

Profile

David M. Richards, D.O.

by Carl Jón Denbow



During the respite which is known in academe as Christmas break, I had a chance to talk with Dave Richards, D. O., KCOM 1960, about his position at the new Ohio University College of Osteopathic Medicine. What I found was a dedicated, hard working physician who has firm ideas about where his profession should be headed and feels the directions to be taken are currently being molded and forged in its educational institutions.

Perhaps it should be said at the beginning that Dave is an enthusiastic person and when he speaks much of the intent of what he says comes not only from his actual words, but from the sense of caring and earnestness his voice conveys. He struck me as a man with a mission, a new breed of D. O. if you will, dedicated to teaching and to the educational enterprise—a type of person the profession is going to need more of to come through its current growing pains with strength and vitality.

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Dave says his philosophy of life centers around the idea that the more you give to other people the happier you are. Or, more succinctly, “Happiness is giving of yourself to other people.” Being involved in education, he feels, affords the opportunity to relate to many physicians and basic scientists who are dedicated to the same principle.

Ohio General Practitioner of the Year in 1977, Dave

has been at Ohio University since 1976 when he was recruited from his practice in Worthington, Ohio to serve as the first chairman of the school’s family medicine department. He was recently appointed associate dean for clinical affairs, replacing Frank Myers, D. O., who was named dean of the college.

“My perspective on the profession is broader now than when I was in general practice,” Dave said. “I understand much better what the profession is about because I’m sitting arm to arm with people like Phil Greenman, Paul Kimberly and Jim Stookey. Also I have the opportunity to look at our students, who often know nothing about the osteopathic profession when they come here, and see them learn about somatic dysfunction and treating the patient as a whole, and next year when our first class reaches its third year I’ll see them go out into the clinical arena and become part of what I believe in.”

It is obvious that Dave finds all this quite rewarding. He is particularly pleased with the efforts being made at OU-COM to integrate osteopathic theory and methods into the curriculum. “Personally, I feel you don’t just teach osteopathic theory and methods (OT&M) at 2:00 in the afternoon on Tuesday. It should be taught in every single conversation you have with a student—something about how somatic dysfunction relates to the disease being discussed.”

Physicians teach all the time, according to Dave; whether they are aware of it or not. He cites an example of a patient he saw shortly before I talked with him, who had a case of pneumonia, and to whom he was able to explain how her symptoms related to her disease and what factors went into determining her prognosis.

“This is teaching,” he said, “but still many doctors feel uncomfortable in an academic setting. We need to convince them that they can teach, because they have been doing it in their practices all along. Many other D. O.s, of course, have already become involved in the formal educational process, and are turned on by it—at the level of the full time academician, the preceptor training students in the office, the clinical clerkship and the hospital residency program. Also,



here at Ohio our physicians are integrated into a professional development program to teach us how to be better teachers. To me that is exciting.”

Another factor, which Dave implies will improve both the quality and the quantity of the profession’s teachers in the future, is what he sees as a greater commitment among today’s students to an academic lifestyle. He says they have broader backgrounds from undergraduate school than students of his day, and the large number with master’s degrees and doctoral degrees leads to an atmosphere of greater curiosity. Rather than just wanting to know what therapy works, he says, they want to know why it works.

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“On the other hand, these students realize the negative aspects of medicine much more than we did,” Dave said, “but despite this they are coming here to learn how to care for the patient. They know the public image of a physician is not as good as it once was; they know what socialized medicine is; they know what iatrogenic medicine is; they know what malpractice suits are; and, yet, they still want to become physicians. They are willing to dedicate their

lives to take care of sick people based on the osteopathic holistic concept.”

Dave’s own approach to patient care, and the one he tries to pass on to his students, can be summed up in a phrase he repeats often: “The care of the patient is caring for the patient.” He feels that the students he teaches are favorably disposed to this philosophy and that this fact explains, in large part, why they are studying osteopathic medicine. If the monetary motivation of large incomes is a major consideration, he says, it is well disguised.

Receiving his medical education in Kirksville, Dave says, prepared him especially well for his current position, located as it is in a small town rural atmosphere. “Even the availability of transportation is the same. It is difficult to get out of Kirksville and it is difficult to get out of Athens. However, there are a lot of opportunities in both places for growth. I couldn’t put a dollar value on what the experience in Kirksville means to what we are doing here.”

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Not only does Dave feel strongly about what his days at KCOM mean to him, but he also has ideas about what his alma mater should be doing now. “I think it is important for Kirksville to continue its leadership role with the other colleges, since it was the first school. And, I believe it is important for Kirksville to continue its emphasis on training family doctors.

“Further, I feel it is imperative for all our colleges to make every attempt possible,” he continued, “to substantiate with credibility the role of somatic dysfunction as it relates to the patient.” At Ohio, he says, they are trying to involve not only clinicians, but also basic scientists in osteopathic research. He thinks they are being successful in this effort which will “leave its mark” in somatic dysfunction research.

Dave also sees a new relationship developing between the osteopathic and allopathic professions, which is in part due to an increased interest among M. D.s in learning about OT&M. “The lines of communication are opening up, and some can interpret that as a threat that they are going to absorb us. We’re not absorbed if we’re strong, if we know what we’re doing and are dedicated to what we’re about. They have a lot to learn from us, and are eager to learn from us, since one out of every six patients that come into a family practitioner’s office have some sort of musculoskeletal problem. And, that’s where we are trained.”

As important as manipulative therapy and OT&M research are, Dave feels that osteopathic medicine must also continue its orientation toward family practice. His school exists, he says, only because of the track record of KCOM and other osteopathic colleges in producing rural family physicians. The legislature, he explained, thought the medical needs of the citizens of Ohio were not being met, and they decided to give D. O.s a chance based on that record.

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“With the advent of the new colleges and the increased acceptability within the nation as a whole, we have a tremendous opportunity to show what we are about,” Dave emphasized. “We need moral support, financial support, good communications and physicians becoming involved in the educational efforts of our colleges. With such cooperation we can grow to almost endless boundaries. I would hope that we who received a good education from Kirksville,



appreciate the fact, and have pride in what we're doing and show that pride by becoming involved.”

This, then, is Dave Richards, D. O., as he impressed me on that cold day in December—a man concerned about his profession, its educational institutions, its practitioners and the patients they serve. But a man whose concern is overshadowed by an infectious enthusiasm for the work that is yet to be done.

