

New & noteworthy

Updates on activities in the profession

The profession's emerging research center

Plans continue for the development of what may be the single most notable research development in the osteopathic medical profession in recent years: a new institution to be called the Osteopathic Research Center (ORC). A few months ago, leaders of the profession created an expert advisory committee to oversee the selection of the primary functioning unit of the ORC. This committee is chaired by J. Justin McCormick, PhD, and also includes Gunnar B.J. Andersson, MD, PhD, Tim Carey, MD, and Murray Goldstein, DO.

The committee began with the basics, reviewing the sentiments and history behind the creation of a research center for the profession. The earliest known record of such a concept is found in an endowment fund document of the A.T. Still Research Institute that was written circa 1914. The document reads, in part, "The situation calls for [a center] planned and equipped for the study and investigation of all the problems of health and disease." Regarding osteopathic medicine specifically, the document says, "...its philosophy springs from the very root of the tree of knowledge of disease. Its essential principles are basic, as they reveal the primary causes of disease, which were never recognized by the medical profession, but were literally 'kicking round under foot' until Dr Still took these rejected stones and began to build of them a true philosophy of health."

But in reviewing the philosophical and practical bases for creating the ORC, the expert advisory committee is not relying solely on documents from the early 1900s. In recent years, the profession's members—be they physicians, researchers, students, leaders, or otherwise—have discussed in meetings and through published literature the notion that research is key to documenting the effectiveness of osteopathic principles and practice in general, and osteopathic manipulative treatment in particular.

This theme received attention, for example, at the first Osteopathic Collaborative Clinical Trials Initiative Conference, which was held in Bethesda, Md, in December 1999. Thanks in part to enthusiasm generated by speakers from the National Institutes of Health and the US Agency for Health Care Policy and Research (now called the Agency for Healthcare Research and Quality), the 70 research-oriented attendees revived the goal of establishing financial and personnel support for the ORC.

Shortly thereafter, a task force took shape, with representatives from the American Osteopathic Association, the American Osteopathic Foundation, the American Association of Colleges of Osteopathic Medicine, the American Academy of Osteopathy, the American Osteopathic Healthcare Association, the Association of Osteopathic Directors and Medical Educators, and the American College of Osteopathic Family Physicians. Each of these organizations pledged its support in terms of financial aid, administrative and personnel support, facilities, and/or participation of physicians and investigators.

The expert advisory committee for the ORC was subsequently charged with creating a request for applications (RFA). The RFA was issued to the presidents and deans of all colleges of osteopathic medicine in late April 2001. The format and scientific merit of applications are to follow NIH guide-

lines and are to be received by the advisory committee no later than August 31, 2001.

Setting the stage: the ORC's role

The following is a brief synopsis of the RFA; it is not analytical and therefore is not intended to provide information or insight beyond what is found in the original document.

The research focus of the ORC will be to rigorously evaluate the efficacy of osteopathic manual medicine (OMM) for the diagnosis and treatment of disease and other dysfunctions. The center will: (1) serve as a think tank, evaluating how best to research manual medicine and devising strategies to conduct such research; (2) evaluate pilot studies on manual medicine and fund those judged to be "excellent;" and (3) provide training in research methodology to individuals who wish to develop research careers around the study of OMM. The ultimate goal is to develop the ORC so that it can successfully compete against other major research institutions for substantial NIH funding.

Approximately \$1.1 million will be available to fund a four-year award from a qualified applicant. Receipt of ORC funding is dependent on the submission of an application of high technical and scientific merit and on successful performance each year. The expectation is that successful pilot studies will become fully developed projects within the center, or that they will become supported by other research-funding mechanisms, such as grants from the NIH or funds from the AOA Bureau of Research.

While acknowledging that osteopathic medicine is distinctive for reasons beyond its use of OMM, the expert advisory committee for the ORC emphasizes that efforts fostered by the center should initially be limited to studies involving manual medicine.

Coming together: OPTIs and ORC staffing

In part to support the ORC's development of multi-institutional research programs, an effort has been made to organize a research infrastructure within the osteopathic postdoctoral training institution (OPTI) system. This began with the appointment of a research director at each of the OPTIs—a structure that mirrors the organization of research directors at colleges of osteopathic medicine. As such, this structure has about a 60% membership overlap.

Subsequent to the appointment of these research directors, the AOA issued a call for representatives to provide leadership, both for organizational stability and for promotion of clinical research activities. Philip Hultgren, PhD, research director at Lake Erie College of Osteopathic Medicine in Erie, Pa, has recently agreed to chair the OPTI Research Directors group. Likewise, Jack Brose, DO (Ohio University College of Osteopathic Medicine), has agreed to serve as co-chair of the group.

The OPTI research directors will have formal annual meetings—much like their counterparts at the colleges of osteopathic medicine—perhaps including presentations of their individual research and education activities. As osteopathic research becomes a more cohesive national effort, communication and cooperation between the major players will be essential. These "major players" include the director and support staff of the ORC, the research directors of OPTIs where research is conducted, the sponsors of the ORC, the external advisory committee that oversees the ORC's activities, and the AOA Bureau of Research.

In addition to sketching out the duties of the ORC and drafting an RFA, the expert advisory committee for the ORC also addressed issues of staffing specif-

ically for the center—in addition to the “major players” already noted. For example, the committee identified the need for key personnel with expertise in such areas as biostatistics, computer processing, data management, protocol design, survey design, questionnaire development, basic laboratory evaluations, patient record data analysis, patient registries, development of databases, clinical and behavioral epidemiology, health education, health promotion, and clinical trial methodology.

The expert advisory committee also noted that the following personnel positions are critical to the operation of the ORC and may be supported by the grant funding the center: a principal investigator (the center's director) at 0.5 full-time equivalent (FTE); an administrative manager, assistant, or secretary at 0.5 FTE; and a biostatistician or epidemiologist.

Osteopathic literature database

Osteopathic research efforts would likely benefit, of course, by drawing upon relevant work by other members of the profession, both past and present. However, access to the 100-year-old pool of osteopathic literature is currently very limited, and collections of such material are scattered and often incomplete. To remedy this problem, the AOA and the American Association of Colleges of Osteopathic Medicine joined together to sponsor a five-year, \$385,000 project to develop the world's first comprehensive index to international osteopathic literature.

Contracts were awarded to the Gibson D. Lewis Library of the University of North Texas Health Science Center at Fort Worth and the A.T. Still Memorial Library at the Kirksville College of Osteopathic Medicine to carry out this project. The Lewis Library provides overall administration, database development, technical



Project staff members using flatbed and overhead scanners to enter data into the Osteopathic Literature Database.



assistance, and quality control, and it is responsible for indexing the current (post-1950) literature. The KCOM library, due to its unique historical materials, is responsible for indexing the pre-1950 literature.

Now in its fourth year, the index consists of bibliographic citations and abstracts from all types of print and electronic sources and in many languages from around the world. The index currently contains more than 14,000 records from more than 25 journals. Currently under development is a Web search interface that will provide Internet access to this information by mid-2001.

Staff members involved in creating the database have advised

the project's sponsors of a need for an official name for the product. The AOA Bureau of Research established a competition last fall, which included a \$500 award to be given to the person who provides the winning name. More than 100 responses were received, and as of this writing, a name has been selected. However, intellectual property attorneys are working to secure a copyright on the name before it is publicly announced.

In conjunction with the index, a structured thesaurus of osteopathic terms is under development. This thesaurus will allow searching for information by using unique osteopathic terms. It is hoped that by helping to standardize the osteopathic nomenclature, this the-

saurus also will facilitate international communication and help promote unity within the osteopathic profession.

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