



A research program for the osteopathic profession, our great and only hope

Research has been a part of the osteopathic profession since before its inception. Andrew Taylor Still, MD, DO, was a researcher of the first degree. He questioned the dogma and beliefs of his time and followed ideas to see where they would lead him. He constantly espoused a skeptical and inquiring attitude. Others in his first classes followed his lead and began formal research programs at Kirksville, Missouri. The search for the basis of the osteopathic lesion was well under way by the turn of the 20th century. However, a formal research institute for the profession was at that time still some time away.

The first article reprinted this month was written by I.M. Korr, PhD, in 1947. Korr joined the profession in 1945 after an illustrious career in the Army research effort during the war years. He soon saw the value and uniqueness of the research being performed by J.S. Denslow, DO, and joined in that effort. In "A Research Program for the Osteopathic Profession," he pleads for the formation of a centralized research institute within and supported by the profession, as well as for the profession to formulate a coherent research program into the fundamental problems of function. He points out that research is not to "prove osteopathy, but to improve osteopathy." He also points out that by exploring the fundamental questions of biology and medicine, osteopathic practice will benefit greatly. Like Snyder 36 years before him (see the second article), Korr championed the research exploration of fundamental truths, not simply efficacy of treatment. Only by understanding the basics of how the human machine works and ceases to work properly will osteopathic treatment be truly understood and proven.

Korr went on to enunciate several principles that might underlie the formation of a structured research program within the profession. He points out that the osteopathic profession has a golden opportunity to use its insights to explore biological problems not even seen by conventional medical practitioners, because of the unique practice and philosophy of the profession and the insights these give. He was correct then and is still correct.

Thirty-six years earlier, a movement was afoot to form a research institute, and the second article reprinted here is a plea for such an institute. In his plea for a research institute, O.J. Snyder, DO, did not simply implore the profession for funds to support the formation of the A.T. Still Research Institute. Instead, he couched his plea in the form of an explanation of why a formal research program was needed. In his article, "Research Our Great and Only Hope," he makes several

interesting points. He asks whether the profession will remain viable as an independent and complete system of therapeutics and whether the profession is founded on verifiable and demonstrable principles and is therefore scientific. One of these two questions has been answered, at least to the present time, in the affirmative. The profession has survived and is, in fact, prospering. The answer to the second question is, I believe, still largely undetermined.

Snyder goes on to make the point that if the profession is based solely on results of practice, it is reduced to simple empiricism. It is thus reduced to the plane of medical practice of his day. He points out that to be lulled into complacency by a feeling of security in practice is folly. The philosophy of osteopathic medicine must be shown to have underpinnings in natural law and function. Thus, the practice of osteopathic medicine must be further elaborated and fortified by basic research into human function and dysfunction. These to Snyder were basic needs of the profession. The way to meet those needs was to institute a research institute. The institute was founded and had a long, but fitful, history. Louisa Burns, DO, eventually took the directorship and maintained a successful and prolific research career into the 1950s. Unfortunately, much of her work has been ignored by the profession and by the scientific community. It is a wealth of information that could usefully be mined.

It is notable that the profession is now poised to launch a centralized research institute. There has been over \$1,100,000 pledged to underwrite the effort. A set of guidelines has been put forth for the operation of the Center for Osteopathic Research. A site will be selected according to well-conceived and articulated guidelines drawn up by some of the best research minds of the profession. The Center is charged with research development that supports the practice of manipulative treatment. Many of the guidelines put forth could well have been taken from Korr's article. It is truly an exciting venture.

What will be the fate of this effort? Will the profession support the founding of the Center and then go off on another path, leaving it to fend for itself? Will the founding be seen as the end of the effort, as the task fulfilled? Or will the profession insist on the continuing support of its research efforts as a high priority, as Snyder put it as the "only hope"? A few years will tell.

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