

Osteopathic manifesto series



Editor's note: Editor Emeritus George W. Northup, DO, FAAO, died on December 12, 1996, at the age of 81. In tribute to his life-long service to the osteopathic medical profession, which included his tenure as Editor in Chief from 1961 to 1987, the JAOA is reprinting Dr Northup's Osteopathic Manifesto series, with only style changes. The original 12-part series ran in the JAOA, beginning in February 1981.

XI. Quo vadis?

"Whither are you going?" This is a question that must have an obvious answer for our profession. We are going to take advantage of our outstanding pains to further progress and grow. How fast we continue to grow and where we go from here are dependent on many things.

The spectacular growth of our educational institutions has provided us with an unparalleled opportunity for training new physicians. According to statistics, our profession is adding to its ranks each year over a thousand well-trained osteopathic physicians. As we have grown in numbers, we have become an increasingly younger profession. Commitment to and interests in the future of this profession will be determined by new leaders who will come from this younger generation of osteopathic physicians.

The future goals of the osteopathic medical profession undoubtedly will be set in an environment different from anything the profession has ever known. Yet, the history of the profession, how far it has come, and what obstacles it has encountered along the way will influence its destiny. At present, osteopathic physicians have legal parity with allopathic physicians, and they are accepted on all levels of healthcare. Through its leadership, the American Osteopathic Association has become more involved than ever before in state and national decisions relative to healthcare management, thereby demonstrating to the nation that medical care must never be totally directed by one medical organization.

Because the world of medicine is a rapidly changing one, our ability to adapt to change will in a small measure determine our future. But some things never change. As the osteopathic medical profession strives to maintain its distinctiveness, it would be naive for it to believe that it will not continue to receive opposition toward its maintenance as a separate and distinct unit in medical care. This opposition is not in the form of outright contention, but rather it is an effort to erase all areas of distinction so that osteopathic medicine will lose its separate identity. Efforts to abolish independent boards of osteopathic examiners, to neutralize the DO degree, and to lose us in the mainstream of medical care will continue.

Complacency is another major enemy. We cannot be blinded by our growth and success, which was achieved despite what many thought were insurmountable odds. In the annals of medical history, we are unique not only because we have survived but because we are philosophically distinct. Each one of us, in one way or another, has a part in this great experiment in modern medicine.

Osteopathic physicians of the future must continue to pursue the goal of medical reformation. We must be no more satisfied with the status quo of medicine today than Still was in his time. We must dare to dream and dare to do as our forefathers. We must be imaginative and aggressive. We must maintain and expand our osteopathic hospitals. We must correct the shortage of osteopathic physicians that exists in many states. We must continue to maintain leadership in a medical education system that is devoted to producing qualified practitioners of family medicine. We must increase research for the evaluation of what, in many cases, constitutes a collection of clinical observation. We must not stop now, for our greatest era of development is before us.

This is only one course for osteopathic medicine. And that course must be predicated upon the continuing desire to improve the healthcare of the people, to emphasize the need for preventive medicine, and to be worthy of the ever-increasing support of our profession and its institutions from patients and friends at all levels of society.

New challenges face us and new problems will arise. But our problems, as they have in the past, must be incentives for an optimistic future if only we will it. We must build upon our heritage, but we must not be immobilized by the successes of our past.

The future is as bright as we wish to make it. •

George W. Northup, DO, FAAO