

Title: A Review of Holistic Therapies:

Osteopathic Medicine, Acupuncture, Alexander Theory, Bowen Therapy, and Yoga

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**Osteopathic Medicine, Acupuncture, Alexander
Theory, Bowen Therapy, and Yoga**

Osteopathic Medicine -

Concept, origin, and development

Osteopathy is based on the principle that good health and harmonious interrelation of skeleton, muscles, ligaments and connective tissue are crucial to an individual's well being. Osteopathic care commences with the identification of the cause/s of the complaint and then uses soft tissue work and gentle physical manipulation and appropriate self care advice on dietary intake, exercise / life-style, emotional / psychological well-being to improve function, aid health and reduce the risk of reoccurrence of the presenting complaint.

Osteopathic medicine is a distinctive form of medical care founded on the philosophy that all body systems are interrelated and dependent upon one another for good health. This philosophy was developed in 1874 by Andrew Taylor Still, MD, who pioneered the concept of "wellness" and recognized the importance of treating illness within the context of the whole body.

Dr. Still was born in Virginia in 1828, the son of a Methodist minister and physician. At an early age he decided to follow in his father's footsteps and become a physician. After studying medicine and serving an apprenticeship under his father, Andrew Taylor Still became a licensed MD in the state of Missouri. In the early 1860s, he completed additional coursework at the College of Physicians and Surgeons in Kansas City, MO and went on to serve as a surgeon in the Union Army during the Civil War.

After the Civil War and following the death of three of his children from spinal meningitis in 1864, Dr. Still concluded that the orthodox medical practices of his day were frequently ineffective, and sometimes harmful. He devoted the next ten years of his life to studying the human body and finding better ways to treat disease. His research and clinical observations led him to believe that the musculoskeletal system played a vital role in health and disease. He concluded that the body contained all of the elements needed to maintain health, if properly stimulated.

Dr. Still believed that by correcting problems in the body's structure, through the use of manual techniques now known as osteopathic manipulative medicine (OMM), the body's ability to function and to heal itself could be greatly improved. He also promoted the idea of preventive medicine and endorsed the philosophy that physicians should focus on treating the whole patient, rather than just the disease. These beliefs formed the basis of a new medical approach, osteopathic medicine. Using this philosophy, Dr. Still opened the first school of osteopathic medicine in Kirksville, MO in 1892.

Physicians licensed as Doctors of Osteopathic Medicine (DOs), like their MD counterparts, must pass a stringent national or state medical board examination in order to practice medicine. Osteopathic physicians use all of the tools available through modern medicine including prescription medicine and surgery. They also may use OMM techniques to diagnose illness and injury, relieve pain, restore range of motion, and enhance the body's capacity to heal.

Reflective of the osteopathic philosophy of treating the whole person, many DOs serve in the primary care fields: family medicine, general internal medicine, and pediatrics. There is also a long tradition of osteopathic physicians establishing practices in rural and medically underserved areas.

Today DOs provide comprehensive medical care to patients in all 50 states and the District of Columbia, and have unlimited practice rights in more than 65 countries. Currently, there are more than 74,000 DOs practicing in the United States in a wide range of medical specialties including surgery, anesthesiology, sports medicine, geriatrics, and emergency medicine. DOs also serve as healthcare policy leaders at the local, state, and national levels. In addition, an increasing emphasis on biomedical research at several of the osteopathic colleges has expanded opportunities for DOs interested in pursuing careers in medical research.

One of Still's early students was J Martin Littlejohn, who, after taking on a job as physiology lecturer at the American School of Osteopathy, registered as a student. He was made Dean of the school that same year. Following bitter disagreements with some of A.T. Still's followers regarding the role of physiology within osteopathy, as well as other factors, he was released from his role as dean, and moved to Chicago, where he established the Chicago College of Osteopathy in 1900. Theoretical education was expanded upon and physiology became a core subject. Despite criticisms from the American School of Osteopathy, the Chicago College of Osteopathy went from strength to strength and was seen as a key scientific osteopathic institution. Due to the onset of political changes, J Martin Littlejohn moved back to Britain with his family in 1913, where he worked in hospitals in a variety of jobs, until he helped found the British School of Osteopathy (BSO) and the Journal of Osteopathy in 1917. This helped to lay foundations for osteopathy in Europe.

When the BSO opened, the British Osteopathic Association (formed in 1903 as a British branch of the American Osteopathic Association, where American-educated osteopaths came to live and practice) wanted a school based on American tradition where graduates practiced both osteopathy and what is known as 'allopathic medicine', meaning conventional medicine (Medicine Net.com, 2012). The BSO did not share the same views, and the BOA eventually made some leeway with this ambition with the establishment of the London College of Osteopathic Medicine (LCOM) (London Bridge Osteopaths, 2013) in 1946, which saw shorter osteopathic courses being offered to medical professionals, and therefore, the professionals graduating from the courses became the first British-trained osteopaths to start practice. In 1935, the BMA campaigned for a new parliamentary bill, which saw osteopathy being refused any official recognition. Osteopathy was considered to be outside of mainstream medical practice in Britain and was not a legally regulated profession until the introduction of the Osteopaths Act in 1993, which led to the establishment of the General Osteopathic Council, as well as the Register opening, in 1998. Like other medical professions osteopathy is now subject to statutory regulations and qualified practitioners need to register with GOSc in order to practice and use the title of 'osteopath'.

The education and support for osteopathic students has continued to improve, with more and more colleges and universities accredited to teach osteopathy or support osteopathic colleges (both full courses, and shorter courses for medical professionals), such as Swansea University, Bedfordshire University (who currently validate the BSO Osteopathy programmes), and Anglia Ruskin University (who currently validate the London School of Osteopathy programmes). Today's European style of osteopathy or in short in Europe called Osteopathic Medicine and Dr. Shahin Pourgol, MBA, DC, DO, PhD founder and president of The National Academy of Osteopathy and National University of Medical Sciences called it Manual Osteopathy and now is more known by this term.

Therapy objectives

During your first osteopathy session, the osteopath will ask about your symptoms, general health and any other medical care you're receiving before carrying out a physical examination.

The osteopath will use their hands to find areas of weakness, tenderness, restriction or strain within your body, particularly the spine. With your consent, you'll probably need to remove some clothing from the area being examined, and you may be asked to perform simple movements.

An osteopath aims to restore the normal function and stability of the joints to help the body heal itself. They use their hands to treat your body in a variety of ways, using a mixture of gentle and forceful techniques. These include:

Massage – to release and relax muscles

Stretching stiff joints

Articulation – where your joints are moved through their natural range of motion

High-velocity thrusts – short, sharp movements to the spine, which normally produce a clicking noise similar to cracking your knuckles

These techniques aim to reduce pain, improve movement and encourage blood flow. Osteopathy isn't usually painful, although it's not unusual to feel sore or stiff in the first few days after treatment, particularly if you're having treatment for a painful or inflamed injury. Your osteopath will explain whether you're likely to have any reactions.

Regulations and legal obligations

All osteopaths must be registered with the General Osteopathic Council. It is illegal to call yourself an osteopath, or offer services as a registered osteopath, without registration. You can learn more, and find a registered osteopath near you, from the General Osteopathic Council.

Training required

To become an osteopath, you must successfully complete one of the 'recognised' courses below to be eligible to apply for registration General Osteopathic Council.

Training courses generally lead to a bachelor's degree in osteopathy (a BSc Hons, BOst or BOstMed) or a masters degree (MOst). Courses usually consist of four years

of full-time training, five years part-time or a mixture of full or part-time. There are also courses with accelerated pathways for doctors and physiotherapists. A degree course includes anatomy, physiology, pathology, pharmacology, nutrition and biomechanics, plus at least 1,000 hours of clinical training.

Key aspects of good clinical practice to include the client assessment and referral process, and effective communication skills.

Ideally, conventional medical tests and treatments go through a series of scientific challenges that, if met, allow the test or the treatment to become part of conventional medical practice. However, there are and there always will be exceptions. As noted in some new practices offer dramatic and evident benefits that may justifiably hasten their acceptance. Sometimes, enthusiasm for the intervention, founded on the plausibility of the benefits and the absence of satisfactory alternatives, speeds acceptance, despite a dearth of evidence (e.g., screening for and treatment of prostate cancer).

Acupuncture -

Concept, origin, and development

Acupuncture is an ancient medicine that started out in China thousands years ago. The traditional version of acupuncture has the belief that “QI” (pronounced as chee) is a life force that is sent throughout the body in channel like forms. They call these meridians. Now that acupuncture has combined with modern medicine, it has been used a lot in order to help patients find pain relief. It is seen as a complementary or alternative medicine. It is now found in many pain clinics and hospices in the UK.

Therapy objectives

This therapy is done with extremely fine needles that are put into certain areas on the body to help relieve tension or other reasons. This is now used medically and is usually used after a medical treatment because it is believed to be able to make stimulate the nerves underneath the tissue and muscles. Acupuncture is used to treat several pain conditions such as headache, lower back pain, osteoarthritis, infertility, anxiety, and asthma.

Acupuncture is a very safe therapy. The side effects that have been found are patients feeling slightly drowsy, dizzy, or lightheaded. These side effects don't last very long.

Regulations and legal obligations

The National institute for health and care excellence (NICE) would only recommend acupuncture to only be used on patients who are complaining of chronic lower back pain, chronic tension-type headaches, and migraines. Basically it is supposed to be only used for extreme chronic cases. NICE is very efficient on backing up their findings and information off of scientific evidence. There has also been proof that acupuncture will work on other less severe issues such as neck pain and post-chemotherapy nausea.

Training required

To become qualified to do acupuncture you must combine practical work and studies together. You would need to study about anatomy, physiology, common diseases, diagnostic skills and methods, acupuncture points, life energy (chi or qi), health, acupuncture techniques, acupuncture treatments, emergency first aid, and business skills and setting up a practice. You will also need to keep within the CPD (continuing professional development) program.

Key aspects of good clinical practice to include the client assessment and referral process, and effective communication skills.

Key aspects of good clinical practice for acupuncture would be asking the patient very specific questions regarding their pain. In pain clinics, even when their doctors refer the patients, the acupuncture specialists still go over a series of specific questions to try and further understand the patient's pain so that it can be best

treated. Patients can be referred for several things yet even when the acupuncturist is about to perform, he/she but be certain that the patient has clearly stated where their pain is located, what type of pain it is, and any other related details. It is important to properly communicate with your patient because you want them to give you the correct information. When talking to a patient about their pain, you want to ask questions in a certain way so that you get the best explanation. Pain is one of the most difficult things to understand. When talking to a patient you don't want to encourage them to dramatize their pain. You want to try to understand the patient's pain threshold level. You want to be kind and friendly towards the patient and make them feel comfortable enough to share their pain because for some it may be very difficult.

Alexander Therapy -

Concept, origin, and development

Alexander therapy is a therapy that is designed to help the patients with their posture and balance. It originated from a man who felt that a large problem people were having with their backs were the fact that they were misusing their bodies for a long period of time. This therapy is directed by trained professionals that teach the patient how their body should be aligned naturally and makes them aware of their posture and ways to improve it. The patient would go to several different lessons and be educated about their body's position and shown how to correct their poor posture. This therapy is thought to relieve tension in the back, neck, shoulders, and other various muscles in the body. It is basically teaching the patient how to unlearn all of the bad habits they have picked up over the years relating to their posture. It is aiming to align and balance the body in a natural way. Learning this technique helps with balance, coordination, focus and breathing as well.

Therapy objectives

It teaches how you sit, stand, and move and how that affects your daily function. It also teaches how the head, neck and spine are fundamental in a humans ability to function and how caring for them gives optimal abilities. It helps bring to attention how you go about your daily activities and how it is important to notices these in order to start the process of change. It also brings to awareness how the mind and body are one and work together and influence each other.

Regulations and legal obligations

The alexander lessons are very safe and don't have any health risks. Patients that have a specific spinal injury, severe pain from a herniated (ruptured) disc, severe spinal stenosis (narrowing of the spine), or a fracture of the vertebrae (the bones in the spine) should not participate in this therapy. If this does happen to a patient, they need to be put into a specialist's physical rehabilitation. This technique takes time to work so the patient would need to be patient and persistent. No regulations exists for Alexander technique practitioners. The Committee of Advertising Practice (CAP), which writes and maintains the UK Advertising Codes, say that practitioners doing the alexander therapy should not be giving advice, diagnosis, or any treatments that are meant to be dealt with by medical professionals. CAP states, "Practitioners can, however, claim that their teachings promote a sense of wellbeing and, more specifically, could achieve better respiratory function in healthy volunteers and possible greater functional reach in elderly women." They suggest to do about 24 sessions for the best results.

Training required

To become an alexander technique teacher the trainee must take a course. The need to register with the CNHC and it would take between three to four years to complete. You must take a detailed study course about anatomy and physiology. They also need to take the Alexander study course which is a mix of Alexander's

book and books written about the technique. Because the therapy involves a lot of the mind the course also involves a psychology. The need to take a course on the science of movement as well. They need to also have supervised practical work to prove they know the technique.

Key aspects of good clinical practice to include the client assessment and referral process, and effective communication skills.

Key aspects of good clinical practice for alexander therapy would be communication and patience. The whole concept of the Alexander theory is that the instructor is teaching the client about their body and how to position it well. If there is poor communication or if the instructor is rushing the client, the therapy will not be given properly. Patients who are having back pain and a medical professional, friend, or colleague notices, it would be acceptable to refer the client to an Alexander therapy session.

Bowen therapy -

Concept, origin, and development

Bowen therapy is a therapy that uses very gentle touch and pressure. It is a remedial hands-on therapy that is applied to the muscles. The thumbs and fingers are to be placed on specific areas of the body and used to provide the rolling type movements to promote stimulate to the muscles and soft tissues. This involves no force at all and the treatment is supposed to be relaxing, gentle, and peaceful.

Therapy objectives

The idea is that the movements promote repair and balance to the body. It is said to reset the system by reminding the muscles where they are supposed to be. Patients have found it very beneficial and pain relieving. It helps with function improvement and giving the patients a higher level of energy throughout their everyday lives. The good point about Bowen is that it can be used on any type of person. Because all of the moves are so non invasive, it can be used on babies or extremely weak patients. Most therapies require harsh movements in order to fix the problem but Bowen is extremely gentle and effective which makes it a perfect solution for patients who are weaker than others. Bowen is a very holistic therapy in the sense that it not spot specific. The Bowen therapist treats each patient as a whole person. Bowen therapy is meant to mend the entire body rather than one specific area.

Regulations and legal obligations

If something goes wrong in a Bowen therapy treatment, there are three things to do. One could do nothing, set up a system of voluntary self regulation, or be sorted under a system of Statutory Self Regulation. The Bowen forum would suggest using the Voluntary Self Regulation as the best option.

Training required

Bowen therapists go through a 5-part process to complete the course. The first part gives a theory and practice bit. It gives guided hands on experience. The second part ensures your knowledge on the basic moves. Before you can do part three you must have completed 10 client case histories and receive written evaluation. Part 4 is a consolidation of part 3. Part 5 includes submitting 10 more client case histories (30 treatments) and the final exam. There are many different places that one can train to be a Bowen Therapist.

Key aspects of good clinical practice to include the client assessment and referral process, and effective communication skills.

Key aspects of good clinical practice for Bowen therapy would be to be prepared to have a very detailed explanation on what the treatment is because some patients would question the theory because of the lack of pressure. Bowen therapy treatments are done with light clothing on and usually last between 45-60 minutes. There should be three initial treatments that have 5-7 days in between each one. This is the time estimated to get the full effect. One of the major

parts of Bowen is that it shouldn't be mixed with any other therapies because it is trying to teach the body how to realign itself naturally. It shouldn't have any other influence for a week before and a week after the treatment. It is important to communicate this to the patient receiving Bowen so that they don't take another therapies and explain to them why not too.

Yoga -

Concept, origin, and development

Yoga is a combination of postures, meditation, breathing exercises, and has a very specific philosophy to it. It has several different types of yoga and each posture has its own unique name. The main yoga is Hatha which includes many different styles such as, Ananda, Anusara, Ashtanga, Bikram, Iyengar, Kripalu, Kundalini, Viniyoga, and others.

Yoga training didn't start until the 90s when a large group of yogis from a mix of different lineages and traditions began to discuss the idea of professional training. They met at a conference in San Francisco California that was led by a Yoga journal. It started as a small group of about 25 who called themselves the yoga dialogue. In 1997 the Ad Hoc Yoga alliance was created by some group members. It had the first meeting at the Kripalu center for yoga and health in Stockbridge. Currently there are over 1000 teachers and over 75 school applications every single month. The yoga alliance is ran by 8 board of director members and they have 30 team members who manage along with six different committees. These committees are focused on compensation, conference, governance, member benefits, schools and studios, and standards.

Therapy objectives

Yoga is a therapy that focuses on the participant not only healing their body but also their mind. This therapy is meant to connect the body and mind and has a strong emphasis on ancient Indian philosophy from which it originated from. Very often, yoga is used to reduce back pain and help improve patients ability to function and walk. It also known to help with reducing heart rate and blood pressure. It can also help patients who have anxiety and depression. It doesn't have many side effects and is a low risk therapy. Very rarely, patients can have stroke or pain from nerve damage. Women who are pregnant aren't encouraged to do yoga.

As yoga has many different benefits, the NCCIH is supporting research to be done to see if it helps anything else. It is funding research to be done on, Diabetes risk, HIV, Immune function, Forms of arthritis, Menopausal symptoms, Multiple sclerosis, Post-traumatic stress disorder, and Smoking cessation.

Regulations and legal obligations

There are no specific or universal legal obligations or regulations for yoga. Because of how many different places and networks you can register under, the insurance and regulation system is very different. The gyms and studios will occasionally have their own insurance that covers it but yoga alone doesn't have many regulations.

Training required

To become a yoga teacher you need to have two years of experience of practicing yoga with a qualified yoga teacher. You also need to achieve a yoga teaching qualification. The CYQ level 3 certificate in teaching yoga is nationally recognized.

Key aspects of good clinical practice to include the client assessment, referral process and effective communication skills.

Key aspects of good clinical practice for yoga would be knowing the group of clients you have been assigned. As yoga has many different levels, it is important that each participant knows the alternative moves for beginners, intermediate, and advanced. Yoga is a therapy that one can improve greatly in and so it is important for patients to not push themselves too far, but know what they are working towards.

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