

LONDON COLLEGE OF OSTEOPATHIC MEDICINE

PROSPECTUS 2009

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We provide training in osteopathic theory and practice and supervised clinical experience, to enable doctors to function confidently as medical osteopaths in a medical specialist role. We foster learning that will enable graduates to contribute to osteopathic research and education, and develop and integrate their medicine and osteopathy.

DEFINING OSTEOPATHIC MEDICINE

Osteopathic medicine is the integration of medicine and osteopathy as described by osteopathic principles.

Its definition becomes dependent on its use, with different specialists finding it influences their work in different ways.

For example, up to 25% of a GP's work concerns musculoskeletal problems. Osteopathic-assessment and treatment techniques will significantly improve general practice diagnosis and management, potentially reduce referrals and can lead to immediate pain-relieving advice or treatment within the consultation. In some cases it aids diagnosis and management of pain not obviously related to a musculoskeletal dysfunction – such as headaches or thoracic pain.

Rheumatologists using their developed osteopathic medical diagnostic skills may reduce expensive tests and imaging techniques and offer a quicker route to the correct treatment. Specialists in other fields – orthopaedics, sports medicine, rehabilitation, anaesthetics specialising in pain, occupational health – find osteopathic medicine makes a significant contribution to the way in which they work. In all cases, providing better clinical diagnosis, reduced patient anxiety, and gives NHS patients access to treatment not commonly provided in the NHS.

Sometimes it is not until doctors engage with the idea of osteopathic medicine that they can clearly identify the potential of its application.

Highlighting these areas does not infer failings within the specialities, merely that a diagnosis based on the concept of somatic dysfunction rather than pathology, in the first instance, can be improved using osteopathic medical techniques.

However, it must be stressed, osteopathy on its own will not achieve the same outcomes. It is the unique blend of functional anatomy, biomedical knowledge, osteopathic medical skills and medical expertise in a specific field that derives the best results from osteopathic medicine.

WHY THE LONDON COLLEGE OF OSTEOPATHIC MEDICINE ?

LCOM offers interactive small group learning in the most intensive osteopathic course in the world that exclusively teaches osteopathy to postgraduate doctors. For this reason its graduates have come from Ireland, Germany, Sweden, France, Switzerland, Greece, Australia, New Zealand, Korea, India, the Caribbean, Kazakhstan and the USA as well as the United Kingdom.

Some choose to work exclusively in osteopathy, but the majority continue to work within medicine. Of these we include consultants in pain management and orthopaedics, GPs and sports doctors with national squads and professional teams, as well as lecturers in teaching hospitals.

So, as well as providing a course that leads to registration with the UK's General Osteopathic Council, it also gives students access to practitioners who share their specialist interests and can demonstrate how their osteopathic training informs and develops their daily work.

NEW MEMBERSHIP COURSE

Our **new** course runs two days a week, Friday and Saturdays over 18 months which means less weekday commitment, and also makes it easier for doctors to maintain their current activities.

Spreading the new course over a longer period may be less convenient for doctors from abroad, but we will run a shorter course if we have enough students wanting to study for three days a week over 13 months.

COURSE STRUCTURE

A DISTANCE LEARNING COURSE FOR 2 MONTHS

The majority of this is revision of anatomy and physiology, with a small component of new material relating specifically to osteopathy. Students are supported throughout the course by a mentor, and this facility is available for the distance learning course.

INTENSIVE COURSE OF 10 DAYS

Two consecutive weeks of 5 week days. This part of the course prepares the student for the clinical teaching to come – revising some musculoskeletal and orthopaedic examination techniques but introducing new refined osteopathic assessment and treatment techniques.

CLINIC TEACHING

After the intensive two weeks the attendance for clinic teaching is two days a week for 70 weeks and is supervised patient care in the clinic.

- Students attend for two days each week, 0930 to 1700 hrs for the whole course.
- Each student is entitled to 6 weeks of annual leave. The college is closed for one or two weeks at Christmas depending the days that the bank holidays fall on. The course therefore extends approximately 80 weeks in total, or 18 months.

TECHNIQUE TEACHING

- Concurrent with the clinic teaching, there is technique teaching every week initially for 12 weeks and then at regular intervals to the end of the course for a further 14 weeks, making a total of 26 weeks.
- Time additional to this minimum commitment will be dictated by the needs of students as they progress.

LUNCH TIME TEACHING

Topic teaching, student presentations and journal reviews take place at lunch time.

HOLIDAYS

Six weeks leave are permitted, which excludes a week over Christmas when the clinic is closed. A maximum of two consecutive weeks of leave are allowed to maintain progression of palpatory and proprioceptive skills.

Sick leave is counted separately, and if students have significant sickness absence they may be required to make up days lost as decided by faculty.

CARE OF PATIENTS

Students are responsible for the care of the patients in the clinic under supervision of the tutors.

COURSE CONTENT

- The underlying theory and principles of osteopathy will be introduced by distance learning and in the intensive course. The distance learning course over two months is to study basic sciences such as anatomy, pain physiology and concepts of osteopathy. The college will advise on reading material and interaction will occur via email with your mentors who are faculty members.
- Teaching includes familiarity with the concept of somatic dysfunction and relevant neurophysiology, ergonomics and postural adaptation.
- A high level of skill in musculoskeletal diagnosis will be taught including conventional medical and osteopathic examination techniques.

- Students will also need to re-evaluate previous knowledge and integrate it with study of the evidence base relevant to osteopathy and musculoskeletal pain and impairment.
- A range of osteopathic techniques are taught to the level of safe independent application.
- Teaching is designed to reach the standard to enable independent practice as a medical osteopath, and also to reach the standards required to register with the General Osteopathic Council.

TEACHING METHODS

- Interactive dynamic small group learning is the format for the majority of teaching.
- Non-clinic teaching by means of presentations discussions and interactive seminars.
- Clinic-based teaching is never greater than one tutor to five students and focuses on the patients under the student's care. It is more structured in the early part of the course.
- Students often have varied medical backgrounds and thus are expected and facilitated to identify their own learning needs during the course.
- Teaching is provided by the faculty of the college which has a wide range of medical and osteopathic experience.

Students are required to keep a patient log throughout the course and a manipulative technique log in the latter stage of the course. These logs are not part of the assessment process may be used if a student's performance is borderline in finals. The experience is learner centred and students will be required to demonstrate they are identifying and resolving their personal learning needs by a documented reflective process.

ASSESSMENTS

- Four practical assessments
- Two written assessment
- Critical analysis assessment
- Final clinical assessment by external examiners

In order to monitor standards of assessments, and train examiners, some may be recorded on DVD. This is for educational purposes only, and the recordings are not available to review assessment results of individual students.

ENTRY REQUIREMENTS

- Medical degree recognised by the UK General Medical Council
- General medical postgraduate experience
- Experience of musculoskeletal medicine is an advantage but not essential

- Satisfactory references from at least two sources
- IT skills to use e-mail and internet and Microsoft Office software, and access to email and internet outside college.
- Indemnity insurance cover appropriate for the college clinic
- Satisfactory UK Criminal records check

ENTRANCE PROCEDURE

- If you are unsure about whether the course is suitable for you, or whether you meet our entry criteria our admissions advisor is Dr Faith Gardner
- An informal visit to the college to see the methods of training and discuss career plans with members of the faculty by prior arrangement is recommended
- Application should be made, as early as possible before intended admission, on the College's form available as a download from the website. Depending on individual, factors some applicants may be assessed for competence in English Language and basic clinical skills.

FEES

- The fee for the 18 month course is £9000.
- Prior to the distance learning course £5000 is payable.
- Two subsequent payments of £2000 are payable at 6 and 12 months.

Teaching with a high ratio of tutor to student is necessary to develop osteopathic skills, and is expensive to deliver. The students fees do not cover the cost of tutoring, the majority of which is made up by donations the patient make to the clinic, which is about £15,000 per student over the course. This means that, if a student decides not to continue with the course for some reason, the cost in lost income to the College through patient donation lost is significant. For this reason the College would not be able to refund fees once the student has started the distance learning course.

REQUIRED READING

Apart from standard anatomical works and abstracts from osteopathic and orthodox journals, trainees will find that they need to sample a variety of texts to acquire a balanced view of the field in which they will practice; an initial list might include the following:

Colour Atlas and Textbook of Human Anatomy, Vol 1, Locomotor Anatomy Werner Platzer A
Thieme Flexibook ISBN 3-13-533304-3

Manipulative Therapy in Rehabilitation of the Motor System
Karel Lewit ISBN 0-407-00252-9

Principles of Manual Medicine

Philip Greenman

ISBN 0-683-03558-4

The Back Pain Revolution

Gordon Waddell

ISBN 0-443-06039-8

Anatomy & Human Movement

Nigel Palastanga, Derek Field, Roger Soames

ISBN 0-7506-3268-2

COLLEGE ORGANISATION

- Management Committee responsible for clinic and college development.
- Clinic and College Committee (CCC) meets monthly and is responsible for daily running of the clinic and college. Students present in college are encouraged to attend.
- Faculty is responsible for course content and delivery.
- The College and Osteopathic Association Clinic are overseen by the Osteopathic Trust, a registered charity.
- Clinic rooms and teaching space is rented out for use other than LCOM, and students should be aware that their clinic room may be used by others at other times in the week.

FACULTY

Dr. B Abbas, MB BS PhD MSc(Glasgow) MSc(Lond) MLCOM

Dr. J Djurovic, MD Dip Sports Med FLCOM

Dr. F Eftekhari, MD MSOrth FLCOM

Dr. F Gardner, MB BS MSc DipSportsMed MLCOM DM-SMed FFSEM

Dr. D R Gogia, LCEH DF CMFPF FLCOM

Dr. R J N Gribble, MB BS MRCP(UK) FLCOM DM-SMed

Dr. R S MacDonald, MB BS MRCP(UK) FLCOM DM-SMed

Dr. J Neaves MB BS MSc MRCGP DRCOG DFFP DM-SMed DA MLCOM

Dr. J P Randerla, LCEH DFHom FLCOM

Dr. G Robertson, BCh MRCP(UK) FLCOM DM-SMed

Dr. P M R Wilkin, MB BCh MSc DRCOG FLCOM

Dr. M B Speight, MB, ChB, DipSportsMed, MLCOM, DM-SMed

Dr. S J Hannaford-Young, MB, BS, MRCP(UK), DM-SMed, MLCOM

POSTGRADUATE EDUCATION

Progression

After success in their final examination, students become a Member of the London College of Osteopathic Medicine (MLCOM), the post graduate organisation is the Association of Medical Osteopaths. The General Osteopathic Council (GOsC) recognises the course for registration purposes.

Most medical insurers, after a variable period of practice post qualification, accept graduates as medical specialists and as osteopaths.

The course is recognised by the Society of Apothecaries when assessing eligibility to sit the Diploma of Musculoskeletal Medicine (DM-SMed) examination. Increasingly MLCOM and DM-SMed are becoming the relevant qualifications for posts in the emerging speciality of Musculoskeletal Medicine within the Health Service.

Courses, seminars and practice

Apart from the Membership course, the college organises educational activities for its own graduates and medical practitioners. Seminars are held at the College for its members. Many members are active educationally in both under and postgraduate education

Selected members who temporarily lack the opportunity to practice osteopathy may be eligible to treat patients in the Clinic thus maintaining both their level of manual skills and contact with osteopathic colleagues.

By overlapping memberships, co-operation or congruence of objectives, the College maintains informal links with the British Institute of Musculoskeletal Medicine, British Osteopathic Association, and Society for Back Pain Research. The College welcomes, by appointment, medical visitors who wish to see the clinic functioning and meet trainees and tutors.

LCOM PAST AND PRESENT

The history

In 1927 the Osteopathic Association Clinic in Boston Place was established by members of the British Osteopathic Association, itself created in 1911 as the professional association of the osteopaths arriving from the USA less than 20 years after the profession was founded. Initially in Westminster, the Clinic later moved to Dorset Square with clinic facilities in the adjacent Boston Place. The purpose of the Clinic was, and continues to be, to offer osteopathic treatment to the impecunious of London and it was staffed by doctors of osteopathy recently arrived from the USA. Prior to the Second World War all members of the BOA were graduates from the American osteopathic schools.

In 1946 the London College of Osteopathy was founded to provide a postgraduate course in osteopathy for medical practitioners who would then be eligible to be members of the BOA. In

1978 the name of the college changed to the London College of Osteopathic Medicine. Although the non-medical osteopathic educational institutions have offered tuition to medically qualified doctors, the LCOM is unique world-wide in being specifically dedicated to this purpose.

The course at LCOM is currently regulated by the General Osteopathic Council. The Quality Assurance Agency, which assesses many postgraduate institutions in the UK, manages this process.

In 1998, with the onset of statutory recognition and regulation, the major professional associations of osteopaths in the UK came together under the title British Osteopathic Association. The Members of the London College of Osteopathic Medicine also set up a post graduate organisation, the Association for Medical Osteopathy, to support career development and ongoing education of medical practitioners in osteopathy.

The patrons

LCOM owes its continuing success to Osteopathic Trusts, a registered charity (No. 313751) that was established in 1936 and owns the College and Clinic premises. By regular subsidies it ensures that College fees do not become an obstacle to the education of medical practitioners in osteopathy, and also allows the Clinic to treat those of reduced means at low cost or even free of charge.

RESEARCH

Since 1982 Osteopathic Trusts Ltd. has supported several research projects. A one hundred patient pilot trial of osteopathic manipulation for low back pain has been completed and served the purpose of confirming the effectiveness of osteopathic manipulation, refining methodology, and developing new concepts of progress assessment. Facilities have also been provided for an assessment of interactions of osteopathic and general practice, and an investigation of physical examination recording and inter-observer reliability. Co-operation with the Institute of Human Performance of University College London in putting on an MSc course over recent years has provided many opportunities for research initiatives. To date the Trusts has funded a post-graduate engineer full-time over one year developing apparatus to measure the mechanical compliance of electrically silent muscle. In co-operation with the Welsh National School of Medicine a trial of osteopathic care of low back pain in general practice has been performed supported by funding from the Trusts.

The College is a founder member of the Council for Osteopathic Educational Institutions and the National Council for Osteopathic Research.