

FROM THE PRESIDENT'S DESK



Our Osteopathic Oath: A Pathway for Change

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2019–2020 ACOFP President

I have no desire to be a cat, which walks so lightly that it never creates a disturbance.

—Andrew Taylor Still, DO

During these unsettling and upsetting times, it is difficult to know what to say. We worry about offending others who do not agree with our opinions. But I dare to interpret the quote above from our osteopathic founder, A.T. Still, that sometimes it is necessary to create a disturbance. Sometimes we must face issues that make us uncomfortable.

Americans have been worried about the COVID-19 pandemic for months now. It has literally disrupted and disturbed almost every aspect of life in every community and industry. As if the quarantine and pandemic weren't causing enough stress, the social disturbances we recently witnessed across the country have multiplied the fear and anger and unrest.

These emotions are fueled by decades of injustice against community members of color. They have suffered physically, mentally and spiritually. They have not been afforded the same opportunities as have others. Lack of adequate financial resources has limited their medical, nutritional and educational opportunities. These systemic issues contribute to the worsening social determinants of health.

The osteopathic philosophy supports the idea of the unity of structure and function. The body is a unit, and the person represents a combination of body, mind and spirit.

—Osteopathic Pledge of Commitment

Sickness and pain contribute to increasing stress and anxiety. When a patient lives with constant fear and anxiety—whether they are scared of what might happen because of their skin tone, of the illness they are trying to ignore or of the pandemic that has disproportionately taken the lives of minority populations—it affects their entire being; body, mind and spirit. Because of this fear, people of color may not seek medical attention until their condition has become an emergency.

I will remember that I do not treat a fever chart, a cancerous growth, but a sick human being, whose illness may affect the person's family and economic stability. My responsibility includes these related problems, if I am to care adequately for the sick.

—Hippocratic Oath

Minority populations have a higher rate of morbidity and mortality in the United States. The latest overall COVID-19 mortality rate for Black Americans is 2.4 times as high as the rate for Whites and 2.2 times as high as the rate for Asians and Latinos. As of May 27, 2020, the mortality numbers make inequality very clear.

- 1 in 1,850 Black Americans has died (or 54.6 deaths per 100,000)
- 1 in 4,000 Latino Americans has died (or 24.9 deaths per 100,000)
- 1 in 4,200 Asian Americans has died (or 24.3 deaths per 100,000)
- 1 in 4,400 White Americans has died (or 22.7 deaths per 100,000)

Dramatic mortality disparities also exist for Indigenous residents in several states, especially Arizona and New Mexico. These states contain portions of the Navajo Nation, where the coronavirus outbreak has been devastating. In New Mexico, the Indigenous mortality rate is eight times as high as the White mortality rate. In Arizona, the Indigenous mortality rate is more than five times the rate for all other groups. With 315 Indigenous deaths between them, these two states alone account for more than two-thirds of all known Indigenous COVID-19 deaths.

I will prevent disease whenever I can, for prevention is preferable to cure.

—Hippocratic Oath

The challenge to the medical community is how to come together to address health disparities in our country. We need to find actionable, attainable solutions. We need to talk about disease prevention and lifestyle modifications that can help prevent diabetes, heart disease and other chronic disease states. We need to take a stance on the violence that leads to injury and death at a higher rate in minority populations. We can volunteer our time and expertise at free clinics for underserved communities. We can lobby for funding at the local, state and federal levels. We can donate to causes that support these populations or that work to find treatments and cures.

I will remember that there is art to medicine as well as science, and that warmth, sympathy, and understanding may outweigh the surgeon's knife or the chemist's drug.

—Hippocratic Oath

There are many underlying reasons why minority populations have been more susceptible to violence, chronic diseases and COVID-19. Comorbidities compromise their health and promote chronic disease.

The social unrest and protests are exacerbating the COVID-19 problem. At a time when people should continue social distancing, they have been gathering in the streets, desperately demanding change in how they are treated. Though people of all races have been active in these protests, the majority are from the Black community. There is a strong possibility of a spike in COVID-19 cases because of this need for action against inequality.

I will apply, for the benefit of the sick, all measures [that] are required.

—Hippocratic Oath

Though it may not be consciously intentional, implicit biases can often sneak their way into the treatment of patients. Multiple studies have shown that health care providers exhibit the same level of bias as the wider population. Implicit biases explain a potential dissociation between what a person explicitly believes and wants to do (provide equal treatment for all patients) and the hidden influence of negative implicit associations on their thoughts and actions (e.g. perceiving a black patient as less competent and therefore deciding not to prescribe medication to the patient).

I will abstain from all intentional wrong-doing and harm.

—Hippocratic Oath

This may seem obvious as physicians. The goal of our profession is to help others. But sometimes we must ask ourselves if our inaction or inability to speak up for those who do not have a voice is directly harming them. What is the result of our inaction? Will the patient still receive the care they need? Will it be equal to the care we give someone else?

I pledge to provide compassionate, quality care to my patients.

—Osteopathic Pledge of Commitment

As DOs, we must also remember the osteopathic principles that guide us. We need to remember our compassion and empathy, even when we're exhausted or when the patient is behaving in a difficult manner. We should try to imagine how scared a sick or injured patient may feel, especially now.

We pledge to partner with our patients to promote health. We pledge to display integrity and professionalism throughout our careers. These principles are the cornerstone of our careers but also can be applied to our personal relationships. They can be applied to other health care professionals, law enforcement officers, politicians and protesters as well. They can be applied to all humans.

I will remember that I remain a member of society, with special obligations to all my fellow human beings, those sound of mind and body as well as the infirm.

—Hippocratic Oath

Whether we lean to the left or right of the political spectrum, we treat all patients with respect. We should advocate for an appropriate and dignified approach to the treatment of immigrants. We should assist in our own communities to reduce the tension between the police and those who they are meant to protect. We should help to ensure that patients are not too scared to ask for the health care they need, during a pandemic or at any time.

Physicians have a duty to speak up when people are treated in ways that do physical and emotional harm. We can speak up for all children and respond when abuse is apparent. We have to educate others about the damage this does to all the family members. We can make the public and government aware of the unhealthy and unsafe treatment of marginalized populations. We can speak up about the emotional toll that regularly losing patients who were victims of violence takes on us as physicians.

We obviously cannot solve these problems alone, but it is important to leverage our role with patients and in our communities as best we can to help be one of many needed parts of the solution. We have a duty to protect the minds, bodies and souls of our patients.

Let us not be governed today by what we did yesterday, nor tomorrow by what we do today, for day by day we must show progress.

—Andrew Taylor Still, DO

Osteopathically yours,



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