

BOOK REVIEW

Theodore Jordan, DO

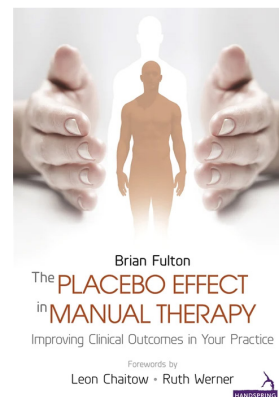
Book Review: The Placebo Effect in Manual Therapy

You are a successful osteopathic physician and after having received your osteopathic evaluation and treatment, patients routinely leave your office feeling much better physically, mentally and emotionally. Clearly these patients' improvements are solely due to your medical knowledge and your hard-earned manual skills as an osteopath. Right? That's probably not the full story, according to author Brian Fulton. In yet another excellent publication by Handspring Publishing, he argues that there is much more going on within a therapeutic encounter, and clinical results are largely dependent upon the placebo effect: probably much more than we as clinicians are comfortable admitting. Unlike other books about the placebo effect in medicine, this book focuses on aspects of the placebo effect as it relates to manual medicine and hands-on therapies. This book is so well written and researched that it should appeal to and benefit all osteopathic and allopathic physicians, clinicians, physical therapists, chiropractors, massage therapists, and anyone concerned about optimizing their clinical outcomes.

What is the placebo effect? It isn't as simple as taking an inert sugar pill. In fact, there are a multitude of studies that describe many odd aspects of placebos:

- Taking two placebo tablets has more effect than taking one tablet
- Placebo injections work better than pills
- Injections that sting are better placebos than less painful injections
- Sham surgeries are the strongest placebos
- A placebo administered by a doctor is more effective than one administered by a clerk
- Brand name placebos work better than generic ones
- After taking a placebo for a long period of time, many patients have withdrawal symptoms once they discontinue the placebo

Understanding the definition, history and basic science behind the placebo and nocebo effect comprises the first section of this book. Of special interest to the osteopathically and medically trained is the discussion of the physiology of the biological pathways and specifically the role



The Placebo Effect in Manual Therapy: Improving Clinical Outcomes in Your Practice. Brian Fulton, Handspring Publishing, Edinburgh, 2015.
www.handspringpublishing.com

Reviewer's Note:

It should be remembered that A.T. Still was known to use persuasive methods to influence his patients toward health. In *The Lengthening Shadow of Dr. Andrew Taylor Still*, Dr. Hildreth, who was a close friend and colleague of Dr. Still's, wrote, "There can be no question but that [Dr. Still] sold osteopathy to his patients. It was a rare privilege to work with him...and hear him, in his own practical, simple, old-fashioned way, explain...to the patients, what he was doing and why results were achieved." In another chapter, Dr. Hildreth writes, "Oh, what a faculty [Dr. Still] had for selling osteopathy to those who came to him for treatment! He would examine a patient, locate what he felt to be the cause of the condition and then explain to him what nerve or nerves were disturbed. He would tell his patient that by normalizing the blood and nerve supply, the condition he found or the pain the patient was suffering, would be alleviated." Dr. Still apparently not only explained anatomy and physiology to his patients, but he made use of charts and books to help them understand his approach. Among his many talents, Andrew Taylor Still reportedly had the gift of establishing rapport with patients and a superb knack for creating a knowledgeable expectation in his patients that helped them achieve their clinical improvement.

of the autonomic nervous system in the placebo effect. Placebos also can affect immune function, cardiovascular dynamics, pain perception, gastrointestinal function, and other systems. This section also discusses scientific criticism of the placebo effect, characteristics of those who respond to placebos, and a chapter on ethics and informed consent, which is surprisingly challenging: how does one obtain informed consent to clinically use a placebo? Fortunately, the author gives suggestions on how to word an appropriate consent form.

The second and largest portion section is entitled described as “more treatment focused” and discusses a myriad of psychological and emotional related topics that influence patients in a clinical setting. For example, chapter topics include conditioning, expectancy, motivation, trust, listening, the feeling of control, narrative, time spent by the practitioner, the clinician’s persona, use of humor, and helping the patient to maximize their own healing response. The author not only references and discusses scientific studies on these issues, but also adds his suggestions to optimally utilize these aspects of one’s practice to achieve maximum clinical outcome in a most helpful and insightful manner. This is one of the most exhaustive and practically applicable discussions of the psychological considerations of every clinical practice. This section is so full of insights and reminders of how everything in a practice has an effect on patients that it should be read by every practitioner running a practice and should also be required reading by residents and those in clinical training. Moreover, the irony can’t be ignored that many of these important parts of maximizing the clinical outcomes of a practice – patient rapport, time spent with patients, trust, listening, etc. – are the very aspects of medical practice that are being destroyed by corporate and profit based medical models. This fact alone makes this book highly recommended reading.

Part three of this book comprises the smallest section and seems not essential to the overall thesis of this work. Authors that delve into more metaphysical and “energy based” approaches, such as Rupert Sheldrake, James Oschman and Bruce Lipton, are discussed. There is also

a brief non-discussion of purported quantum effects in health. These topics are much better discussed in other works, such as Oschman’s book, *Energy Medicine*.¹

Despite the impressive wide-ranging topics covered in Fulton’s book, there is one topic that is minimally discussed and could have deserved a great deal more discussion: that of touch. Human touch has a marked effect on the physiology,² even in medically-paralyzed patients.³ Our physiology is obviously highly tuned to respond to human touch. This creates a significant problem in any experimental study of the effect of any hand-on treatment or therapy. In such studies, simple touch is used as a control group, with the manual treatment comprising the experimental group. However, because the effect of simple human touch is so strong, it can statistically minimize or even negate the additional physiologic effect of the touch-based manual treatment.⁴

So, should human touch ever be considered a placebo group in experimental design? How should we even think about human touch in clinical settings? The benefit of touch is widely accepted in neonatal care,⁵ and adult care.⁶ Yet, the nature of modern medical care is trending toward decreased human interaction as computer screens replace face to face communication and bedside interaction. It is ironic that some progressive hospitals are recognizing the benefits of massage and employing hospital massage therapists, yet most historically osteopathic hospitals do not utilize any hand-on treatment of the adult patients. Despite the minimal discussion of touch in this book, the role of touch in medicine is too important to ignore, and it deserves a great deal more attention.

Overall, Brian Fulton’s *The Placebo Effect in Manual Therapy*, is a must read for any clinician. It is not always comfortable to read because it will force the reader to question the very nature of treatment, of healing, and the phenomenological experience and ultimate outcome of the patient in the clinical setting. This book prompts us to look actively and consciously at improving our practices, clinics and it guides us to create the most healing experiences for our patients.

References

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