The second Osteopathic Collaborative Clinical Trials Initiative conference was held in Orlando, Florida, on November 2 and 3, 2000. The conference was sponsored by groups broadly representative of educational and research activities in the profession, including the American Association of Colleges of Osteopathic Medicine (AACOM), the American Osteopathic Association (AOA) Bureau of Research, directors of medical education and medical educators, the College of Osteopathic Family Physicians, and the American Osteopathic Healthcare Association. The group adopted the same format that was so successful in the first conference and picked up where it left off last year (JAOA 2000;100:234,237).

The conference organizers identified 11 ambitious objectives for this conference, which focused on disseminating information about research throughout the profession, facilitating coordinated activities within the profession, and establishing a foundation to develop a national center for distinctively osteopathic research.

The plenary sessions presented an overview of federal research programs relevant to those 11 goals. John Kylan Lynch, DO, Senior Staff Fellow, of the National Institute of Neurologic Diseases and Stroke, began by citing the general objectives of the National Institutes of Health (NIH):
- identify research findings that can be applied to the care of patients;
- promote effective ways to communicate biomedical innovation; and
- develop and recommend policies related to the conduct and support of biomedical and behavioral research.

Of the $24.4 million in total osteopathic research awards in 1998, $8.6 million came from NIH. Osteopathic manipulative treatment (OMT) studies involving postoperative atelectasis, pneumonia, pancreatitis, carpal tunnel syndrome, Parkinson’s disease, headache, cervical/thoracic pain, lumbar myalgia during labor, low back pain, knee osteoarthritis, hip arthroplasty, and otitis media have received funding from NIH and other sources.

Dr Lynch observed that evidence-based studies are needed now and should focus on specific disease processes. Second, pilot data should be gathered and discussed with NIH extramural program staff. Careful selection of an appropriate institute consistent with the research subject matter is essential.

New program officer at NCCAM
The new program officer of the National Center for Complementary and Alternative Medicine (NCCAM) is Christine H. Goertz, DC, PhD. The NCCAM is dedicated to exploring complementary and alternative healing practices in the context of rigorous science, educating and training CAM researchers, and disseminating authoritative information to the public and professionals.

The NCCAM targets five strategic areas: funding research, training CAM researchers, expanding outreach, facilitating integration, and practicing reasonable stewardship. Investing in research...
is defined as the encouragement of high-quality application submission in CMA priority areas by both CAM and conventional medical investigators. Although osteopathic medicine is considered mainstream, conventional medicine, the use of OMT is viewed as a CAM modality. The NCCAM strives to expand the scope of its extramural and intramural research portfolio and participation by research subjects. (Although federal spending for biomedical research has risen significantly over the past 5 years, funding for NCCAM-related research has increased to an even greater degree (Table).)

Dr Goertz indicated that NCCAM is committed to increasing the number, quality, and diversity of CAM investigators. This increase can be achieved through various programs such as predoctoral and postdoctoral fellowships, junior and mid-career faculty awards, curriculum development, and National Research Service awards. The strategic objective of expanding outreach includes enhancement of NCCAM’s ability to provide information to consumers, practitioners, and investigators, and establishment of an effective dialogue with these stakeholders. The NCCAM seeks to support the coupling of effective CAM and conventional practice with the coordinated interdisciplinary healthcare delivery system.

In closing, Dr Goertz offered several useful tips to osteopathic researchers in preparing applications. First, they should contact NIH program officers. Program staff can explain whether the research idea is of programmatic interest. They can identify potential collaborators conducting similar research, as well as Institutions that might be interested in the particular research topic. They can also suggest the best next steps to take if the application does not receive a fundable score. Dr Goertz reminded applicants to pay attention to the NIH review criteria. Several types of investigator-initiated grants are available through NCCAM, including research project grants (R01), academic research enhancement awards (R15), and exploratory/developmental grants (R21).

Focus groups
The mainstay of the conference activity was the establishment of six focus groups, which examined the topics of grantsmanship, an osteopathic research center, development of researchers, communications, research projects and protocols, and expenditure of osteopathic research center funds. The key elements that were addressed throughout the conference included building an infrastructure, planning grants, grant writing, and strategy development and resources.

A wide array of avenues should be pursued to develop competent osteopathic researchers. Suggestions include the establishment of mentoring programs, dedicating institutional resources to research, increasing priority of osteopathic manipulative medicine (OMM) research, promoting educational research at all levels of osteopathic professionals, and initiating research fellowships.

National center for research
Two study groups addressed the issue of a national center for research excellence in osteopathic medicine. The mission should be to explore and advance the study and application of the science of total healthcare management, emphasizing osteopathic principles, palpatory diagnosis, and OMT. A center would promote a culture of research within the osteopathic medical profession, coordinate research efforts, maintain a database for postdoctoral educational research, and develop appropriate research procedures and protocols.

Communication is key
Given the wide range of professional organizations and scientific disciplines represented at the conference, it is clear that communication is key. The research Web site at the AACOM can be accessed at www.aacom.org, then click on research section. Users will be surveyed for ease and frequency of use. Web site function should include a membership list and member information, literature information, and a directory of researchers, and mentorship information. The group recommended the development of an external supervisory board to facilitate profession-wide participation and involvement in the Web site.

The participants in the focus groups were enthusiastic about the progress made in these areas and encouraged by the momentum that has been established during the past 2 years. The greatest excitement is generated by prospects for a center for research in osteopathic medicine.