

The Techniques of Andrew Taylor Still, MD, DO: The Importance of Knowing Them

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EDITORIAL

Background

It is widely understood that Andrew Taylor Still, MD, DO, founder of the osteopathic profession, did not write technique manuals to illustrate the manipulative techniques that he developed. Instead, he insisted that his students use clinical reasoning to help them diagnose the patient's somatic dysfunctions and develop manipulative techniques that address each patient's needs individually. Because of this lack of writing, Dr Still's technique approach was essentially lost for most of the 20th century. The few written accounts of specific treatments performed by Dr Still were fragmented and insufficient for recreating valid descriptions of his techniques.

Nevertheless, there have been practitioners who have made notable contributions to the preservation and dissemination of knowledge of Dr Still's techniques. For example, Stanley Schiowitz, DO, FAAO, had first-hand knowledge about Dr Still's techniques from the personal experience of being treated by other DOs who had been taught these techniques. From around 1955, Dr Schiowitz embarked on a study of these methods that eventually led to him developing a technique approach that he named *facilitated positional release*.¹

Around 1970, Jerry L. Dickey, DO, FAAO, began teaching about the principles and techniques developed by Dr Still. Dr Dickey has spent more than 40 years studying the history of osteopathic medicine, and, in particular, doing research into the nature of Dr Still's techniques. His study of osteopathic history includes reading published and unpublished works by Still and by some of Still's notable students, family members, and conversations with DOs who were taught directly by Still. Dr Dickey uses the term *Still exaggeration technique* to describe his insight into Still's work. This includes approaches that use the concepts of exaggeration, articulatory methods, an approach called *challenging the barrier*, and indirect approaches.²

In 1989, Richard L. Van Buskirk, DO, PhD, FAAO, found some brief descriptions of Still's techniques in a text by Charles Hazard, DO,³ who was a student of Still and a faculty member at the American School of Osteopathy. Using this information, Van Bus-

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kirk began to explore the techniques in clinical practice. Through much trial and error, he developed a specific method that proved to be useful for nearly every articulation of the body. He named it the *Still technique* to credit Dr Still with the development of the technique.⁴

Finally, Karen M. Steele, DO, FAAO, is another practitioner who was able to learn from DOs who had excellent knowledge of Dr Still's techniques. She has been able to disseminate her knowledge and experience through her own teaching of these concepts.¹

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In effect, there are now excellent resources available for learning the principles and techniques of Dr Still. Perhaps the time has come when all DOs and DO students should have a working knowledge of Dr Still's methods. But why should we learn these methods? What exactly is their importance to us?

Why Still's Techniques Matter

I suggest the following reasons for learning Dr Still's techniques:

To have a working knowledge of Dr. Still's distinctive techniques

When we choose to enter a noble profession, such as osteopathic medicine, it seems only logical that we should want to know the history of the profession and learn as much as possible about its founder. Knowing our roots, why and how the osteopathic profession came into being and developed, can only make us stronger in our commitment to practicing distinctive osteopathic care.

As a basis for the evolution of other OMT modalities

It could be argued that Still's technique approach paved the way for developing some modern-day osteopathic manipulative treatment (OMT) modalities. For example, Still's techniques have some of the characteristics of counterstrain technique, as well as having some of

the characteristics of muscle energy; high-velocity, low-amplitude (HVLA); and facilitated positional release (FPR) techniques.⁵

To ensure that Still's original approaches are not lost to the osteopathic profession

Now that at least some information regarding Dr Still's techniques has been rediscovered, and now that resources have been developed to disseminate this information, teaching it to more DOs and the use of it in practice will contribute to preserving this knowledge. In addition, this should lead to more research, refinement and development of these principles and methods.

For the benefit of patients

Most importantly, learning Still's techniques provides yet another distinctive osteopathic method of treatment that can be of immense benefit to patients. The more knowledge and skill we have, the more patient problems we can improve or alleviate.

Conclusion

As DOs, we should all try to emulate the success of our founder. This process can be greatly enhanced by learning as much as we can about the history of the osteopathic profession, the life and times of Dr Still, and especially the techniques he employed that made him so successful.

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