



# Osteopathic Holism for the Specialty Minded

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## EDITORIAL

I was exploring the idea of the osteopathic specialist and thinking how to best help students understand that they do not need to give up their osteopathic roots when they choose to go into a specialty residency, when I came across the works of Phillip Greenman, DO, FAAO and his essay on this topic half a century ago.

In his essay written for the *Journal of the American Osteopathic Association* entitled “The Osteopathic Concept in its Second Century: Is it Still Germaine to Specialty Practice?” Dr. Greenman states:

“Osteopathic medical students frequently state that they are unable to ascertain how osteopathic concepts and principles taught to them in the classroom are implemented in specialty patient care, primarily in the acute hospital environment. Many osteopathic specialists state that they do not utilize palpatory diagnosis and manipulative treatment in the specialties because ‘it is not indicated’. I would submit to you that the profession cannot allow either of these attitudes to continue. I would further submit that it would take little educational effort to change both opinions if there was a commitment by the specialist within the profession to make such effort.”<sup>1</sup>

This quote by Dr. Greenman is even more relevant today than it was when it was written 54 years ago. Today’s osteopathic student is faced with triple the debt burden compared to 1976, and much of the decision to go into primary or specialty is driven by this debt burden. We still see the same inertia to practice what I call “full spectrum osteopathic medicine” in many of the specialty and hospital environments that we did in 1976. In addition, we add the complexity of today’s practices, managed care, EMR and RVU’s and the challenge of keeping burnout at bay. Practicing “full spectrum osteopathy” seems to be a Sisyphean task for graduating osteopathic students.

Dr. Greenman’s solution to the inertia was a return to what he calls “osteopathic holism”, which is “*an osteopathic physician... dealing with the total patient, at the period in time in the environment in which the patient is found.*”<sup>2</sup> He proffered a revised “5 Model Approach” to assure even as a specialist that we don’t forget to focus on the whole patient by considering neurologic, metabolic/endocrine, musculoskeletal, respiratory/circulatory, and behavioral factors. In Greenman’s mind, an osteopathic cardiologist who practices “osteopathic holism” will attend to the *patient’s* needs, not just the immediate needs of the heart itself.

As osteopathic educators, ALL of us have a duty to the profession and to our patients to model the “osteopathic holism” that Greenman describes, now more than ever. We have the duty to the profession to practice “full spectrum osteopathic medicine”, regardless of specialty or primary care focus. In this light, courage is needed to break down an antiquated model to prepare for new, different or innovative integration, while at the same time, not losing site of our heritage and the wisdom of our predecessors.

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Medicine today, even in the osteopathic profession, has become more siloed than ever. When we practice within a silo, no matter what aspect of medicine we practice, we become immune to the benefits osteopathic holism can bring to our practices. Diversity in thinking brings added benefits to any business that is willing to move past their imaginary bunkers of belief, and the same is true for our profession. It is time to reimagine what it means to be an osteopathic specialist, reject the “all or nothing” attitude towards OMT, and allow our profession to thrive by bringing back the value-added benefit our patients deserve. Thank you to Dr. Greenman for lighting our way and reminding us of our value.

In Gratitude,

Janice Blumer, DO, FAAO

## References

1. Greenman PE. “The Osteopathic Concept in its Second Century: Is it Still Germaine to Specialty Practice?” *J Am Osteopath Assoc.* 1976 Feb;75(6):589-95.
2. King Hollis, ed. *Greenman’s Works: The Collected Works of Philip Greenman, D.O., FAAO.* Indianapolis, IN: American Academy of Osteopathy; 2009:71. ■