Preface on the Occasion of the 25th Anniversary

The current textbook Musculoskeletal Manual Medicine has, in terms of medical publishing, a long and interesting history. Although this book has a new format, completely reworked and reorganized, the original ideas presented 25 years ago still hold true. To the surprise of many—both within and outside the field—probably no other back pain treatment interventions have been studied as exhaustively in biomechanical studies and randomized clinical trials as manual medicine procedures.

During the past 25 years, interest in the field has steadily increased, both on the part of the public and patients, and on the part of orthodox medicine. Manual medicine has gone from having an “outsider” role to being a logical part of the armamentarium of today’s musculoskeletal physician. Again, history is a good teacher.

In the mid 1970s, CT, MRI, SPECT, and PET scans capable of investigating structures and tissues potentially responsible for primary symptoms such as pain and altered structure and function were not available to patients presenting with musculoskeletal disorders. However, with the increasing interest in and fascination of applications of technology in patient care, the physician’s hands as a diagnostic and therapeutic tool were commonly neglected, particularly in the assessment of such musculoskeletal disorders as so-called nonspecific or mechanical low back and neck pain.

In the late 1970s our attention was attracted by a small group of Swiss physicians successfully using manual medicine approaches, both diagnostically and therapeutically. We became students of the prominent Swiss rheumatologist, Dr. Max Sutter, who taught us one-on-one how to use our hands to palpate the changes of different tissues in the human body such as the skin, subcutaneous tissues, muscles, and tendons. The principle idea was to try to identify the anatomical structures and relationships responsible for pain and altered function in a joint or spinal region.

The first two authors, together with the orthopedic surgeon Dr. Tomáš Dobroň, set down their experiences of the nearly 3-year educational process in the first German edition of Manual Medicine: Diagnostics (Manuelle Medizin: Diagnostik), with a print run of a total of 10 copies of a book based on our hand colored drawings, the starting point of a long medical journey. Many of the original drawings from this very first edition in 1980 are still used in the current textbook, now redrawn and following a layout that was created, yes, with sophisticated publishing technology. At that time we were already impressed by the seminal research papers and textbook on clinical biomechanics by Augustus White and Manohar Panjabi. These two authors influenced immensely how we would learn to think about and approach new research projects that would investigate principles of mechanisms and how they relate to clinical signs and symptoms. This resulted in a wonderful friendship and thoughtful scientific collaboration, and nearly 50 papers in peer-reviewed journals.

Knowing the quality of Thieme Publishers, we presented them with our hand-made book for consideration. In 1983, Thieme Publishers courageously published a book which at that time appeared to be quite an exotic project: the first German edition of Manual Medicine: Diagnostics. We think that this important decision served everyone well.

Soon after the first edition, and being educated within the framework of the rather young Swiss Medical Association for Manual Medicine, we visited well-established educational institutions of osteopathic medicine in the USA that already held university status, as well as those colleges of chiropractic accredited by the Swiss health system to educate Swiss chiropractors. The close exposure and collaboration with experts of osteopathic manual medicine such as Philip Greenman, Myron Beal, and Bob Ward, and from the chiropractic profession, Scott Haldeman, not only offered us new dimensions and aspects of manual medicine but also taught us to respect and collaborate equally with doctors of osteopathic medicine and doctors of chiropractic.

Wolfgang Gilliar, DO, currently Professor at the New York College of Osteopathic Medicine of the New York Institute of Technology, translated the book, and it was presented to the English-speaking market in 1984.

Following the experience gained from our exposure to osteopathy and chiropractic on the occasion of the 7th International Congress of the FIMM (International Federation of Manual Medicine) in Zurich in 1983, we invited the leaders in their particular field to what is now known as the Fischingen Conference. There, within 1 week, the common denominators of manual medicine, osteopathy, and chiropractic were openly and collegially discussed. We realized that many of the diagnostic and therapeutic approaches appear similar or deviate only slightly from each other—as far as the biomechanical model is concerned—and their approach and applications may have been shaped, at least in part, by their professional context and philosophy.

In the 1980s relationships between exponents of manual medicine and classical orthodox medicine were somewhat tense. In other words, traditional universities, at least in Europe, seemed rather reluctant to integrate the diagnostic and therapeutic aspects of manual medicine within the framework of what could be best medical practice.
the globe, the trend of and call for evidence-based approaches became more important, not only in academic practice but in medical practice altogether. In this regard, we received quite a strong message from one of the most prominent and respected pioneers in spine research, Professor Alf Nachemson from Göteborg, Sweden. After sending him the first edition of the English book for review, his answer was swift and to the point: “I will not read your book unless it has been scientifically proven.” Our first reaction was quite human, but giving Dr. Nachemson’s comments a second thought, we were markedly influenced by them, as was our further development. The first author returned from clinical practice and started his residency in neurology to obtain education and particularly scientific tools to investigate and fulfil Nachemson’s request. In this respect, the close collaboration with Manohar Panjabi and his research team, as well as the opportunity to perform cadaveric experiments in the highly sophisticated laboratory of the Moris Müller Institute in Bern was a lucky coincidence to the advantage of the development of Musculoskeletal Manual Medicine, which further contributed to our personal improvement of understanding and clinical skills. We realized, thanks to Nachemson’s hard lesson, that clinical experience—while serving as a good starting point—is not enough, and actually carries a risk of being led in the wrong direction.

The scientific approach, which we as authors of the current book implemented in the framework of our thinking, dominated our next steps with the intention to search for evidence of those phenomena which we felt by using our hands for diagnosis and treatment. The exposure as active members of the leading spine societies such as the International Society for the Study of the Lumbar Spine, the Cervical Spine Research Society, and the Spine Society of Europe, also influenced our development and, being confronted with spine surgery in particular, we learnt the limits of conservative approach including those of manual medicine. We respected the limits and, while understanding the great advantages of modern spine surgery, we discussed and recommended surgical procedures to our patients when necessary to reduce pain and improve function.

In 1997 we completely reworked and restructured the books and invited three new editors to enhance and improve the fifth German Edition with their experience and expertise. In this form the book became a major educational tool within the Swiss Medical Association of Manual Medicine, one of the most successful and active medical associations in Switzerland, which offers postgraduate teaching to doctors and physiotherapists in the field of musculoskeletal manual medicine.

The current English edition, Musculoskeletal Manual Medicine, has been completely reworked and integrates the newest aspects of clinical biomechanics, clinical practice, and evidence-based approaches to diagnose and treat musculoskeletal disorders conservatively, including the preventive programs.

For this new book, we invited Wolfgang Gilliar, DO, meanwhile close friend and exponent of osteopathic medicine and well-known not only in the USA but also in Europe, to be coauthor. Having translated our initial texts (Manual Medicine: Diagnostics and Manual Medicine: Therapy), being a physiatrist, and ever interested in furthering a meaningful understanding of principles and mechanisms, he developed his own personal approach and expertise from the start. His contribution to the new English edition has been major and the editors are very thankful that Wolfgang accepted the invitation to help shape and significantly contribute to the current book.

As editors and authors, we are highly satisfied with the several editions in different languages, with the first and current edition spanning 25 years. The new edition, which now has become an entirely new book, reflects our personal development as physicians, and at the same time is witness to the growing acceptance of this form of medicine within the medical community. We realize this brings with it the responsibilities we editors need to take into account when presenting new teaching material.

Truly this book has become a “trans” book: transcontinental and transdisciplinary, integrating neurology (JD), internal medicine (VD), physical medicine and rehabilitation (WG), rheumatology (WS), sports medicine (HS), and physiotherapy (TT). With the invaluable input from all the contributors, it is our sincere wish that the reader is stimulated to move beyond professional boundaries and look at the “soul” of the topic at hand.

This may be a topic—hopefully with more research results, ideally with its own new ideas and forms of investigation— in a book in another 25 years from now.

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