The war years and government recognition of osteopathic physicians

The issue of US Government recognition of osteopathic physicians as qualified medical officers was a contentious one for more than 60 years. As pointed out in the introduction to the Great Flu Epidemic reprints in the May 2000 issue of *JAOA*, George W. Riley, PhB, DO, asked in 1918 why the armed forces personnel had been deprived of osteopathic care that had proved so successful in treating patients with flu and pneumonia. In the first article of the current reprinted articles (originally published in June 1917), H. L. Chiles, then Editor of the *JAOA*, also asked why the armed forces were being deprived of osteopathic care. Congress had just approved compulsory registration of all 21- to 31-year-old men in preparation for joining the First World War. However, no provision had been made for allowing osteopathic physicians to serve as medical officers. Instead, only MDs and dentists were to be allowed to enter the armed forces as medical officers. In addition, many osteopathic physicians had indicated a willingness to serve and many potential draftees apparently wanted to be treated in order to be qualified for service. Chiles points out that many service-related injuries are amenable to osteopathic manipulative treatment and not responsive to surgery. Therefore, it would be in the best interests of the armed forces to have osteopathic treatment available.

From the next two articles, it is evident that the policy regarding military service by osteopathic physicians had not changed with preparations for entry into the Second World War. Osteopathic students of draft age were forced to register, but selective service boards were advised to consider deferring osteopathic physicians for service in their civilian capacity. Despite this situation, a number of osteopathic medical students volunteered for regular army service, and the numbers of entering students were dramatically reduced during the war. At the same time, osteopathic medical students were allowed to apply for army intern training—a step toward recognition. It is ironic that the deferment of osteopathic physicians from service had the result of increasing the visibility of the profession among the civilian population, thereby strengthening the profession as a whole.

In 1949, as reported in the third article, the government took another step toward full recognition of the osteopathic medical profession. Beginning in May of that year, osteopathic physicians could apply for examination to qualify to become commissioned officers in the Public Health Service. This recognition opened the path for osteopathic physicians to receive additional training and to become visible in research and other areas.

The fourth article, published in June 1949, takes us back into the war years. Francis E. LeBaron, MD, DO, reports on a most interesting study of manipulative treatment conducted in England during the war. He apparently was instructed to carry out a comparison of osteopathic manipulative treatment with "standard of care" treatment of back injuries. Under the direction of LTG John Lee, MC, USA, he treated patients with back injury who were picked by the army's orthopedic MDs while an assumed similar group received usual care. LeBaron reported an approximately 20% better disposition of patients under manipulative care. Parts of his report to LTG Lee are included in the article. In an interesting ending to the article (final paragraph), LeBaron notes that "M.D. education must include skeletal diagnosis and specific manipulative therapy for complete medical service." It is not clear to this writer whether he was responding somewhat in jest to remarks made in a letter to him by MG Paul Hawley in the paragraph just before. In any event, the armed forces apparently became aware of the utility of osteopathic care before it had the ability to allow osteopathic physicians to provide such care.

The last reprint in this section is the announcement of final approval, signed by President Dwight D. Eisenhower on July 24, 1956, for osteopathic physicians to become commissioned officers in the United States Armed Forces. This recognition of the osteopathic medical profession by the Government was crucial to the survival of the profession. It opened many doors to training and service. It also meant that the profession would not again have the opportunity afforded by the two World Wars to provide medical care in the absence of allopathic physicians, as now both would be called to serve in time of conflict. The osteopathic medical profession, however, was now sufficiently mature that government recognition was of utmost import.

The road to government recognition was long and frustrating. The results of such recognition were vital, but they presented both opportunities and potential problems. Would the osteopathic medical profession be able to maintain sufficient autonomy as its recognition increased? The next test came in the early 1960s with the California merger, which is the subject of next month's historical special reprints section.

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