

The Osteopathic Touch: Using Osteopathic Manipulation to Address Mental Health and Back Pain

In osteopathic medicine, rational treatment is based upon an understanding of the basic principles of body unity, self-regulation, and the interrelationship of structure and function. Somatic dysfunctions (SD) are defined as an impairment/altered function of the body framework system treatable with osteopathic manipulative treatment (OMT). The autonomic nervous system (ANS) controls visceral physiology which correlate with SD in the spine through a manipulatable reflex arc defined as the viscerosomatic reflex (VSR)/somatovisceral reflex (SVR). In some cases, patients treated with OMT have sensational and emotional changes. This case study explores this psychological correlation between SD and the VSR/SVR.

An 18-year-old male with history of scoliosis admitted to a 1-year period of pain, low mood, excessive anxiety, and somatic symptoms: muscle tension, heart palpitations/accelerations, sweating, trembling, shortness of breath, chest pain, and nausea. Behavioral scales demonstrated depressive and anxiety disorders. Physical exam and radiography demonstrated a mild thoracolumbar scoliosis between T4- L3. Osteopathic structural examination (OSE) demonstrated multiple SDs in the Cranial, Cervical, Thoracic, Lumbar, Innominate and Sacral regions. His SDs were treated with a variety of OMT techniques. Special focus was given to manipulation of the ANS through the VSR/SVR arc with OMT done 3 times per week for 3 months.

There was subjective improvement in pain, mood and anxiety expressed by the patient as well as improvement via OSE and behavioral scales.

The study showed treating SD with OMT through the VSR/SVR arc can facilitate an emotional release. The causative relationship however is difficult to ascertain as OMT could affect psychiatric symptoms or psychiatric symptoms could improve due to confounding external factors which in turn positively impact SD. This relationship requires more research.