Osteopathy in Europe — particularly in Italy—is evolving its own professional shape — independent of the long-established United Kingdom model (which is itself changing), and different from osteopathy’s roots in the USA.

In the UK, since the initiation of state regulation, and the establishment of the profession’s regulating body, the General Osteopathic Council, there appears to have been an emerging trend towards a more biomechanical/musculoskeletal, evidence-based, focus for the profession. Obvious conditions such as low back pain, and neck and shoulder issues (as examples), seem to be what UK’s close to 4000 osteopaths treat, most of the time, encouraged by the GOC, and the BOA (British Osteopathic Association) the profession’s virtual ‘trade-union’.

While those UK trained osteopaths who have had, as part of their training, a broader philosophical and practical exposure — for example where naturopathic subjects are part of the training, or where ‘classical osteopathy’ has been taught — still treat patients with general health conditions, this is not the direction either the GOC, BOA, or the colleges, are encouraging.

In the USA the majority of DO’s no longer employ manipulation as part of their patient care; their work being almost indistinguishable from standard medical practice. Those DO’s who do use manual approaches in patient care are finding an ever more hostile environment in which, in many States, payment for time spent on such treatment is being denied, or drastically reduced, by health insurance providers.

Participation in the 2nd Italian Congress of Osteopathic Medicine, in Rome, in June (June 17–20), demonstrated that an energetic and exciting osteopathic profession is alive and thriving in Italy (as it is in many other European countries — including Spain, France, Belgium, Austria, Germany and Russia).

The conference, efficiently organised under the direction of Paulo Tozzi DO, brought together many young (mainly) Italian osteopaths, who appear to have found ways of initiating and/or collaborating in a range of research projects, details of which were presented to an enthusiastic conference audience of around 200.

Two veteran American osteopaths were also presenting, Professor Michael Patterson — who in his address confirmed many of the trends discussed above — as well as Viola Frymann DO, who continues her teaching and clinical work as she approaches 90. Dr Frymann spoke about her work with infants and neonates, some of it collaboratively with Italian osteopaths.

Some of the projects reported on by Italian osteopaths (see selection of summaries below), involved only small number of patients — making it impossible to draw definitive conclusions — however what seems at least as important as the results of such studies (and arguably far more important), is the fact that they are taking place at all.
A dynamic Italian osteopathic profession is emerging, with an enthusiastic desire to explore osteopathic efficacy in many areas of health concern. One result is a cohort of osteopaths, whose research skills are being refined, offering new insights as to the mechanisms and methods that osteopathic treatment can produce.

A brief summary of selected research reports from the Congress include:

**Osteopathy in neonatology clinical approach, treatment protocol, statistical study**

Craigero Germano DO presented a report on 5 years of study of approximately 2000 neonates at Villa Salus Hospital in Venice. A summary report was given involving 1000 infants who had been examined and treated — 772 vaginal births and the remainder caesarean.

Based on assessments of these infants the following summary of findings emerged:

Infants born vaginally most commonly demonstrated lateral cranial strains and occipital and cranial axis compressions. Infants born by caesarean section demonstrated a greater head circumference with more frequent injuries to the occiput.

Based on his years of experience with neonates it was suggested that “osteopathic rebalancing” might prevent adverse structural and functional developmental effects of the observed cranial distortions.

**Cancer related fatigue syndrome (CRFS)**

Members of the research team that investigated the effects of osteopathic care given to patients with CRFS, (Gugliemo Donniaquio, Luca Brema, Marino Pietro, Patrizia Boero) reported on a study conducted at San Paolo Day Hospital, Savona, Italy. The study was conducted by 6th (i.e. final) year osteopathic students from the European School of Medical Osteopathy in Genoa, under the supervision of faculty. The aim was to evaluate whether osteopathic treatment could be helpful in producing objective and effective results in patients with CRFS. Each of the 50 cancer patients (male and female), aged between 40 and 60, received 1 h of osteopathic treatment, every 3 months for 15 months. Treatment involved a cranial osteopathic protocol, as well as “multidimensional technique involving craniosacral, visceral, somatic-structural and neurovegetative rebalancing methods”. The findings of improved CRFS-related symptoms, and life quality improvements, suggested that a larger study would be justified.

**Infertility, endometriosis and osteopathy**

Two small trials, initiated in a collaboration between surgeons and osteopaths, were reported on. The lead osteopath involved in the study, Alexandre Belloni DO, reported that in both trials, osteopathic treatment involved “elongation, manipulation, inhibition, stimulation” following on from “assessment for joint dyskinesia, asymmetry of myofascial tonus and posture.”

In her presentation the collaborating surgeon, Anastasia Ussia MD, reported on one study, involving 4 patients, aged between 20 and 40, who had demonstrated idiopathic infertility for over 2 years, accompanied by superficial endometriosis. The osteopathically treated patients were compared with those for whom a ‘wait and see’ approach, was adopted. Three one hour, osteopathic treatments were given at fortnightly intervals. At six-month follow-up three members of the infertile group were pregnant.

In a separate pilot study, five patients aged 20—45, who had previously had surgery for serious endometriosis, and who subsequently suffered persistent pain, “not attributable to gynaecological problems”, also received three one hour, osteopathic treatments at fortnightly intervals. At 6 months follow-up, two patients were pain free, and two others showed significant reductions in pain. No conclusions could be drawn due to the small numbers involved in these trials, however the researchers suggest that the encouraging results highlight a need for further studies, with the objective of developing a randomized controlled research project.

**Osteopathic manipulative treatment as adjuvant therapy in patients with peripheral arterial disease (PAD.)**

This study (Lombardini et al., 2009), conducted at the University of Perugia, evaluated and compared endothelial function and lifestyle modifications in 15 intermittent claudication patients who received both medical and osteopathic treatment (OMT group) and 15 intermittent claudication patients, matched for age, sex and medical treatment — the control group — who received standard medical attention. Compared to the control group, the OMT group had a significant increase in brachial flow-mediated vasodilation, ankle/brachial pressure index, treadmill testing, and physical health component of life quality (all p < 0.05), assessed at 2 months and 3 months from the start of the study. A report on this research initiative was published in *Manual Therapy* in August 2009.

Many other reports were delivered at the Rome congress, on topics as varied as:

- Possible correlations between performance and rebalancing of osteopathic pivots in athletes (Feliziani C / Moretti M)
- Clinical and kinematic evaluation of osteopathy-vs-specific exercise in obese non-specific chronic low back pain patients (Vismara L et al)
- OMT and epicondylitis (Giacomo S et al)
- The importance of deglutition in athletic performance (Desiro P)
- Pain in patients with spinal injuries: OMT effects associated with drug therapy (Arienti C et al)
- Dynamic Ultrasound evaluation of sliding motion of organs related to fascia layers, before and after osteopathic techniques are applied (Bongiorno D / Tozzi P)

These examples of research initiatives from Italy suggest a bright future for osteopathy in that country.
Reference