As the premier scholarly publication of the osteopathic medical profession, JAOA—The Journal of the American Osteopathic Association encourages osteopathic physicians, faculty members and students at colleges of osteopathic medicine, and others within the healthcare professions to submit comments related to articles published in the JAOA and the mission of the osteopathic medical profession. The JAOA’s editors are particularly interested in letters that discuss recently published original research.

Letters to the editor are considered for publication in the JAOA with the understanding that they have not been published elsewhere and that they are not simultaneously under consideration by any other publication.

All accepted letters to the editor are subject to editing and abridgement. Letter writers may be asked to provide JAOA staff with photocopies of referenced material so that the references themselves and statements cited may be verified.

Readers are encouraged to prepare letters electronically in Microsoft Word (.doc) or in plain (.txt) or rich text (.rtf) format. The JAOA prefers that readers e-mail letters to jaoa@osteopathic.org. Mailed letters should be addressed to Gilbert E. D’Alonzo, Jr, DO, Editor in Chief, American Osteopathic Association, 142 E Ontario St, Chicago, IL 60611-2864.

Letter writers must include their full professional titles and affiliations, complete preferred mailing address, day and evening telephone numbers, fax numbers, and e-mail address. In addition, writers are responsible for disclosing financial associations and other conflicts of interest.

Although the JAOA cannot acknowledge the receipt of letters, a JAOA staff member will notify writers whose letters have been accepted for publication. Mailed submissions and supporting materials will not be returned unless letter writers provide self-addressed, stamped envelopes with their submissions.

All osteopathic physicians who have letters published in the JAOA receive continuing medical education (CME) credit for their contributions. Writers of original letters receive 5 hours of AOA Category 1-B CME credit. Authors of published articles who respond to letters about their research receive 3 hours of Category 1-B CME credit for their responses.

Although the JAOA welcomes letters to the editor, readers should be aware that these contributions have a lower publication priority than other submissions. As a consequence, letters are published only when space allows.

We Have Met the Enemy and He Is Us

To the Editor:

Reading the letter section in JAOA—The Journal of the American Osteopathic Association has become as entertaining as reading the same section in my local newspaper. There have been a number of recurring themes in recent JAOA editions, including debates over the use and efficacy of osteopathic manipulative treatment (OMT), changing our DO degree designation, and the Comprehensive Osteopathic Medical Licensing Examination-USA (COMLEX-USA) vs the United States Medical Licensing Examination (USMLE). All of these themes seem to be related to a crisis of identity in osteopathic medicine.

In addition to these JAOA letters, an article in a recent edition of the alumni newsletter of the A.T. Still University of Health Sciences-Kirksville College of Osteopathic Medicine discusses the diminishing use of OMT. According to the article, after osteopathic medical students get into their clinical years, they virtually never consider using OMT—and this avoidance of OMT apparently continues for the rest of their careers.

Houston, we have a problem!

In the February 2011 JAOA, an osteopathic medical student suggests a method of improving the examination process by allowing osteopathic medical students to take the USMLE as the main competency examination and then take an adjunct test to cover concepts unique to osteopathic medicine. His letter is followed by rejoinders from other authors defending the COMLEX-USA. Incidentally, the Kaplan board review process is all about examinations—not competency. Good physicians are born with it, while the rest study their books so that “no child is left behind.” Examinations are mandated by political bodies to certify that we can practice medicine, but the examinations are no guarantee of professional competency.

The letter by Arnold Melnick, DO, also in the February JAOA, makes an interesting point regarding the public’s confusion about what an osteopathic physician is. (Although osteopathic physician is the currently preferred term in our profession, I do not find the term objectionable.) Perhaps the public is confused about what DOs are because we are confused about what we are.

The various recent letters and articles on the apparent identity crisis in osteopathic medicine lead me to think of the cartoon character Pogo, who is famous for making the observation, “We have met the enemy and he is us!”

Arthur J. VanDerburgh, DO
University of New England College of Osteopathic Medicine, Biddeford, Maine

References
3. Magoun HJ Jr. Effects of rib raising on the autonomic nervous system: a pilot study using nonin-


