

Visceral diagnostics within Europe

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Thesis - College Sutherland Amsterdam

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What are the differences within the OsEAN educational institutions in terms of visceral diagnostics?

There are different ways how an osteopath is doing a physical examination en treatment. We are interested in the differences within the educational institutions of the osteopathic network OsEAN in the way of teaching visceral diagnosis. The purpose of this research is to create awareness about similarities and differences regarding to diagnostics. It is a basis for discussions about whether and how standardization is desirable.

Through a semi-structured study, we have sent a questionnaire to schools that are affiliated with the OsEAN network. We investigate which visceral structures, and organs are tested and how the visceral aspect is implemented within the osteopathic physical examination.



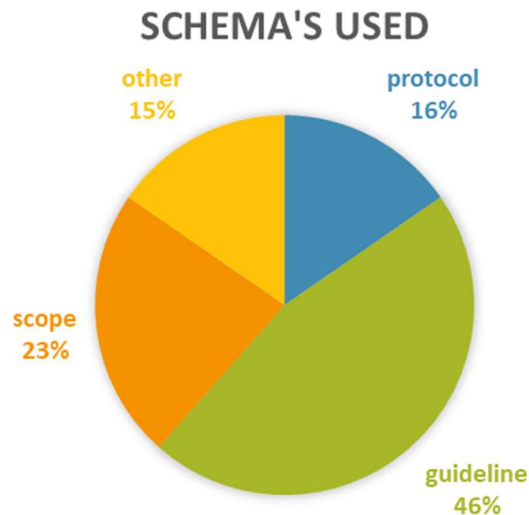
Members Canada and Argentina (non-respons) not included in this map (google maps)

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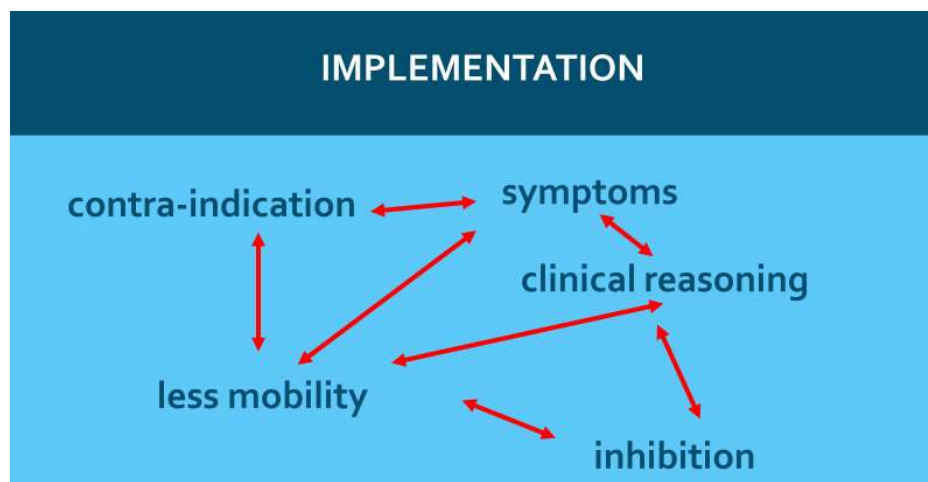
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The analysis shows that all respondents apply visceral diagnostics within the physical examination. All respondents work with a certain form of guidance within visceral examination.



Differences can be found in the way diagnostics are implemented throughout the entire consultation. For many schools symptomatology and clinical reasoning are important guiding factors in making treatment choices. Other schools mainly come to treatment choices through mobility tests and inhibitions, so clinical reasoning is not leading in making choices.

Clinical reasoning is mentioned by all courses, but appears to take place at different times within the osteopathic examination: Some schools apply clinical reasoning after the history, to draw up a treatment plan for the physical examination. Other schools apply clinical reasoning after they have conducted both anamnesis and physical examination.



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The conclusion of our research: there are differences in the way of teaching visceral diagnostics. The following questions could be: What is the impact of these differences? Is it desirable to teach visceral diagnostics in the same way at all institutes? Is the growth of our profession group impeded by the variations between them? To what extent does this influence our position within healthcare? With our background and the education and vision of College Sutherland, we support the power of diversity. Do tight protocols and well-defined schemes fit in with this method of education? We believe that every educational institution must retain the freedom to develop and teach diagnostics and treatment within its own vision. On the other hand we understand that standardization within educational institutions can contribute to a stronger position within healthcare. It is important for all educational institutions that they are aware of similarities and differences in vision.

In the context of these considerations, the effect of this on various aspects of the osteopathy profession must always be taken into account. Does a decision have a positive effect on treatment? Does it influence the development of a best practice for the patient? Does a choice to standardize influence the general picture of osteopathy and what are the possible political consequences?

Our goal is to open a discussion within OsEAN to what extent the differences in visceral diagnostics are desirable. This thesis is intended to raise awareness of these differences within OsEAN and serves as the basis for further discussions.

What can this mean for OsEAN concerning follow-up in the future?

There is currently no common glossary within OsEAN. The use of osteopathic concepts is essential for cooperation and communication within this network. Our recommendation is to work with a working group on an osteopathic glossary that is accessible to all members online and can be supplemented or adjusted. In this you could reach a consensus on the medical terms used: are we going to use English names or do we choose Latin? How can this best be achieved? At meetings from OsEAN, it may be a requirement that all presentations must adhere to this agreement.

Every school has its own guidance on (visceral) diagnostics. Is it a goal of OsEAN to coordinate the different ways of diagnosis? This question has to be discussed.