



View From the Pyramids: Kale for Days

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EDITORIAL

I planted a garden this year, and from its humble beginnings I have enough kale to provide sustenance for a small village. Little did I know that kale, once cut back, continues to grow and comes back even stronger with the second growth. It is a reassurance that I will have kale salad well into December. But why am I talking about kale? I happen to think about the profession and realize there have been many “forced cuttings” in our rich and long heritage, and like kale, with each one our profession has come out stronger for it. We have rallied, made the tough changes, culled and cut out that which was not purposeful to our thriving, and prevailed in the long run.

The first of these challenges was the Flexner report in 1910, which was the first official document to recognize osteopathic education—and to point out its flaws. Due to the report, state licensing boards began to enforce strict requirements of medical schools, increasing the standards and the quality of osteopathic education.¹ While some might think of that as a crisis in itself, what occurred because of it only strengthened the system of osteopathic education.

Another “forced cutting” was the when the California Osteopathic Association tried to merge with the California Medical Association in 1961. This, in essence, eradicated osteopathic education and its heritage in California. The term “Little MD” arose, as for \$65 dollars a DO could “buy” an MD degree with just the submission of an application, if they agreed to stop practicing osteopathic manipulation. In this period all osteopathic medical schools were forced to close, and from 1961 to 1964, no DOs were licensed in the state of California. A handful of DOs refused to turn in their licenses and fought the ruling in court. It was overturned in 1974 as unconstitutional and the rebirth of osteopathy in the west was the result, including new schools to teach young osteopathic physicians.² Without these stalwart physicians who held the torch of osteopathy, none of the west coast colleges of osteopathic medicine would be in existence today.

We have another challenge—or dare I say *opportunity*—to find our grit and pull ourselves up to meet the need. The Accreditation Council for Graduate Medical Education’s single pathway to residency has now eliminated many osteopathic residencies that were weak, small, or lacking in the needed requirements. Our students are going head-to-head with MD students for all the remaining

residency slots as of the 2020 residency match. While some might see this as a “David and Goliath” kind of story, I see it as a time for our students to shine—as long as they have the right tools to do so. Even David had a sling shot, right?

Osteopathic education has traditionally chosen to focus on patient care, producing physicians who are humanistic, and on filling the needs of the underserved regions of our country with “[Doctors that DO](#).” In general, academic activity and scholarly research have not been expected of our graduates, unless they were interested in such topics. This must change in order for our graduates to have the best chances possible in the single ACGME match. In order for this to occur, WE as physicians must value it, support it and lead by example. We need to invest in our future and provide the best peer reviewed resources for our students and a platform for them to learn scholarly activity.

At the AAOJ, we are striving to fill that need, and we need your help and support to do so. This arena might be termed the final frontier that has yet to be addressed in our medical education system, and we are behind in this race to the finish. If you are unfamiliar with academic and scholarly activity, educate yourself through the [Scholar series](#). Volunteer to be a peer reviewer for a journal, or join a committee such as the AAO’s Publications Committee or Louisa Burns Osteopathic Research Committee. We need to prepare ourselves and in essence “cut back” so we may thrive.

Every organization needs to take a hard look at itself every once in a while and make the decision to cut what is not working so it may grow towards a promising future, and just like my kale, we will thrive.

In Gratitude,

Janice Blumer, DO, FAAO

References

1. Jones JM, Peterson BE. History of the Osteopathic Profession. In: Seffinger M, executive ed. *Foundations of Osteopathic Medicine*. 4th ed. Philadelphia, PA: Wolters Kluwer; 2018:27.
2. Jones JM, Peterson BE. History of the Osteopathic Profession. In: Seffinger M, executive ed. *Foundations of Osteopathic Medicine*. 4th ed. Philadelphia, PA: Wolters Kluwer; 2018:33. ■