Foreword to the English Edition

When asked to consider writing a foreword to Visceral Manipulation in Osteopathy by Eric Hebgen, DO, I was conflicted but intrigued. Leaving the next day to lecture in Australia, I had hoped to empty my plateful of writing projects on the long flight, yet treatment of visceral dysfunction was near dear to my heart (no pun intended). In the end, the title of Chapter 3 proved impossible to resist. I offered to examine the text and happily so.

The clear, uncluttered diagrams and dynamic pictures of osteopathic manipulative technique (OMT) immediately impressed me. Coupled with the publisher's spacious layout, Visceral Manipulation in Osteopathy was remarkably easy to read and “digest” (pun intended for a cooking analogy!). The author is an effective chef who has carefully balanced precise appetizers and chosen just the right amount in each entrée to nourish—but not overstuff—clinicians.

- **Appetizers:** In his first four chapters, the author pares down and deconstructs several key osteopathic approaches; treatments reflecting both European and American flavors. For complete recipes and their rationale, the reader should really return to the original texts; but for an overview or a quick trip down “memory-lane,” the author handily summarizes terminology and many key concepts related to visceral treatment.

- **Entrées:** Having introduced ingredients (concepts and techniques) in the first four chapters, Eric Hebgen then specifically serves up 18 additional organs in his wonderfully uncomplicated style. His simple clarity provides immense clinical practicality.

I would like to close this foreword by observing that in 1990 when we wrote our first text, Osteopathic Considerations in Systemic Dysfunction, we could not have imagined its impact. In later texts and editions, we continued to build upon the acknowledged work of our respected teachers and mentors (especially Korr, Denslow, Kimberly, Frymann, and Zink), just as they built upon the work of Sutherland, Chapman, Burns and others. As future texts synthesize improved, coordinated osteopathic approaches promoting health and visceral homeostasis, they will benefit from access to this text—I know our subsequent editions will.

Because of its clear explanations, quality graphics and intent to convey some of the contributions of the author’s colleagues and teachers, I recommend you make this text part of your library. While it benefits from a number of practical OMT “recipes,” in caring for patients I trust you will find that Visceral Manipulation in Osteopathy will be more than a mere cookbook.

Prof. Michael L. Kuchera, DO, FAAO
(Author of Osteopathic Principles in Practice, Osteopathic Considerations in Systemic Dysfunction, and Osteopathic Considerations in HEENT Disorders)
Foreword to the 3rd German Edition

During the 150 years in the history of osteopathy, numerous approaches have been developed.

Andrew Taylor Still, the founder of osteopathy, was far ahead of his times and formulated a number of thoughts that continue to enjoy unchanged validity for contemporary medicine and for osteopathy. It was his desire to warn and preserve the medicine of his times against overly radical specialization and mechanization. He advocated a holistic and individualized perspective in medicine.

For this purpose, he emphasized placing the patient at the center of the consultation. His ideal of medicine was to first do everything in one’s power to activate the autoregulatory powers of the patient. It was only when the limits of autoregulation were reached that allopathy should get involved. His first yardstick for the healthy functioning of the human body was movement, in the largest sense of the word.

Eric U. Hebgen, the author of the present book, and his teacher Josi Potaznik have grasped the meaning of this philosophy. Especially in our modern world with its host of stimulations and overstimulations, the osteopathic view of the patient is gaining new significance. It offers an extremely interesting approach, in the context of the viscera in particular. The decision to write this book was therefore not far-fetched. To create a comprehensive survey, Eric U. Hebgen has adopted and integrated much information from previous publications by different authors. This book is also rooted in the visceral instructions by Dr med Josi Potaznik, DO, who has collaborated in the development of visceral instruction at the Institute for Applied Osteopathy for a long time.

The present book serves not only as a general treatment of visceral manipulation, but also as a guidepost and textbook, describing the organs according to osteopathic criteria in their physiologic movement, defining movement disorders, and presenting pathologic effects.

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Preface

It is my pleasure and honor to offer you this book, which was first published in Germany in 2003 as Viszeralosteopathie—Grundlagen und Techniken, now in its English translation as Visceral Manipulation in Osteopathy. The publication of an osteopathic book in the "mother tongue" of osteopathy, as it were, appears particularly significant to me. I hope that you will find suggestions and inspiration for your daily work.

The osteopathic manipulation of the internal organs is as old as osteopathy itself. Andrew T. Still’s books show that he already treated the internal organs. He describes manipulations that primarily affect the organs through the circulatory system and aim at strengthening their self-healing powers. William A. Kuchera, DO, and Michael L. Kuchera, DO, compiled and refined these treatments in an outstanding book that was published in 1994. This traditional American treatment approach is part of this book, as is the reflex therapy according to F. Chapman, DO, an American osteopath who at the start of the twentieth century discovered the reflex points named after him and linked them to certain organs, as a result of which we know that treating the points improves the health of the organ.

European practitioners also began to manually treat the abdominal organs in the late nineteenth century. The Swedish gymnast Mårten Thure Emil Brandt (1819–1895), for example, developed a diagnostic and therapeutic method for treating the organs of the lesser pelvis. Thus, a repositioning technique for uterine prolapse is named after him, which is still used successfully today. Henri Stapfer, one of Brandt’s students, further refined these methods. The French physician Frantz Glénard (1848–1920) also described visceral palpations and manipulations of different organs systematically during this time. In addition, he introduced a first visceral concept.

In the 1970s and 1980s, French osteopaths such as Jacques Weischenk, DO, in turn took on the known treatment methods and developed them further. And, finally, we have Jean-Pierre Barral, DO, to thank for the fact that the visceral manipulation of the internal organs could be established as a part of osteopathy in Europe. He systematized and structured existing information, carried out his own studies, and published a visceral concept that has become the most widespread model in European osteopathy. In the present book, I have therefore devoted the largest amount of space to Barral’s therapeutic approach.

Furthermore, the two Belgian osteopaths Georges Finet, DO, and Christian Willame, DO, also carried out extensive studies in the 1980s to investigate the mobility of the organs in relation to the movements of diaphragmatic breathing. On the basis of their research, they developed a fascial treatment of the internal organs that surely deserves more attention. In this book, I introduce one part of this treatment concept that I consider the most effective.

For many people, manual treatments of the internal organs initially appear strange, and they may ask why we should even push around on the abdomen at all. Thus, we should take into consideration the fact that the internal organs are affixed mechanically to each other as well as to parts of the locomotor system and are subject to the same physical laws as the rest of the body. If we therefore recognize them as part of the mechanics of the body and take into account the anatomical connections, we can see how a disturbance in the movement of an organ has an affect on other parts of the body. Bear in mind: I am referring here to an osteopathic dysfunction, as it occurs also in the locomotor system, and not to an illness of an organ, even though in such cases Andrew T. Still himself established the circulatory treatment method. Thus, I am firmly convinced that the osteopathic manipulation of the internal organs presents an enrichment of therapeutic skills. Anybody who has personally discovered them will never want to manage without them again.

Eric U. Hebgen, DO, MRO