maspin and nitric oxide have been found to inhibit growth of breast cancer cells in vitro.

Examination of all identified epidemiological data suggested that the risk of breast cancer may be reduced by 20%. The feasibility of such an intervention in an at-risk population has not been identified and the type, dose and duration of NSAID usage are still undetermined. But the study suggests a role for the use of NSAIDs in the care of breast cancer patients when used in combination with other therapies.

Agarwal I, Fentiman IS. NSAIDs and breast cancer: a possible prevention and treatment strategy. *International Journal of Clinical Practice*. 2008;62(3):444-449.

The battle for ideas: a discussion

Dr Roderic MacDonald, NCOR representative for the London College of Osteopathic Medicine

The creation of the National Council for Osteopathic Research indicated the UK osteopathic profession is getting serious about science. Science is not a dispassionate search for truth: it is a battle of competing ideas. And, research is the process of supporting that warfare with evidence. Evidence (data) is the ammunition. Some ammunition, like a thrown spear on the ground, can be picked up and used against those who made it, just as some data can be found to fit in with several different theories. However, research often seeks evidence that, more like a guided weapon, is designed to home in on and justify, or test, a specific hypothesis: such data may not be very useful to those with a different idea to investigate e.g. serial MRIs looking for a structural cause of back pain may shed very little light on any impaired function.

What does this mean for osteopathy?

This means that if the osteopath profession want to develop the science of what we do, we cannot rely on the work being done by people who do not share our concepts; their efforts will always be towards testing what seems plausible to them and/or what will serve the interests of those providing the resources. To those who see research as merely testing the outcomes of treatment, the underlying concepts may seem irrelevant, and any battle of ideas with those outside the profession may seem like unnecessary missionary zeal. The battle of ideas is important partly because healthcare may claim to be evidence-based, but it is much more dependent on theory than many would want to admit, and it is those theories that are at present winners in the scientific battle, helping determine what happens, particularly in official guidelines.

An example of how this affects every practising osteopath is in the management of acute back pain. This treatment is often shared with a patient's general practitioner, who is being strongly encouraged to base their management on the Royal College of General Practitioners' guidelines. Are these reliably based on evidence as they claim or are the theoretical allegiances of their authors more influential? Do the concepts and experiences of osteopaths have anything to offer our sister profession?

The background to considering this matter is in osteopathic training. Osteopaths diagnose a

patient's problem both through the case history and through what touch reveals about the tissues involved. Throughout osteopathic undergraduate education, students develop the ability to recognise the tissue changes considered to be due to somatic dysfunction, a concept of fluctuating neurophysiological abnormality that is as real to most osteopaths as a pimple on the nose is to the rest of humanity.

That a patient's reported experience and the changes palpated should wax and wane in parallel is the expectation of the experienced practitioner – so direct is this linkage that the recognition of a disparity between the severities of these two aspects acts often as an alert to the fact that the situation may be complicated by an underlying pathology or psychosocial factor.



What do other healthcare professionals without our concepts or tactile skills consider is happening when patients come to them with back pain of no obvious pathological cause?

Usually they don't know. Even when they have allotted diagnostic labels to some patients, such as torn muscles, sprained ligaments, osteo-arthritic facet joints, and internal disc derangements (for which there is next to no evidence), most are honest enough to admit to being unable to make a diagnosis in the many remaining cases.

Active in the face of pain

Once the lack of a theory on which to base rational treatment was openly recognised in the early eighties, there was a need to fill this conceptual vacuum, but any osteopathic ideas were quite beyond the orthodox pale at that time. So when the concept was proposed that psychosocial factors largely determine the persistence of back pain beyond the acute episode, there being no rival theory in the field, that model became accepted with haste. This also reflected the government's desperate search for answers to their ballooning bill for back pain disability. To accord with natural history data, a rational application of this model required the cascade of fearful cognition, anxiety, activity avoidance, depression, functional

deterioration, unemployment, isolation and loss of confidence to be initiated early in the course of an episode. Rational management was therefore to involve a positive message of maintaining activity in the face of pain from the outset; rest must not be thought of as treatment if this regime was to succeed.

To an osteopath, used often to palpating increasing signs of dysfunction in patients unable or unwilling to unload the pain-generating structures, the practice of encouraging further pain confrontation would seem quite unreasonable and part of management would usually be the appropriate use of temporary activity reduction to initiate recovery. A rational basis for this attitude seemed to be offered in the elucidation by modern neurophysiology of positive feedback effects, by which the wind-up of spinal cord sensitivity through ongoing pain input steadily increases the resultant reflex muscle spasm and further pain generation of the dysfunctioning structures.

Somatic dysfunction vs abnormal illness

In the face of the impasse between professionals who diagnose and treat on the basis of somatic dysfunction, and those who diagnose and treat on the basis of abnormal illness or behaviour, evidence from clinical trials should be the key justification. It is in the selection and treatment of this evidence by the committees tasked with developing guidelines that we see the unconscious effect of theoretical allegiances and pre-conceptions. Evidence carefully testing the effects of rest during episodes of acute back pain is discarded and trials of lesser design and execution are included and over-interpreted. Without a strong theoretical pre-conception it would be difficult to see how the committees involved could have reached their conclusions.

It must be acknowledged that rest has been over-prescribed in the past, though not in the main, it must be said, by osteopaths. Of course, like many effective treatments that can be costly and have side-effects, it should be prescribed within rational parameters, which are clearly negotiated with patients. However, to discourage an individual patient from using an effective remedy for them is a serious error especially if the main justification is that this discouragement can be shown to have a beneficial total population effect; we treat patients as individuals.

What are the lessons to be learned from this situation?

Firstly, to realise that none of us can view evidence totally objectively: we all have a predisposition to see each observation from a prior conceptual viewpoint from which an alternative interpretation may not be apparent. When that viewpoint derives from a long education and experience, it may not be easy for others to share it. Consequently, while evidence-based healthcare is an aspiration we should all adopt, it should be qualified with the realisation of our propensity, almost inevitable tendency, to want our treatments to accord with our deeply held convictions. If a group has concepts that it believes are valuable and worth promoting, it must enter the battle of ideas and not expect any other group to provide the expertise or resources to produce the quite specific evidence that may be required. If it's worthwhile, it's worth fighting for.

The references and background to my critique of the Royal College of General Practitioner's handling of evidence is viewable on the Cochrane Library website's (Comments Section: review of Bed Rest for Low Back Pain) or, for a full critique, email Dr Roderic MacDonald: rodmacdonald@blueyonder.co.uk.



Urgent appeal for 'humanitarian osteopaths'

Nav Matharu BSc (Hons) Ost, Birmingham

Whilst media coverage of the humanitarian crisis in Kenya has faded, the unrest remains. Tribal clashes triggered by disputed Government elections continue. Reports have likened the situation to Rwanda, and the country once famed for its exotic safaris and amazing sunsets is now not only unsafe for travellers, but also for those who live there.



The Kenyan Red Cross report that more than 500,000 people have so far been displaced. Many young children have either witnessed family members being tortured and murdered, or have been separated from their parents.

To assist these families affected by the conflict and help deliver aid packs, Divinity Foundation – a not-for-profit humanitarian organisation – is currently mobilising a humanitarian visit to Kenya. As part of this project, we would also like to assist the Kenyan Red Cross and the UN programme with the huge task of facilitating the treatment of thousands of women and children who have suffered shock and trauma. We are therefore inviting 'humanitarian osteopaths' who are willing to fly out to Kenya to volunteer their skills, working alongside healthcare teams in Nairobi.



At this particular time, we are seeking osteopaths specialising in the cranial technique who will be able to treat children suffering from shock, physical and emotional trauma. Volunteers will be asked to join the team in Nairobi, Kenya for a minimum of seven days. The first group of practitioners will hopefully be mobilised in June 2008 – the more volunteers, the longer we can stay and lend a helping hand.

Due to the volatility of the situation, volunteers will need to be both physically and mentally strong. Security will be provided by Divinity Foundation, but you will be required to fund your trip.

Thanks in advance for your support and assistance.

For further information about the project or to make a donation to the fundraising appeal, contact Nav Matharu via email: navmatharu@divinityfoundation.com or visit: www.divinityfoundation.com.

Clinical imaging guidance launched

Marcus Dye, Professional Standards Manager

Guidelines for radiographers relating to clinical imaging requests from non-medically qualified professionals have been re-issued.

Initially distributed to radiology departments nationwide at the end of last year, the guidance, which outlines best practice recommendations, has since been streamlined to ensure the message to all health professionals involved in clinical imaging referrals is clear and consistent. The revised version of *Clinical imaging requests from non-medically qualified professionals* is currently being circulated to all radiology departments in the UK.

For the osteopathic profession, this guidance offers a tool for negotiating access to local clinical imaging services. Many osteopaths have experienced difficulties in the past when requesting clinical imaging tests. And obtaining results from radiology departments – whether NHS or private – is often an unnecessarily lengthy procedure. These experiences are by no means restricted to the osteopathic profession.

Recent and ongoing changes to the way healthcare is delivered in the UK have resulted in a greater cross-section of the healthcare community becoming involved in diagnostic triage. Consequently, a lack of understanding of other health professionals' training and competency in this field seemed to lead to the current inconsistencies in the clinical imaging referral process.

This issue recently received further attention following the introduction of the Ionising Radiation (Medical Exposure) Regulations, which put a requirement on all healthcare authorities/radiology departments to ensure that staff and referrers are adequately trained to administer and/or refer patients for tests involving ionising radiation, i.e. X-rays.

To address some of these advances – and resulting difficulties – the GOsC

contributed to the development of these guidelines in the hope of achieving greater clarity and consistency in the process, and improved patient outcomes – safe, effective care and reduced waiting times.

These guidelines help to illustrate that, as primary contact practitioners, osteopaths are equipped with the knowledge and skills to make an informed clinical evaluation of a patient and to justify further diagnostic investigation. Requesting clinical imaging tests is within the osteopathic scope of practice – osteopaths receive sufficient training in this area at an undergraduate level, enabling them to make informed decisions about the need to refer patients for clinical imaging tests and giving them the skills to interpret results. Some osteopaths also go on to undertake postgraduate training in this field. It is, however, the professional responsibility of all osteopaths to ensure that their knowledge and skills remain up-to-date.

The development of this guidance was a joint project, led by the Royal College of Nursing, and also involved the Chartered Society of Physiotherapists, the General Chiropractic Council, NHS Alliance, Health Protection Agency and the Society and College of Radiographers.

The GOsC will shortly be sending a copy of the guidance document to all osteopaths. It is also available to download on the GOsC public website and the o zone. For further information about the guidelines, contact the Professional Standards Department on ext 240.



'For the osteopathic profession, this guidance offers a tool for negotiating access to local clinical imaging services.'

Healthcare Commission calls for no unnecessary radiation

The independent watchdog, the Healthcare Commission, is calling on NHS and independent sector hospitals to ensure patients are not exposed to unnecessary doses of radiation.

In the first report of its kind, the Commission analyses over 300 incidents reported during November 2006 and December 2007 under the Ionising Radiation (Medical Exposure) Regulations (2000). A third of the errors occurred when X-rays and other diagnostic examinations were carried out on the wrong patient. Over 300 people were given an unnecessary dose of radiation.

Whilst exposure to radiation through X-rays, CT scans and other procedures is a vital part of healthcare provision and can save lives, it does have the potential to harm. The Healthcare Commission states that NHS Trusts and independent providers must ensure the use of X-rays and other radiation is justified, doses are kept as low as possible and incidents are reported where appropriate.

Regional networking

Representatives of the Regional Communications Network will meet with GOsC Council Members and Executive staff, at OH on Monday, 9 June, to contribute/consider some particularly important developments facing the osteopathic profession over the coming year. Current Government reforms to healthcare regulation are set to bring about a new GOsC Council in 2009 and this meeting with review proposed criteria for appointment of new members.

Healthcare regulators are also charged by Government with the development of a scheme of revalidation appropriate to their registrants. A GOsC Revalidation Working Group is working on preliminary proposals to be shared with Regional Representatives and representatives of the BOA and Osteopathic Educational Institutions for their input on 9 June.

As always, Regional Representatives will be asked to share these discussions with regional colleagues via local osteopathic societies and interest group meetings, and feed back to the GOsC the views of colleagues in their area.

Have your say

Should you have a burning issue that you would like discussed within this forum, contact your local representative as soon as possible. Contact details for the Regional Communications Network are available on the o zone – www.osteopathy.org.uk – or from the Communications Department on ext 242 or 222.

Reporting regional news

Changing *The Osteopath's* production schedule to bi-monthly means these pages are not always the most effective way of alerting you to Regional Osteopathic Society meetings. In fact, many of you are already relying on the o zone for updates of this nature.



Be sure to check the o zone for the most up-to-date information – www.osteopathy.org.uk.

Birmingham Osteopathic Network and Education Society (BONES)

Nav Matharu BSc (Hons) Ost, Birmingham

Forming BONES

Birmingham-based osteopaths Jay Patel, Gary Perry, Nav Matharu and Justine Knowles have recently established the Birmingham Osteopathic Network and Education Society (BONES).

The society's core aim is to provide a platform for osteopaths in the West Midlands to network, build professional relationships, and share ideas and learning. One of its key functions is to provide CPD events, keeping local osteopaths up-to-date with current research and best practice guidelines.

Osteopaths interested in attending local CPD and social events, or eager to assist with organising these events, should register their interest with BONES: birminghamosteopaths@yahoo.com.

What do you want to learn?

We also need input from local osteopaths about topics of interest, so that we can tailor CPD according to demand, making it both informative and enjoyable.

Visit our website – <http://birminghamosteopaths.webs.com> – to keep abreast of forthcoming meetings. Our first planned CPD event will be held on Thursday 15 May 2008.

Further details about the programme will shortly be available on our website and on the o zone.

Northern Counties Society of Osteopaths

Neil Chestock, retired osteopath, Cheshire

Osteopathy: head to toe

NCSO's next meeting will be a first-aid refresher course facilitated by Advanced Safety Training Services Ltd. (AST). Time: 10am–4pm. Venue: Tickled Trout Hotel, Preston (Junction 31, M6). Cost: £80 (members), £100 (non-members) – includes buffet lunch.

As place are limited, contact Neil Chestock (Secretary NCSO) via email: neilchestock@yahoo.co.uk or tel: 0161 980 6228 to reserve a place.

NCSO Annual Convention 2008

This year's NCSO Annual Convention, 'Osteopathy: from head to toe' will be held on Saturday 14 to Sunday 15 June at the Rendezvous Hotel, Skipton. As usual, there will a full day and a half of lectures, a trade show, plus the ever-popular Convention Dinner.

Programme highlights

- > 'Head and neck: an anatomy review': osteopath Nick Salway
- > 'International whiplash and safety testing': Matthew Avery, Research Manager, Thatcham Insurance
- > 'Sinus Drainage Techniques: how, why and what we can do about glue ear in adults and children': osteopath Hilary Percival
- > 'Rally Driving Osteopath': osteopath David Sykes (our very own rally champion will give us his insight into fast driving)
- > 'Advances In Hip and Knee Surgery': Jon Conroy FRCS (Tr+Orth) MSc, consultant orthopaedic surgeon, Harrogate District Hospital
- > 'Osteopathic Philosophy': osteopath Walter McKone

For further information about the programme, or to book a place, contact Kathryn Elliott, 3 Park Lane, Knaresborough, Yorkshire HD5 0DQ. Tel: 01423 863967 Email: kaloelliott@aol.com

London Osteopathic Society

Tony Longaretti DO, London

Forthcoming meetings

Tuesday 20 May,
7pm–8.30pm

With MRI scans now more affordable and widely available, consultant radiologist Dr Steve Johnson will discuss 'Interpreting MRI scans of the low back and knees'.

Dr Tamar Pincus, reader in psychology at Royal Holloway, University of London, will then explore 'Clinicians' attitudes and how they affect outcome in back pain.' Current research on how mood and behaviour affect the perception of pain has led Dr Pincus to frame the enmeshment model of pain, whereby threat to the self could underlie patients' experiences. In this discussion, she will outline how our attitudes, words and actions can have a profound effect on patient outcomes.

Wednesday

4 June,
8.30pm–9.30pm

Professor Jagdeep Nanchahal, professor of hand, plastic and reconstructive surgery, Imperial College; Kennedy Institute of Rheumatology, Charing Cross Hospital, will give a presentation on 'Clinical assessment and surgical treatment of the hand in

rheumatoid arthritis (RA).' Professor Nanchahal will discuss and illustrate surgical indications, procedures and outcomes in RA, with particular reference to the hand.

In addition, Professor Peter C Taylor, professor in experimental rheumatology, Kennedy Institute of Rheumatology, will look at 'Modern management of rheumatoid arthritis'. Another specialist in this field, Professor Taylor will bring us up-to-date on dealing with the various manifestations of RA using physical and pharmaceutical strategies.

Venue: Lecture Theatre 201, Skempton Building, Imperial College London
Cost: £15 members (£30 non-members)
Registration: from 6.15pm
Refreshments: 8pm–8.30pm

Booking is not required, so simply enter the dates in your diary and join us on the night. South Kensington is the nearest tube station – see the LOS website for a detailed map.

Another meeting is also planned for Thursday 25 September 2008.

See our new website – www.londonosteopathicsociety.org.uk – for further details about these events and the society.

Sheffield Osteopathic Association

Sue Pawsey BSc MSc DO, Sheffield

2008 meeting schedule

Although no definite theme emerged at our last meeting for this year's meetings, general discussion indicated that updates on neurology and seronegative arthropathies would be welcome. It was also agreed that we need to update our emergency resuscitation certificates. We hope also to persuade osteopath Tim Oxbrow to stop off on one of his trips north.

Dates

3 June
22 July
16 September
28 October
9 December

Meetings will be held at 45 Slayleigh Lane, Sheffield S10 3RG and start at 7.30pm. Contact Sue Pawsey either by telephone: 0114 230 201 or email: susanpawsey@dsl.pipex.com, to register for the meeting.

Scottish Osteopathic Society

Fiona Davison BA DO, Aberdeen

Osteopathy in harmony

The Scottish Osteopathic Society's first meeting of 2008 saw 48 delegates meet in Bridge of Allan to hear Professor Eyal Lederman speak on the subject of tissue repair.

The aim of this workshop was to provide us with a better understanding of the processes associated with acute injury and how they can aid recovery from many acute and painful musculoskeletal conditions. First explored was the background theory of the physiology involved, followed by an interactive practical which involved us learning the harmonic technique – much trickier than it appears!

The course was enjoyed by all and we look forward to

welcoming Professor Lederman back to Scotland in the future.

Forthcoming meetings

Our next meeting is provisionally scheduled for Sunday 25 May, where we hope to explore pharmacology. Further details will shortly be posted on the **o** zone.

The 2008 SOS Conference and AGM will be held on 6–7 September in Inverness – we hope to see as many of you as possible.

For further information on the society and forthcoming events, contact Fiona Davison, SOS Secretary, 26 Northfield Place, Aberdeen AB25 1SD, tel: 01224 635999 or email secretarysos@tiscali.co.uk.

South Downs Osteopathic Group

Christopher Grey DO, Petersfield

Still on Osteopathy ...

Osteopath John Lewis has spent the past 10 years buried in osteopathic literature, including three years in the osteopathy archives in Kirksville, Missouri. John has since returned to Wales to put the finishing touches to a biography of Dr Andrew Taylor Still and has kindly promised us a sneak preview of some of his insights. 'Dr Still's thoughts on osteopathy' promises to be a fascinating evening – cutting edge!

Date: Monday 9 June 2008
Time: 7.00–9.30pm
Venue: St Peter's Church Hall, St Peter's Road, Petersfield GU32 3HS
Cost: £25 (includes Kyoko's Sushi Bar)

Contact Christopher Grey on tel: 01730 233 802 to reserve a place.



1st International Osteopathic Congress in Barcelona

29–31 May 2008

To celebrate Fundació Escola d'Osteopatia de Barcelona's 10th anniversary, the school is hosting its 1st International Osteopathic Congress in Barcelona, on Thursday 29 to Saturday 31 May 2008. The congress, 'Perception and Knowledge', will comprise two full-day interactive workshops, followed by a full-day conference on the Saturday. Diverse and thought-provoking programmes will be led by more than 15 osteopaths – many of them internationally renowned.



Highlights

Workshop: 29 May 2008, 9am–6.30pm

Dr Alfonso Rodríguez MD, Professor of Human Anatomy and Embryology, Barcelona: 'Connective tissue'

Averille Morgan BAppSC (osteo) MSc, osteopath, Norfolk, UK: 'Healthy pregnancy'

Bruno Ducoux DO, osteopath, France: 'Osteopath-patient: a partnership as interface'

Workshop: 30 May 2008, 9am–5pm

Renzo Molinari DO, osteopath, London, UK: 'Unity and diversity'

Bernard Darraillans DO, lecturer in osteopathy: 'Presence, perception and level of consciousness'

Gez Lamb BSc DO, osteopath and lecturer, European School of Osteopathy, UK: 'Palpatory experiences of fields and levels'

Conference: 31 May 2008, 9am–6.30pm,

Hotel Avenida Palace, Barcelona

Adrian Barnes DO MSc, osteopath and Principal, European School of Osteopathy, UK: 'Art or science – can reflection cast a light?'

Franz Buset DO, Co-Principal, Collège Belge d'Osteopathie, Belgium: 'Biomechanics analysis of the anterior neck, thorax and digestive tract'

Christian Fossum DO, Associate Director, AT Still Research Institute; Assistant Professor, Department of Osteopathic Manipulative Medicine, Kirksville College of Osteopathic Medicine, University in Kirksville, Missouri, USA: 'Osteopathic research; past, present and the future'

The official languages of the congress will be Spanish, English and French. Simultaneous translation will be available in each of the sessions.

Further information about the congress, including programmes, venues and costs, is available at www.eobcongress.com.

Alternately, contact:

Fundació Escola d'Osteopatia de Barcelona

Phone: + 34 93480 25 15

Fax: + 34 933719404

Email: martaob@eobosteopatia.com

Allergy & Gluten Free Show

The annual Allergy & Gluten Free Show returns again to London Olympia on 13–15 June 2008. Now in its fifth year, the show is for anyone with eczema, asthma, hayfever, food allergy and food intolerance, as well as the healthcare professionals who treat them.

Again, the show will offer the chance for health professionals – both mainstream and complementary – to catch up with industry partners and colleagues, and to discover new products and services aimed at improving the quality of life for people with allergies. Exhibitors include the allergy clinics from St Thomas' and Homerton Hospitals, as well as the Royal London Homeopathic Hospital. Leading patient support groups including Asthma UK and the National Eczema Society will also be taking part.

In addition to the 100-strong team of exhibitors, the show will again feature more than 40 free seminars, 11 of which are designed specifically for health professionals. New this year are seminars covering IBS and migraine. The educational programme features a number of well-known speakers from the field including Professors Gideon Lack, Jonathan Brostoff and George Lewith.

Seminar highlights

- > **Food allergy prevention - halting the allergic march:** paediatric allergist, Professor Gideon Lack
- > **Dust mite avoidance:** Linda Gamlin, scientific writer; author, *The Allergy Bible*
- > **Elimination diets:** Specialist dietician, Sarah Lacey, St Thomas' Hospital, London
- > **Migraine:** Dr Andrew Dowson, Director of Headache Services, Kings College Hospital, London

Tickets are £6 in advance or £9 on the door.

For advance tickets and more information, contact the event organisers on tel: 0844 481 7991 or visit: www.allergyshow.co.uk.

Attendance certificates are available for CPD records.

If you require leaflets for patients or waiting rooms, please fax the organisers on 020 7751 0006 or email: info@allergyshow.co.uk.



This section is intended to provide a forum for professional debate. The views and opinions expressed here do not necessarily reflect those of the publishers.

Dear Editor

Having attended the recent *Advancing Osteopathy 2008* conference, I was struck by the gulf between the academic and practical approaches to our work.

As an average, busy osteopath with some 35 years' experience, I found some of the presented papers and presentations so couched in obscure scientific language as to be almost meaningless. We certainly need scientific development and validation of osteopathy, but I feel that the science degree approach should be balanced by a parallel arts degree in osteopathy. This would lead to a lively and informed debate about the roots and branches of our profession, and help develop a better sense of exactly what and who we are as therapists.

There is no end to the topics which could be included in an arts degree: for instance, a study of quantum field theory and its relation to healing; comparative studies of the power of placebo (as opposed to the disadvantage of it in scientific studies); development of the philosophical backbone of osteopathy; interfaces with other complementary disciplines, etc. Let us have academic recognition of the essential art and craft of osteopathy!

It seemed to me that the medical surgeons who spoke at our conference were unfettered by scientific jargon, knew exactly who they were and what they did, what their limitations were, and were comfortable within their parameters. Many of the osteopathic presentations and debates seemed, in surprising contrast, to be lacking in

passion and direction and were littered with scientific jargon and 'gobbledygook'. If this is where the science degree is leading us, we definitely need to review our path.

Ralph McCutcheon DO
Holywood, Northern Ireland

Dear Editor,

I feel compelled to write – although it has taken me three months to get around to it – which is not at all atypical of life at the moment with pre-school children to raise, a hard-working husband to care for, endless domestic duties and, on top of all that, an osteopathic career. Where should my priority lie? I'm sure most may agree that I have placed them in the correct order of importance. So then, osteopathy comes last.

I love being an osteopath, I love my work and I enjoy treating my patients. I try to vary my treatment approaches and reappraise what I have done and why. Research and revision topics chiefly arise from whatever crops up during treatment sessions. I understand the very important issues of patient protection and practitioner competence, and I do believe that some form of regulation is required.

Here's the 'but' – but I'm finding it increasingly difficult to meet my CPD targets. Living in a fairly remote area in the north means that if I wish to attend an event (to help tick off my 'learning with others' box), I have to take time off work, suffering loss of income; travel some considerable distance, usually necessitating an overnight stay; and leave my very young children. I have neither the spare time nor

finances to support much of this, but I must do it in order to continue in the job I love. My joy starts to evaporate when I force myself to squeeze in some scheduled learning and make sure I can account for it.

I need help. I need a greater variety and availability of local courses to attend. I cannot arrange this myself, as I am running on zero spare time and energy. I need suggestions before I become utterly demoralised. Are there others out there who are in a similar situation? And, how do you manage? Please respond.

(And by the way, where do I come in this list of priorities?)

Anonymous

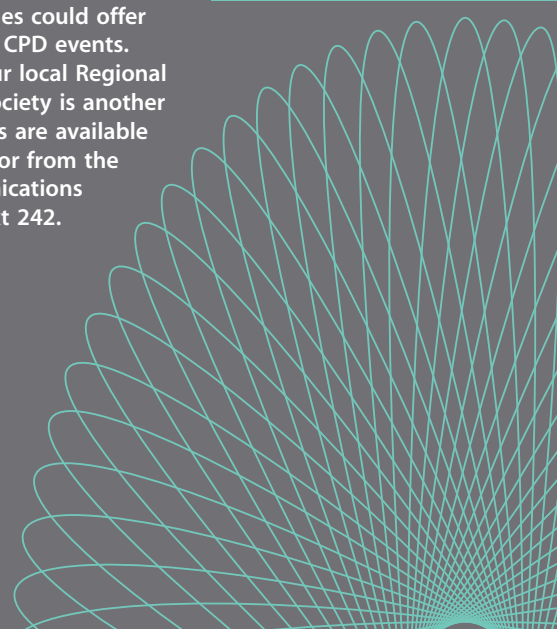
(for fear of ridicule from middle-aged men whose children have flown the nest, who have dutiful wives to accommodate their every requirement, and who have time, money and passion enough to devote to their career.)

Editor's response

It is a shame the author has not indicated more specifically the region in which she lives in order that the GOsC, BOA and fellow colleagues could offer details of local CPD events. Contacting your local Regional Osteopathic Society is another option – details are available on the o zone or from the GOsC Communications Department ext 242.

Have your say

If you would like to share your views or comments with other readers of *The Osteopath*, write to the editor at Osteopathy House, email: editor@osteopathy.org.uk or send your letter via the o zone website. Letters may be edited for length and clarity.



Courses 2008

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

For a more comprehensive list of courses, visit the CPD resources section of the **o** zone website – www.osteopathy.org.uk.

June

> 5 The place for creativity within evidence-based practice

Speaker Glenn Hunter.
Venue: Middlesex University, Archway Campus, Holborn Union Building, Highgate Hill, London N19.
tel: 020 7263 8551
email: cpd@cpdo.net

> 7-8
Craniosacral therapy – introductory weekend
Organised by the Craniosacral Therapy Educational Trust.
Venue: Skylight Centre, Unit 8, 9-15 Elthorne Road, London N19.
tel: 07000 785778
email: info@cranio.co.uk
www.cranio.co.uk

> 12
How to treat: Tennis elbow
Speaker Prof Eyal Lederman.
Venue: Middlesex University, Archway Campus, Holborn Union Building, Highgate Hill, London N19.
tel: 020 7263 8551
email: cpd@cpdo.net

> 14-15
Neuromuscular 're-abilitation' (parts I & II)
Speaker Prof Eyal Lederman.
Venue: Middlesex University, Archway Campus, Holborn Union Building, Highgate Hill, London N19.
tel: 020 7263 8551
email: cpd@cpdo.net

> 14-15
Sports rehabilitation – managing the injured athlete
Speaker Chris Boynes. Venue: Middlesex University, Archway Campus, Holborn Union Building, Highgate Hill, London N19.
tel: 020 7263 8551
email: cpd@cpdo.net

> 14-15
Musculoskeletal ultrasound studies
Venue: Centre for Ultrasound Studies, 13-15 Parkwood Road, Bournemouth BH5 2DF.
tel: 01202 436 324
email: genright@aecc.ac.uk

> 19-22
Advanced craniosacral workshop
Speaker Dr Michael Shea.
Organised by the Craniosacral Therapy Educational Trust.
Venue: Skylight Centre, Unit 8, 9 – 15 Elthorne Road, London N19.
tel: 07000 785 778
email: info@cranio.co.uk
www.cranio.co.uk

> 21-22
Osteopathic care of small animals
Speaker Tony Nevin.
Venue: University, Archway Campus, Holborn Union Building, Highgate Hill, London N19.
tel: 020 7263 8551
email: cpd@cpdo.net

> 21-22
Neuropathic arm pain: diagnosis to treatment
Speaker Philip Moulart.
Venue: Middlesex University, Archway Campus, Holborn Union Building, Highgate Hill, London N19.
tel: 020 7263 8551
email: cpd@cpdo.net

> 26
Structural osteopathy: is it still valid?
Speaker Prof Eyal Lederman.
Venue: Middlesex University, Archway Campus, Holborn Union Building, Highgate Hill, London N19.
tel: 020 7263 8551
email: cpd@cpdo.net

> 25
Cranio-sacral therapy – introductory day
Speaker Thomas Attlee.
Organised by the College of Cranio-Sacral Therapy. London.
tel: 020 7483 0120
email: info@ccst.co.uk

> 28
First-Aid: Appointed person course
Speaker Alex Brazkiewicz.
Organised by the Craniosacral Therapy Educational Trust.
Venue: Skylight Centre, Unit 8, 9 – 15 Elthorne Road, London N19. tel: 07000 785 778
email: info@cranio.co.uk
www.cranio.co.uk

> 28-29
What colour is your pain?
Speaker Prof Mooli Ladad.
Venue: Middlesex University, Archway Campus, Holborn Union Building, Highgate Hill, London N19.
tel: 020 7263 8551
email: cpd@cpdo.net

July

> 12-17
Cranio-sacral therapy – introductory course – first stage of full professional training
Speaker Thomas Attlee.
Organised by the College of Cranio-Sacral Therapy, London.
tel: 020 7483 0120
email: info@ccst.co.uk

September

> 5-7
Dynamic morphology
Speaker Dr Jaap van der Wal.
Organised by the Craniosacral Therapy Educational Trust.
Venue: Skylight Centre, Unit 8, 9-15 Elthorne Road, London N19.
tel: 07000 785778
email: info@cranio.co.uk
www.cranio.co.uk

> 6
Osteopathic care of small animals revisited
Speaker Tony Nevin.
Venue: Middlesex University, Archway Campus, Holborn Union Building, Highgate Hill, London N19.
tel: 020 7263 8551
email: cpd@cpdo.net

> 25

Process centred osteopathy – a new clinical model

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

> 27

Psychosocial factors in pain conditions: How to construct a consultation

Speaker Dr Jeremy Chase.
Venue: Middlesex University, Archway Campus, Holborn Union Building, Highgate Hill, London N19.
tel: 020 7263 8551
email: cpd@cpdo.net

> 27–28

IOT III: SI joints, pelvis and LEX

Speaker Prof Laurie Hartman.
Venue: Middlesex University, Archway Campus, Holborn Union Building, Highgate Hill, London N19.
tel: 020 7263 8551
email: cpd@cpdo.net

> 27–28

Harmonic technique (parts I & II)

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

October

> 2–5

Flowering of consciousness

Speaker Dr Michael Shea.
Organised by the Craniosacral Therapy Educational Trust.
Venue: Skylight Centre, Unit 8, 9–15 Elthorne Road, London N19.
tel: 07000 785778
email: info@cranio.co.uk
www.cranio.co.uk

> 9–11

New visceral course: Vascular visceral manipulation

Speaker Jean-Pierre Barral.
Venue: Middlesex University, Archway Campus, Holborn Union Building, Highgate Hill, London N19.
tel: 020 7263 8551
email: cpd@cpdo.net

> 10–12

Pregnancy care

Speaker Averille Morgan.
Venue: Middlesex University, Archway Campus, Holborn Union Building, Highgate Hill, London N19.
tel: 020 7263 8551
email: cpd@cpdo.net

> 16

How to treat: Whiplash injuries

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

> 19

Foundation course in prescription orthoses for osteopaths

Speakers Edward Buckwald and Chris Eke. Organised by Pegasus Orthoses. Venue: Stanborough Centre, Watford, Herts WD25 9JL.
tel: 01923 260452
email: info@pegasusorthoses.co.uk

> 25

Managing headaches

Speaker Dr Hazel O'Dowd.
Venue: Middlesex University, Archway Campus, Holborn Union Building, Highgate Hill, London N19.
tel: 020 7263 8551
email: cpd@cpdo.net

> 25–26

Integrated manual therapy and naturopathic approaches to the pelvis

Speaker Leon Chaitow.
Venue: Middlesex University, Archway Campus, Holborn Union Building, Highgate Hill, London N19.
tel: 020 7263 8551
email: cpd@cpdo.net

> 29–30

Energy medicine, frequency medicine and resonance

Speaker James Oschman.
Organised by the Craniosacral Therapy Educational Trust.
Venue: Skylight Centre, Unit 8, 9–15 Elthorne Road, London N19.
tel: 07000 785778
email: info@cranio.co.uk
www.cranio.co.uk

> 30

How to treat: Impingement syndrome of the shoulder

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

> 8–9

IOT I: Cervical spine, CD and UEX (repeat)

Speaker Prof Laurie Hartman.
Venue: Middlesex University, Archway Campus, Holborn Union Building, Highgate Hill, London N19.
tel: 020 7263 8551
email: cpd@cpdo.net

> 22

Yoga as therapeutic exercise

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

> 22

Introduction to sports taping: Principles and practice

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

> 27

How to treat: Plantar fasciitis

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

December

November

> 7

Ventricles – enfolding space

Speaker Erwin van de Velde.
Organised by the Craniosacral Therapy Educational Trust.
Venue: Skylight Centre, Unit 8, 9–15 Elthorne Road, London N19.
tel: 07000 785778
email: info@cranio.co.uk
www.cranio.co.uk

> 1–2

Harmonic technique (parts I & II)

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

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RECRUITMENT

Osteopath required in Yeovil ASAP for two days/week; Monday and one other. Experience needed in treating all ages, newborn to elderly and competence in using various treatment techniques, particularly IVM. Email CV to Elizabeth Clayton: eclayton926@btinternet.com.

Rapidly expanding multi-disciplinary clinic situated in a beautiful historic building in the heart of Thame, require another osteopath to initially work two half days. Supportive practitioner environment. Room rent basis, pay as you use. Please contact the Practice Manager, 01844 213344.

Osteopath wanted 'Down Under' to join a friendly team in a progressive osteopathic practice on Sydney's northern Beaches. Situated 45-minutes north of Sydney's CBD, this practice affords a magnificent lifestyle with all the amenities of a city. The practice is growing quickly and we require a practitioner with a minimum two years' experience, a strong work ethic and proactive attitude who relishes the opportunity to take a leading role in the practice's development. We will be happy to sponsor the right individual for permanent residency. If not registered in Australia, you will be required to sit New South Wales board exams. Email brief resume, detailing brief work history, professional and personal interests to: Tony Tranfield DO: ttranfield@osteopathiccentre.com.au.

Experienced osteo/cranial osteopath required for holistic health centre for children in Hursley, Hampshire. Must have experience of working with children. Busy and expanding practice. Flexible hours. Email CV with covering letter to sarah.sowton@naturopathiccentre.co.uk.

Assistant/partner required for busy osteopathic practice in Cyprus. Imminent move to large private hospital. Must be able to work with, and refer to, the twenty GPs, surgeons and consultants here. The work will involve assisting the principal osteopath, and flexible working hours are possible. Would suit someone who has previously had experience of practising in a Middle Eastern/Asian environment, with a mix of ex-pats and, in this case, local Cypriots. The applicant should be able to commit for a year, as work permits are still required, and be willing to learn medical Greek. The ideal applicant would be able to cope with our high summer humidity levels, be enthusiastic, outgoing and handle their own admin, as well as adaptable to a culture very different from that of the UK, but outdoor sports are freely available. A full driving licence is essential, and accommodation is expensive. Please send your CV to deborahbayley2003@yahoo.co.uk or tel: 00357-9932 2169 and leave a message after the initial Greek answerphone.

Carolyn McGregor BSc(Ost) BA Div (Hons) RSHom, seeks full-time post with equally passionate, dynamic and enthusiastic osteopath or team. Yorkshire/Cumbria/Scotland, elsewhere considered. 15 years F/T general family osteopathic practice focusing cranial obstetric/paediatric and post neuro-surgical work. Experience in sports injuries and treating athletes. Practising homoeopath. Contact M: 07766 330489 E: carolynosteopath@hotmail.com.

Associate structural osteopath required for busy, friendly, multidisciplinary practice in Cork, Ireland. Must have one year's experience, be highly motivated and enthusiastic, and willing to work in a team environment. All interested applicants should contact Rosemary on (00 353) 21 4344445. See www.theosteopath.ie for info on clinic.

Ipswich. Opportunity for osteopath to work in a multi-disciplinary team for sports injury, rehabilitation and overall musculo-skeletal care. New specialist unit will operate within established town centre complementary therapy centre. Whole, or half-day sessions available. Contact Wellspring Centre on tel: 01473 222290.

Enthusiastic, reliable locum required from late June for at least six months. Wednesdays and Fridays in busy north east London practice. No late evenings! Experience and dry needling skills an advantage for mainly structural practice. Email CV to kate@bodybalance.co.uk.

Exciting new start up company seeking osteopath as part of our medical board, sales and training. Part-time or full-time. Please contact America Fernandez on +44 (0) 7970 828 758.

Associate wanted to join an expanding multidisciplinary practice in and around Basingstoke in busy North Hampshire. Visit www.physicalbalance.com and email your CV and questions to info@physicalbalance.com.

Cranial osteopath wanted. An exciting opportunity exists to start a patient base, within our friendly multidisciplinary clinic, in NW London. Back pain in pregnancy is an area of interest within the clinic; therefore a cranial osteopath will complement the clinic, treating primarily babies and children. Please forward CV to lyananepia@hotmail.co.uk. Website: www.gettreated.com.

Locum/associate required to cover maternity leave in an established, friendly, predominantly structural clinic in Torquay. 2 days/week from May to October. Probable associate place thereafter for 2 days/week. Can be combined with the locum post in Dartmouth. Please contact Gemma Colbert on tel: 07740 427 256.

As an associate wishing to develop their career and work with other osteopaths and take over a busy 2 day list, please phone Brentwood Osteopathic Centre on 01277 212 900 for details.

COMMERCIAL

I am looking to buy a busy osteopathic practice. I wish to relocate and would be interested to purchase an established practice in either the UK, Ireland or Europe. Genuine enquiries only to: Box No. 105, *The Osteopath*, Wealden Advertiser Ltd, Cowden Close, Horns Road, Hawkhurst, Kent TN18 4QT.

Goodwill for sale: Nottinghamshire. Thriving practice established 30 years, with scope for expansion. Located in centre of busy market town, on main road with excellent transport links. Half an hour from beautiful Peak District. Ground floor accommodation, on-site parking, two fully-equipped consulting rooms. Excellent working relationships with GPs and local orthopaedic surgeons. For further details and practice brochure, contact Lisa - email: steve-rach@kingdom2004.wanadoo.co.uk or phone 07845 873 074.

Freehold premises for sale: with established practice including equipment and furnishings. Essex coastal town, near station, car park and town centre. Low overheads, rental from other therapists, four treatment rooms, reception, waiting area and two toilets. Tel: 01255 222 238 or email: lindsey.gooch@homecall.co.uk.

Clinic opportunity in Essex. Osteo share in brand new, modern homeopathy/acupuncture/osteopathy clinic for sale, due to owner's work overload. Great location with free parking near Billericay and fully accessible. Extremely low overheads. Brilliant potential for new practitioner. Please ring Silke on tel: 07904 616 776.

One or two treatment rooms to let in podiatry clinic on busy main arterial road at Blackhill, near city centre. Easy parking and very low rent. Hourly, half days, full days, weekly and full-time rentals available. Contact D. Bayley on tel: 07979 846 356 or email: deborahbayley2003@yahoo.co.uk.

Unique established osteopathic practice for sale due to retirement. Established for over twenty years, this practice is in a town centre in the Lancashire area. Practice base of over 6500 patients and regular income of £140k a year. Accounts make essential viewing. The property is also home to three tenants; two in fully-furnished flats above and one practice room hired out to a state-registered chiropodist. Tenants bring a joint income of £1000 a month. There are three treatment rooms identically equipped with adjustable plinths and interferential/ultrasound machines. Three offices, staff room/kitchen, utility room with washing machine, staff toilet, public toilet, large reception and private parking for five cars. Freehold. £480,000. No time wasters. Great opportunity for a serious practitioner/entrepreneur who wants to walk in and start work with nothing to purchase or set up. Telephone in complete confidence: 0845 094 3678.

Dordogne, France practice for sale. Busy, friendly, supportive, group practice working with doctors, podiatrist and paramedical team with excellent local reputation. Morning reception with low overheads. Regular referrals from eight doctors and two dentists. Picturesque setting. Contact Deborah Doole on tel: 0033 5359 3626 (Home), 0033 6223 59154 (Mobile).

Well-established clinic for sale: Royal Tunbridge Wells, currently used for osteopathic and sports injury disciplines with part commercial use. Could be converted to Dental or other clinic. Large very well-appointed Victorian treatment room, small modern reception/waiting area with toilet. Excellent location, off-road parking and good sized living accommodation with new kitchen and bathroom. Please phone for full details and price. Tel: 07715 557 076.

Wanted: osteopathic or multidisciplinary clinic in the Essex or Dartford area. Two osteopaths looking for an opportunity to buy an established clinic, so if you are considering selling your practice, please contact 07762 544 235.

Goodwill for sale in Wicklow, Ireland, 30 miles South of Dublin. Structural and cranial. Excellent location on Main St. Treatment room, waiting room and toilet. Single list, low overheads. Electric plinth and furniture included. Owner relocating July. Contact +353 86 8412938 or c_heney@hotmail.com.

For sale: Practice in picturesque town of Shanklin (Isle of Wight) established for ten years. Goodwill £20K ono. Located on corner of High Street, close to beach and hill walking/mountain biking areas. Ideal for relaxed lifestyle, or even semi retirement. Sale due to relocation. Or Associate wanted to cover patient list. Contact 01983 863600.

Room to let in Harley Street, W1. Large, quiet room available 8.30-6.00pm, with electric couch, wireless broadband access, CPD meetings in multidisciplinary medical practice. Would suit established osteopath with own list. Phone Dr Greene on 07815 763 570.

For sale: osteopathic manipulative medicine practice, with medical condominium and website. Located in New York City. Available to help with transition. For more information please call: 001-917-331-4594 or email: ecaron@mail.une.edu.

I am looking to buy a busy osteopathic practice within 70 miles radius of Nottingham. Genuine enquiries only to: Box No. 107, *The Osteopath*, Wealden Advertiser Ltd, Cowden Close, Horns Road, Hawkhurst, Kent TN18 4QT.

Great opportunity for osteopath(s) in Sheffield, near the beautiful Peak District. Established list and goodwill for sale, including all plinths, desks, chairs, etc, in newly renovated building comprising four treatment rooms, disabled facilities and lovely, sunny waiting room. Building on a rolling lease in highly visible main road location. Huge potential for development. For further information and any photos, please contact John Stutton at john@bannerdaleosteopaths.co.uk.

Therapist consulting rooms available to rent at well-established physiotherapy and sports medicine clinic, Marylebone. Osteopathic services welcomed to block book rooms. Reputable clinic has expanded to offer fully equipped pilates and gyrotonic services, gym training and additional treatment rooms. Reception 8am-8pm. Come and work with experienced and passionate healthcare professionals. Opportunity for referrals. Call 0845 370 8222 (Option 1) or email: healthconsultants@hotmail.com.

Great new start. Goodwill and lease for sale of busy cranial/structural osteopathic practice, established 13 years, within flourishing dental healthcare centre in beautiful Scottish Highlands. Excellent prospects for expansion. Clinic comprises 2 fully-equipped and fitted treatment rooms. Reception and appointment services provided. Diverse, inspiring and interesting clientele/community. Outdoor pursuits such as surfing, fishing and hill walking on the doorstep. Principal relocating to Australia. For further details, contact Iain MacRae on tel: 07973 283 080 or email: iaim@fsmail.net.

COURSES

Chiropractic techniques: Graduate Diploma in Short Lever Adjusting Technique. Methods taught: Diversified chiropractic, the main method of chiropractic, Thompson Drop table technique, and Activator methods mechanical adjustments. The course is seven full days and is situated in a luxury spa hotel in Thailand. 17-23 May 2008. Sale price £800 includes accommodation, breakfast, transfers, seminar fee and course material. For details, see www.manualtherapyinternational.com. Contact the course director, Bob on email: robphysio-osteopath@hotmail.co.uk or tel: +66 83 324 8843.

Cognitive Behavioural Therapy skills training. Two-day course for healthcare professionals to apply a CB approach to physical health problems. Taught by a co-trained physiotherapist and CB therapist. Sheffield: May 9th/10th, August 8th/9th, London: July 4th/5th. Please see www.cbtskillstraining.co.uk for more details and dates. Course cost from £180.

GENERAL

Car registration for sale on retention certificate. 'OST 606' (osteopath clickety-click). Call for further details: 0121 454 2335.

3-section electric treatment table with face hole, £350 ono. Also, aluminium portable treatment table with carrying case, and various other clinic items and furniture for sale. Buyer to collect. Birmingham area. Call 07739 477123.

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Part 3 Embodiment and exitlines
Venue: Co. Waterford Ireland October 17, 18, 19, 2008

Part 4 Power, spirit and intentions
Venue: Co. Waterford Ireland March 7, 8, 9, 2009

Part 5 Time, Timing, Timelines
Co. Waterford Ireland September 19, 20, 21, 2008
Venue: Ireland

Contact Helen 00353 02 38800

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27-28 Sept	IOT III: SI joints, pelvis and LEX	Prof. Laurie Hartman	£215.00	£150.00
27-28 Sept & 1-2 Nov	Harmonic technique (part I & II)	Prof. Eyal Lederman	£425.00	£250.00
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10-12 Oct	Pregnancy care	Averille Morgan	£335.00	£200.00
25-26 Oct	Integrated manual therapy and naturopathic approaches to pelvis	Leon Chaitow	£235.00	£150.00
25 Oct	Managing headaches	Dr. Hazel O'Dowd	£115.00	Pay in 5's
8-9 Nov	IOT I: Cervical spine, CD and UEX (repeat)	Prof. Laurie Hartman	£215.00	£150.00
22 Nov	Yoga as therapeutic exercise	Luise Woerle	£115.00	Pay in 5's
22 Nov	Introduction to sports taping: principles and practice	Tom Hewetson	£115.00	Pay in 5's

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30 Oct	How to treat: Impingement syndrome of the shoulder	Prof. Eyal Lederman	£40.00	Pay in 5's
27 Nov	How to treat: Plantar fasciitis	Prof. Eyal Lederman	£40.00	Pay in 5's

Evening lectures (19.00-21.00)**For more info see www.cpdo.net**

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26 June	Structural osteopathy: is it still valid?	Prof. Eyal Lederman	£20.00	Pay in 5's
25 Sept	Process centred osteopathy – a new clinical model	Prof. Eyal Lederman	£20.00	Pay in 5's

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Details of the venue, starting times and a copy of the programme will be sent to you with confirmation of your booking.

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The course organisers reserve the right to change the course contents and substitute leaders without advance notice.

The organisers hold no responsibility for the contents and clinical application of the material taught on the courses

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Spinal Imaging

26th & 27th June 2008

The Royal National Orthopaedic Hospital NHS Trust has one of the largest Spinal Surgical Units in the UK. Consequently, the Radiology Department has extensive experience in the imaging of the spine.

This 2-day course is a comprehensive review of radiology as applied to the diagnosis and management of spinal disorders.

The patho-anatomic basis for spinal intervention will also be reviewed.

It is relevant for Radiologists, Spinal Surgeons, Pain Physicians, Rheumatologists, Osteopaths and Chiropractors. The attendees will benefit from lecture-panel combination and the informal setting of the course is designed for maximum educational benefit.

DAY ONE	DAY TWO
<ul style="list-style-type: none"> Cervical Spondylosis Lumbar Disc Disease Spinal Stenosis and Erect MRI the Lumbar Spine Spondylolysis and Spondylolisthesis Failed Back Syndrome Scoliosis Spondyloarthropathy Spinal Infection Spinal Cord Pathologies Spinal Trauma Spinal Tumours 	<ul style="list-style-type: none"> Spinal Infections Nerve Root Blocks Discography Vertebroplasty Spinal Biopsy RF Treatment of Spinal Osteoid Osteoma Kyphoplasty Spinal Vascular Intervention Surgeon's Perspective on Spine Intervention Panel Discussion
<p><i>This is a provisional programme and is subject to modification</i></p>	

Registration Fee:

Any 1 day - £200

Both days - £350

Fee is inclusive of all course material, lunch and refreshments.

Convenor:

Dr T Muthukumar, MD, FRCR

Consultant Radiologist, RNOH NHS Trust

Venue:

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Fee: £1,149 CPD: 40hrs 8-12 September 2008

Venue: Columbia Hotel, 95-99 Lancaster Gate, London, W2 3NS

Module 2/3 Non-residential Pathway Course - SCTF approved

The course presents Sutherland's 'Five Phenomena'; reviews centering and monitoring and explores palpatory differences among structures at different levels of function. Principles of diagnosis and treatment and their application to the whole body; including the fascia, face and intra-osseous problems are all taken into consideration. We encourage self-assessment and feedback and, each day, time is set aside for individual student discussion with the tutor.

FOUNDATION

Course Director: Alison Brown DO MBOC

CPD: 24hrs evening 15-19 May 2008 3-5 October 2008

Venue: Hawkwood College, Painswick Old Road, Stroud, Gloucestershire, GL6 7QW

Module 1 Residential Pathway Course

THE LEGACY OF ROLLIN E. BECKER, DO

Course Director: Rachel Brooks MD

Fee: £250 CPD: 16hrs 25-26 October 2008

Venue: British School of Osteopathy, 275 Borough Hill Street, London, SE1 1JE

Non-residential Post Pathway Course

Eligibility: Module 2 and Module 3 or equivalent

See website for more details www.sutherlandcranialcollege.co.uk

THE SPARK IN THE MOTOR

Course Director: Kok Weng Lim DO MBOC

Fee: £799 CPD: 24hrs 5-7 November 2008

Venue: Columbia Hotel, 95-99 Lancaster Gate, London, W2 3NS

Module 7 Non-residential Pathway Course

Eligibility: Module 2 and Module 3 or equivalent

During the course we will explore in depth two of the five phenomena of the involuntary mechanism: the fluctuant cerebrospinal fluid and the motile brain and spinal cord. Modern research findings in these fields will be introduced and incorporated with the original osteopathic approach of Dr Sutherland

Relevant embryology, neuro-anatomy, neural development and neuro-endocrine-immune connections will be explored. There will be more time and space than on a basic course to explore thoroughly and to experience in stillness the concept of potency, the 'fluid within the fluid' whose spark animates our embryogenesis and our physiology.



Continuing Professional Development

www.bso.ac.uk/cpd



Psychological Management of People in Pain

This exciting course has been designed for practitioners who work with people in pain. The course consists of four days of contact time which can be taken separately or as a whole.

The introduction day is a conceptual and practical introduction to the psychology of pain and cognitive/behavioural principles. The focus is on helping practitioners to identify depression, anxiety and fear in the context of pain, and appropriate management of patients displaying such symptoms. After the introduction day, attendees may choose to do all or any of the further sessions programmed throughout the year.

The second session focuses on cognitive behavioural approaches to managing chronic pain, with the third session building further on the understanding of pain management with a focus on mindfulness and acceptance in the context of treatment. The final session will focus on the clinician, and the way that beliefs of the clinician impact on treatment.

The course is led by Professor Tamar Pincus and Steven Vogel DO, in association with Dr Lance McCracken from the University of Bath and Dr Johannes Van Der Merwe from the Real Health Institute.

Intro Day: Sun 1st June
Day 2: Sun 15th Jun
Day 3: Sun 13th July
Day 4: Sun 3rd Aug
Cost: £150 per day
£500 course
Deadline: 18th May 08

Ergonomics and Osteopathy

The Ergonomics course is a one day programme, linking the related disciplines of ergonomics and osteopathy. It covers an introduction to ergonomics, as well as applications relevant to osteopaths. Attendees leave with the ability to evaluate and train patients in relation to computer workstations and manual handling back in their practices. The aim is to provide knowledge and skills to give support to patients with injuries or problems related to their workplace environment. Course leader David Arnett is a freelance Ergonomics Consultant with over 15 years' experience and an honours degree in Ergonomics, as well as a practicing Osteopath.

Dates: Sat 14th June 08 or Sat 13th Sept 08
Cost: £95
Deadline: 30th May 08 (for June course)



Osteopathy and Obstetrics

This course has been designed by Dr Stephen Sandier from the British School of Osteopathy, to provide osteopaths interested in this popular area of practice to gain specialist skills. Held in the brand new BSO clinic, the course runs over 2½ days (Friday to Sunday). The first half-day session (Friday) introduces participants to the changes in maternal physiology during pregnancy, and the potential to use these changes to better effect in osteopathic practice. The ventilatory and cardiovascular systems are examined, and practical sessions will be used to develop techniques and treatment for problems associated with the ribs, diaphragm and mediastinum, and associated muscles of respiration.

The second session builds on this foundation with an exploration of weight gain and the link between the kidneys, the preteral fascia and the psoas muscles, and the diaphragm and T/L junction. The practical sessions will focus on changes to the uterus and breast tissues. The day will also examine changes to the musculoskeletal system, postural changes and practical techniques to support the pelvis and lumbar spine. The final session will be held in the BSO's treatment rooms, with patients from the Expectant Mother's Clinic available for treatment from the participants, providing an opportunity for you to put new skills into practice.

Dates: Fri 11th, Sat 12th, Sun 13th July 08
Cost: £250
Deadline: 20th Jun 08

Osteopathy in the Cranial Field (preliminary course)

The preliminary five-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 four participants to one tutor, giving intensive, participant-centred tuition in practical skills. The course leader is Nick Woodhead, who manages the postgraduate programme in Osteopathy in the Cranial Field at the BSO.

Dates: Sun 31st Aug, Mon 1st Sept, Tues 2nd Sept, Thurs 11th Sept and Fri 12th Sept 08
Cost: £975 (£100 deposit to hold the place)
Deadline: 1st Aug 08



BSO Summer School

Our Summer School is a series of mini-CPD and networking evenings, and the draft programme includes topics from rehabilitation to working with the NHS, interpreting MRI scans to ergonomics. The topics have been selected as 'tasters' to interest areas, allowing osteopaths, teachers and students to come together in an informal setting to exchange ideas. There will also be opportunities to view the new BSO clinic.

Each session will involve 2 hours of CPD, running each evening. The first hour will be split into three 20-minute talks from experts in their field. The second hour will be less formal, developing topics further by discussions over a glass of wine or soft drink.

Dates: Monday 30th June, Tuesday 1st July, Wednesday 2nd July, Thursday 3rd July
Cost: £15 per evening, or £50 for the week
Deadline: 13th June 08

All courses are held at the British School of Osteopathy in central London.

To apply or find out more please contact Gayda Arnold on 020 7089 5315 or g.arnold@bso.ac.uk

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- Common conditions associated with biomechanical dysfunction
- Heat moulding and fitting orthoses

Level 2 – Introductory fore foot mechanics

- Fore foot mechanics and 1st metatarsal dysfunction/evaluation
- The relationship between biomechanical deformities and common injuries
- Hands on assessment of the fore foot, fore foot neutral
- Measurement techniques ■ Wedging and trouble shoeing

Level 3 – 'Clinical Biomechanical Toolkit'

Introducing a system for approaching lateral biomechanics

- Clinical biomechanics toolkit ■ Foot function in perspective
- Identification and management of abnormal foot function
- Gross foot dysfunction ■ Discussion of different treatment options

Workshops cost £100 inc. vat per delegate per course. Or, book Levels 1 and 2 together and pay just £180 inc. vat. Includes lunch and refreshments, lecture notes and certificate of completion.

To reserve your place just return the Registration Form.

For more information - call Julia Tanner on 01280 843878 or visit www.canonbury.com/workshops

*All Workshops are recognised by both the College of Podiatrists and the Institute of Podiatrists and the Institute of Podiatrists. Attendance at each level is worth 6 CPD points.

REGISTRATION FORM

I'd like to join the following workshop(s):

Please tick appropriate box(es)

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<input type="checkbox"/> 16 Mar	<input type="checkbox"/> 1 Jun	<input type="checkbox"/>	Leeds
<input type="checkbox"/> 3 Jun	<input type="checkbox"/> 21 Sept	<input type="checkbox"/>	Edinburgh
<input type="checkbox"/> 22 Jun	<input type="checkbox"/> 28 Sept	<input type="checkbox"/>	Salisbury
<input type="checkbox"/> 7 Sept	<input type="checkbox"/> 16 Nov	<input type="checkbox"/>	Kentford
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MSc in Osteopathy in the Cranial Field

This new three-year course, validated by the University of Bedfordshire, builds on the BSO's 30-year international reputation for postgraduate study of osteopathy in the cranial field.

Designed for practitioners, this course provides extensive practice-based learning supported by regional tutors. Ideal for osteopaths returning to study, it offers:

- * Expert teaching from BSO faculty members plus external lecturers specialising in fields including dental and paediatric osteopathy.
- * Excellent tutor:student ratios (4:1) for the majority of taught practical work.
- * Ongoing research support from a team specialist in working with students with varied levels of experience in conducting their own research.
- * The chance to practice in the new BSO clinic, the largest of its kind in Europe.
- * Access to the BSO library, also the largest and best in Europe, plus ongoing IT access and support.

Course leader: Nick Woodhead (who has teaching experience with SCTF in the USA and Australia)
The anticipated start for the course is September 2008

Professional Doctorate

Our professional doctorate, which is being planned for late 2008 (subject to validation), is a programme of advanced study and research. It is designed to meet the needs of osteopaths with at least 5 years experience, working in clinical or educational practice, who want to investigate contemporary osteopathy across the world. It will be assessed through coursework and the submission of a portfolio of publishable research. The programme will:

- * Use and contribute to evidence relevant to osteopathic practice
- * Develop critical thinking and analytical skills
- * Emphasise personal development planning for continuing professional development

The Professional Doctorate is open to qualified and experienced osteopaths, with an active interest in practice based research and professional practice.

Course leader: Dr Stephen Tyerman

To register your interest for further information on these courses when available, please contact Gayda Arnold at the British School of Osteopathy on 020 7089 5315 or g.arnold@bso.ac.uk

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Contact the GOSC Communications Department on 020 7357 6655 ext 242 or email info@osteopathy.org.uk for further information.