



**Fédération Internationale de Médecine Manuelle -
Internationale Gesellschaft für Manuelle Medizin -
International Federation for Manual/Musculoskeletal
Medicine**

**Minutes of the 2012 FIMM General Assembly
Istanbul, Turkey convened at the Princess Hotel
September 20, 2012**

Secretary-General

National Society delegates from around the world convened in Istanbul to participate in the 47th FIMM General Assembly. All were invited by President, **Cihan Aksoy**, and our hosts, the Turkish Society of Manual Medicine (Manuel Tip Dernegi, MTD) to also participate in the International Scientific Conference on Manual Medicine that follows the General Assembly (September 21, 2012).

1. **OPENING OF THE GENERAL ASSEMBLY:** Acting FIMM President and Vice President, **Wolfgang von Heymann**, opened the **47th General Assembly of FIMM** at 09:20 am. He recognized that FIMM was founded in 1962 meaning that this is the **anniversary of 50 years of FIMM** existing as a federation; its first Congress being convened in 1965.
 - The first order of business for this General Assembly however was to note the very recent passing of our FIMM president, **Palle Holck, MD**, and to reflect on this loss. During the roll call or societal presentation, each society expressed their condolences to the president's family and to his fellow members of the Danish Society of Musculoskeletal Medicine.
 - The FIMM General Assembly also recognized the passing of the last of our FIMM Founding Members, **Robert Maigne, MD** (1923-2012).
 - **Agenda as Distributed in Advance:** No changes proposed
 - The GA elected two counters of the votes: **David Watson (Canada)** and **Jun Yoshida (Japan)**.

- 2a. **ROLL CALL and PRESENTATIONS** of the FIMM National Societies (see .pdf consolidation of the presentations at www.fimm-online.com ([National Society Presentations 2012](#))).
 - **Present – FIMM Executive Board Members:** **Drs. Wolfgang von Heymann, Michael Kuchera, Viktor Dvorak, Bernard Terrier, Mac-Henri Gauchat, Sergei Nikonov**
 - **Roll Call of National Delegates** (Note: dues have not been received from Belgium, the Czech Republic, New Zealand, Slovakia and Spain and some national society representatives were unable to attend this General Assembly (GA). This means that for this General Assembly there are 13 voting members from the National Societies of the countries in attendance. Five National Societies sent reports or letters however no Societies sent proxy letters for valid dues-paying members).
 - **Australia** (**Geoff Harding**, President of AAMM, delivered [annual report via Skype](#) but **did not remain for voting**).
 - **Belgium** (**No delegate attending; no dues paid; no vote**): Letter from Michel Dedee.
 - **Bulgaria** (**Ilya Todorov**, Secretary-General and **Todor Todorov**, President).

- **Canada** (**David Watson**, past president of the Canadian Association of Orthopaedic Medicine).
- **Czech Republic** (*no members attending; no dues paid, no vote*): email report sent from National Society president, Vlasta Tosnerova.
- **Denmark** (**Niels Jensen**, vice president of the Danish Society of Musculoskeletal Medicine).
- **Estonia** – *No representative present, no vote*: Letter from **Leili Lepick**.
- **Finland** (**Olavi Airaksinen**, President).
- **France** – *No representative present, no vote*; Delegate **Nadine Fouques-Weiss** did not know she was re-elected until too late to realistically attend): National Society's report was emailed and presented by Wolfgang von Heymann.
- **Germany** (**Ulrich Smolenski**, President attending with **Wolfgang von Heymann** as delegate).
- **Hong Kong** – *No representative present, no vote*. President **Andrew Ip** unable to attend. Letters sent from both HKIMM president and vice-president.
- **Hungary** – *No representative, no vote*: President, **Gábor Ormos** unable to attend. Letter sent.
- **Israel** (President **Simon Vulfsons** attending as voting member accompanied by **Yacov Fogelman**).
- **Italy** – *No representative attending, no vote*. Dr. **Guido Brugnoni** had a masters course to attend to at this point in time. Italian dues have been paid but his report has been delayed and has not arrived. Letter from National Society section president, Guido Brugnoni, expressing condolences.
- **Japan** – (National Society delegate, **Shoichi Tsuchida**, was unable to attend but per his letter, the Japanese Medical Society of AKA report was presented by **Jun Yoshida** who was authorized to be the National Society's voting member).
- **Kazakhstan** – (**Nadezhda Karasnoyanova**, President of the Kazakhstan Association of Manual Therapists and Osteopaths).
- **Netherlands** – (**Sjef Rutte** attending for the Dutch Society of Ortho Manual Medicine).
- **New Zealand** – *No representative attending, no dues, no vote*: President, **Charles Ng** for the NZAMM sent a letter as did James Watt who has provided significant input to the GA committees and boards in the past.
- **Poland** – *No representative attending, no vote*; National Society president, **Jerzy Stodolny**, is not attending, no report.
- **Russian Federation** – (Professor **Anatoly Sitek** attending with **Sergei Nikonov**).
- **Slovak Republic** – *No representative attending, no dues, no vote*. (National Society president, **Stefan Bodnar**, is not attending and no correspondence was presented).
- **Spain** – *No voting representative attending, no dues, no vote*. National Society Vice President **Victoria Sotos-Borras** sent an email report. While she did not appear in person, she later joined via Skype interaction for brief interaction with the General Assembly.
- **Switzerland** – (**Marc-Henri Gauchat** reporting and serving as the voting member with **Bernard Terrier** and **Viktor Dvorak** attending in their FIMM officers' capacities).
- **Turkey** – (**Cihan Aksoy**, President of the host's National Society, **Manuel Tip Dernegi** or MTD)
- **USA** – (**Richard Feely**, Past president of the American Academy of Osteopathy attending as the voting member with **Michael Kuchera** in his FIMM officer's capacity).

2b. Presentations of the Representatives of the National Societies (limited to 4 minutes / delegate)

National Powerpoints used to present to this General Assembly have been compiled to provide details not presented here; the **.pdf file** of this powerpoint compilation is available for download at:

www.fimm-online.com ([National Society Presentations 2012](#)).

- **Turkey** (Report presented by **Cihan Aksoy, MD, PhD** [president]: The national society representing FIMM in Turkey is **Manuel Tip Dernegi** (MTD). This Manual Med association began in 2002 with professional interactions with **Prof Todorov**. There are now some 38 members who have indicated they will pay dues to this young organization. Since 2008 they have worked with Bilimsel Tamamlayıcı Tıp (BTR=Scientific Complementary Medicine and Regulatory Association) in conjunction with **Prof. Nazlikul** but they are actively seeking new teachers and new techniques to supplement the basic skills they have so far cultivated. Such a proposal from the MWE branch of the DGMM (Germany's FIMM National Society) was extended to the MTD through a letter from **Wolfgang von Heymann** (see .pdf of the National Societies' Annual Reports – Turkey). It was noted that **Prof.Nazlikul & Prof. Aksoy** will co-chair an International Scientific Conference on Manual Medicine immediately following this General Assembly with lecture/workshop contributions to be offered by FIMM leadership (**Drs. Von Heymann [Germany], Nikanov [Russian Federation], and Kuchera [USA]**) as well as from **Ilya Todorov [Bulgaria]; Maxim Bakhtadze, Kiril Kuzminov, and Sergei Kanayev [Russian Federation]; and Nadezhda Krasnoyoroova [Kazakhstan]**. Other delegates staying for the program will also provide insight into their country's manual medicine infrastructure. Supporting the evidence base for manual medicine and this small but enthusiastic manual medicine group was one of the main intentions of accepting their invitation last year.
- **Australia** (**Geoff Harding** delivered his report via SKYPE technology): The Australian Association of Musculoskeletal Medicine (AAMM) was founded in 1971. Of **n=183** members on their mailing list, 40 practice full-time M/M musculoskeletal (manual) medicine. They work closely with the New Zealand Association of Musculoskeletal Medicine and the Australasian Faculty of Musculoskeletal Medicine. See the .pdf copy of this report at [link](#). The major concern expressed was that few younger physicians were taking up Musculoskeletal Medicine (with its included manual medicine) while Musculoskeletal PAIN was being invaded by pain management physicians using radiologically-guided needle intervention and conventional pharmacological approaches without knowledge or application of manual techniques.
- **Belgium**: Letter from Michel Dedée (see .pdf copy at [link](#)).
- **Bulgaria** (**IlyaTodorov** [Secretary-General] for **Todor Todorov** [President]):The Bulgarian Society for Manual Medicine (BSMM) reports **n=35** members and uses three cycles of 58 hours each in education. Teachers are hard to find.
- **Canada** (**David Watson**, Delegate): Craig Appleyard sends greeting (another conflict of multiple meetings). Long time FIMM GA delegate and North American representative, Don Frasier, MD died age 84 in 2010. The CAOM has **51 members** (mixed group of GPs and Pain Management physicians, etc) The Canadian College of Osteopathy (Quebec) allows MDs to attend and consists of a structured 5-year program with a Thesis. The program leads to "DOMP" (Diplomat of Manual Practice) with a bachelor of honors in osteopathy.
- **Czech Republic** (**Vlasta Tosnerova**, President): See .pdf copy of emailed report at [link](#) no discussion of dues or membership numbers in report this year.
- **Denmark** (**Niels Jensen**, Vice-President; Delegate and Vice-President presenting): The report began with an account of recently passed member and FIMM President, PalleHolck. (See .pdf copy of their report at [link](#).) The Danish Society for Musculoskeletal Medicine (DSMM <http://www.dsmm.org>) reports membership of **n=680** (down from 702 due to retirement). Most

are General Practitioners but there are also rheumatologists, orthopedists, and radiologists (etc). 74 members garnered “300 hours” of 45-minute standard credits leading to a “diploma”.

- **Estonia, not present:** A letter from EMSS President, **Leili Lepik**, noted the 20-year history of the manual medicine in Estonia (see .pdf copy at [link](#)). Major news in her letter was to note decline in membership to only 10 constant member and removal of “manual therapy” from official list of health care services in 2006. Since 2007 the name was taken by the Estonian Manual Medicine and Chiropractic Association and is broadly misunderstood by public and government alike. Tartu University this year closed the manual therapy courses for physicians (which had trained about 20 physicians per year but did not result in national society growth).
- **Finland (Olavi Airaksinen**, President, presented their strong national society’s annual report--see .pdf copy at [link](#)). Membership is **n=260**.
- **France (Nadine Fouques-Weiss** delegate of SOFMMOO again had travel problems and so emailed her report to be presented by **Wolfgang von Heymann**. (See .pdf copy at [link](#)) to present her report.) Her report did not contain the number of members this year. She did note the former role and recent passing of FIMM Founding member, **Robert Maigne**. In her news, she pointed out that since 2007 non-MD osteopathic practitioners can legally practice leading to many private schools added to the 15 universities providing post-graduate education for Manual Medicine (still not recognized as a European specialty). A route exists for an MD to ask the Prefect to recognize and validate the MM diploma as an osteopathic diploma (as long as they can guarantee they have been taught 1250 hours in osteopathy). She points out now that one university (Rennes) has started delivering a osteopathic university diploma to non-MDs.
- **Germany** (DGMM president, **Ulrich Smolenski**, asked DGMM Vice-President, **Wolfgang von Heymann**, to present the report of the German national society): Total membership is **n=5301**. The DGMM umbrella organization is made up of the ÄMM (**n=826**), the MWE (**n=2938** fully qualified physicians) and the German Society of Musculoskeletal Medicine (DGMSM [former the FAC] **n=1527**). In 2009, the German Chamber of Physicians decided that “Osteopathy is part of Medicine” that established a need to set up qualifications and certificate regulation as well as a curriculum to be defined for Physician level. The DGMM will work within the limitations set by this regulatory Chamber which has ruled that Osteopathy shall “not be a specialty” but an additional therapeutic option and used immediately, not just in hopeless cases. This currently requires that physicians first earn a certificate in the subspecialty of manual medicine (320 hours...but also already includes 60 hours of introduction to osteopathic practices) and then another 160 hour certificate leading to an A-Diploma (by the Chamber of Physicians) and more education (B-Diploma). This totals 720 hours (320 M/M & 400 osteopathic) with 320 hours diploma hours required. The acknowledged task for 2012-13 is to prepare the curriculum of 160 hours to teach osteopathic techniques, based upon 60 hours existing background in the 320 hours M/M curriculum for their subspecialty certificate. This year the DGMM organizations agreed that another 200 hours of modular curriculum would be proposed leading to a certificate of the Chamber of Physicians based upon 600 hours training assessed by an official examination. (see .pdf copy of the DGMM report at [link](#)).
- **Hong Kong:** Letters from Hong Kong Institute of Musculoskeletal Medicine president (**Andrew Ip**) and Vice-President (**Stanley K.H. Lam**) may be seen on the .pdf copy at [link](#). Established in 2005, they have 49 members. 22 members have enrolled in the second Certificate Course of Practical Musculoskeletal Medicine that begins this month. They recently collaborated in education with North American teachers from the American Association of Orthopaedic Medicine (a former FIMM national society). They plan an outreach for M/M to Macau in 2013 and basic courses to rehab doctors in the Sichuan Province in China. A key comment in their report was, “*We shall promote clinical research. We believe research will sharpen our vision, maintain the standard and upkeep the momentum of continuing education. We envisage*

musculoskeletal medicine will become one of the most important disciplines among the medical arena in the near future.”

- **Hungary (Gábor Ormos)**: Brief letter of regrets and condolences from **Gábor Ormos** and notation of the “special relationship” between the Hungarian and Turkish peoples (see the .pdf copy at [link](#)) Of note is the news that M/M has been accepted as Evidence-Based Medicine by the Hungarian Scientific Academy who also enrolled it as a CAM therapy. By Hungarian regulations, CAM therapies performed by MD physicians are taught only at medical universities.
- **Israel (Simon Vulfsons** presenting; see the .pdf copy at [link](#)): The Israeli Society of M/M (ISMM; לרפואה מוסקולו-סקלטלית ההבריה ישראלית) has had a sizable growth to a membership of **n=81 MDs** and **56 non-MDs**. The society has several modular courses and is currently focusing on pain and on fascia (“the next frontier”). Their vision remains, “Musculoskeletal education for every doctor in Israel.” A later agenda item will discuss.
- **Italy**: See this brief .pdf copy of the note at [link](#).
- **Japan (Shoichi Tsuchida** [delegate] authorized Mr **Jun Yoshida** to represent the Japanese Medical Society of Arthrokinematic Approach [AKA]): See their .pdf report at [link](#). It notes their journal, books, and educational programming needed for accreditation. The approach was trademarked in 2010 as the AKA-Hakata method. The group has **n=433** members.
- **Kazakhstan (Nadezhda Karasnoyanova** presenting): The official name of FIMM’s national society representative for this country is The Kazakhstan Association of Manual Therapists and Osteopaths because their members include osteopathic method; last year they produced a book on MM and Osteopathy – this year there is a new book on Visceral Osteopathy following a visit from J.-P. Barral. The Association has **n=45** members. Their November scientific conference took place in Almaty and they invite our participation for another international conference there in October 2012.
- **Netherlands (Sjef Rutte** presented; **Jacob Patijn** was present as well): The Dutch national society is De Nederlandse Vereniging van artsen voor Ortho Manuele Geneeskunde (NVOMG) has a reported **n=139 members** most practicing M/M exclusively; they have 12 new students for a 2-year full-time education arranged around the Royal Dutch Medical Society of Specialists (KNMG) and the CanMEDS Physician Competency Framework. He noted that beginning in January 2012, CAM-MDs are obligated to pay a 21% value-added tax (VAT). See .pdf copy of the Dutch national society’s presentation at [link](#).
- **New Zealand** (Letters were forwarded from president, **Charles Ng** and FIMM contributor, **James Watt** for the NZAMM perspective. See their .pdf copies at [link](#). In essence, they would like to examine and discuss the FIMM Guidelines on Basic Training and Safety prior to continuing their FIMM membership.
- **Poland** (No report; no representative).
- **Russia** (President **Antoli Sitel** presenting with **Sergei Nikonov** translating); “The Russian League of Professionals in Manual Therapy” has **n=429** members. See their national society’s report (.pdf copy) at [link](#). It discusses the “Unified Postgraduate Program in Manual Medicine” (576 hours including 258 hrs of lecture; 290 hrs of practice; 28 hrs of testing and an additional recertifying rate of 144 hrs every 5 years). The report has CT and ultrasound research and a discussion of the Specialist in Manual Therapy being an important link in the Russian Federation between the neurologist and the neurosurgeon.
- **Slovak Republic** (No representative so there was no discussion of numbers of members, why dues were not submitted, etc).
- **Spain** (emailed report was presented by Wolfgang von Heymann who noted that Spanish national society vice-president **Victoria Sotos-Borrás** had become president of UEMMA; she subsequently also presented via Skype on the education of teachers sometime after this report): The Sociedad Española de Medicina Ortopédica Osteopática y Manual (SEMOOYM)

has n=96 members (most practicing Rehabilitative Medicine). See the .pdf copy of her emailed report at [link](#).

- **Switzerland (Marc-Henri Gauchat)**: The Swiss Medical Society for Manual Medicine (SAMM), has a physician membership of n=1274. SAMM's president is **Ulrich Böhni** – he has written a new standard book. In accordance with the Swiss Medical Association (FMH), they provide manual medicine education and CME. Their College of teachers (17 members) offer 8 basic courses (conducted in French and German); this is 320 hours (8 times 4 days over 2 years) in 8 modules plus a final exam resulting in an official Certificate of Competence in M/M (good for 5 years prior to recertification). Their yearly congress (Cervical Spine) will take place in Interlaken. See their .pdf report on [link](#).
- **USA** (AAO President **Richard Feely** with **Michael Kuchera**): The American Academy of Osteopathy (AAO) celebrated its 75th Anniversary; it is growing with a total membership of n=7959 of which 6306 are pre-doctoral osteopathic medical students. Physician membership is n=1675 (1504DO&62 MD). Neuromusculoskeletal Medicine (NMM) is recognized by state and national governments as a primary specialty. See the USA national society's .pdf presentation dealing with mission, emphasis on core competencies in predoctoral and postdoctoral training, and research emphases at [link](#); Dr. Feely also described the progress on the AAO's new Foundation for Osteopathic Research and Continuous Education (FORCE).

FIMM Member Websites

Australia: Australian Society of Musculoskeletal Medicine (AAMM)

<http://www.musmed.com>

Australian Faculty of Musculoskeletal Medicine (AFMM)

<http://www.afmm.com.au>

Austria: ÖsterreichischeÄrztegesellschaftfürManuelleMedizin.V. (ÖÄMM)

<http://www.manuellemedizin.org/>

Canada: Canadian Association of Orthopaedic Medicine (CAOM) /

Association Canadienne de MédecineOrthopédique (ACMO)

<http://www.caom.ca>

Denmark: Dansk Selskab for MuskuloskeletalMedicine (DSMM)

<http://www.dsmm.org>

Estonia: EestiManuaalseMeditsiiniSelts (EMMS)

<http://www.manuaalmeditsiin.ee>

Finland: SuomenManuaalisenLääketieteenYhdistys SMLY

<http://www.smly.fi>

France: Société Française de Médecine Manuelle Orthopédique et Ostéopatique

(SOFMMOO) <http://www.sofmmoo.com>

Germany: Deutsche GesellschaftfürManuelleMedizin (DGMM)

<http://www.dgmm.de>

Hong Kong: The Hong Kong Institut for Musculoskeletal Medicine hkIMM

<http://www.hkimm.hk/>

Israel: Israel Society of Manual Medicine (ISMM)

<http://www.ismm.org.il/>

Italy: SocietàItaliana de MedicinaFisica e Riabilitazione (SIMFER)

<http://www.simfer.it/?SEZ=7&SOTTOSEZ=10&ID=30>

Netherlands: Nederlandse Vereniging van artsen voor Ortho- Manuele- Geneeskunde

(NVOMG) <http://nvomg.artsennet.nl/De-vereniging.htm>

New Zealand: New Zealand Association of Musculoskeletal Medicine

<http://www.musculoskeletal.co.nz>

Poland: Polish Medical Association of Manual Medicine (PTLMM)

<http://www.medycyna-manualna.med.pl/>

Switzerland: Swiss Medical Association for Manual Medicine (SAMM)

<http://www.samm.ch>

USA: American Academy of Osteopathy (AAO)

<http://www.academyofosteopathy.org>

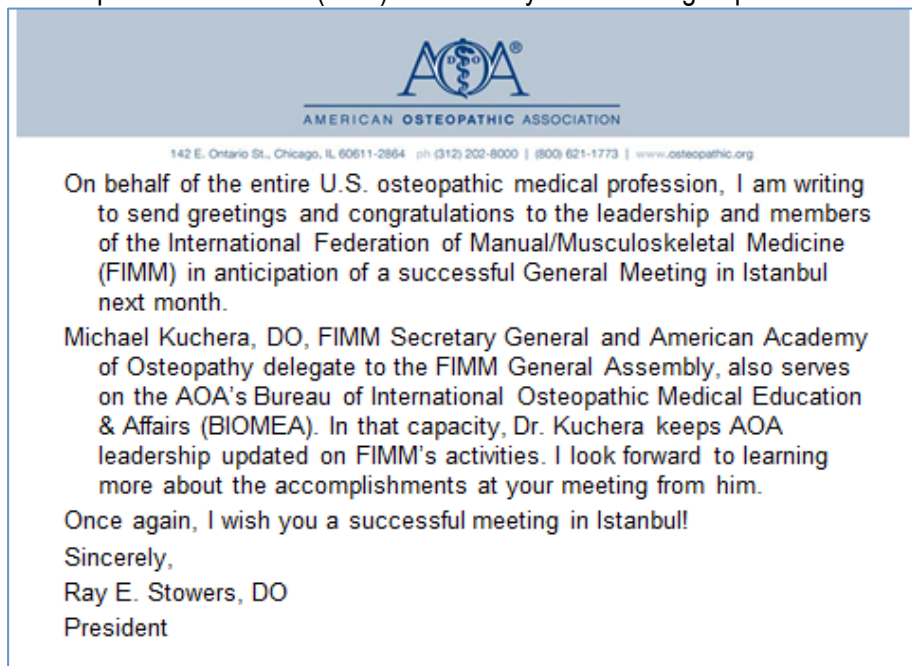
3. Matters arising from the minutes of the last General Assembly (Potsdam)

- See FIMM-NEWS Vol.19, No 1,p 12-47
- **VOTE: Minutes unanimously passed as previously and electronically distributed.**

4. Report from the Vice President (**Wolfgang von Heymann**)

- The Vice President's Report's major points include:
 - Dr. von Heymann met in February with Health Policy and Education Board directors in Zurich at which time the *Guidelines on Basic Training and Safety in M/M Medicine* draft v1.70 was reviewed. New distribution of the revised draft was timed to provide as much input as possible to represent the experience of as many groups as possible.
 - The health of President Palle Holck was a serious concern and the Vice President had a phone conversation with him in June where President Holck expressed the potential to continue. He reported that he had improved and felt he could take on more again.
 - Dr. von Heymann attended the ESSOMM in Rome August 31 – September 1, 2012 (two days). This semi-autonomous group is made up of organizations consisting of more than 100 MM-trained individuals that meet the FIMM 300+ hour educational minimum bar. (There are 10 member organizations that meet these criteria). An Executive Board & and Advisory Board have been established for ESSOMM and discussions could lead to increased commonalities in MM curricula.
 - ESSOMM Members (Rome 2012):
 - AEMM (D), President Johannes Buchmann
 - AEMKA (D), President Stephan Martin
 - AITEDOMM (I), President Manlio Caporale
 - AMTVDNS (BG), President Marietta Karadjowa
 - DGMSM (D), President Mathias Psczolla
 - DSMM (DK), Vice President Niels Jensen
 - MWE (D), President Wolfgang von Heymann
 - ÖÄGMM (A), President Hans Tilscher
 - ÖAMM (A), President Rudolf Lackner
 - SAMM (CH), President Ulrich Böhni
 - ESSOMM Executive Board:
 - Hermann Locher (D)
 - Ulrich Böhni (CH)
 - Federico DiSegni (I)
 - 1. Wolfgang v. Heymann (D)
 - Michaela Habring (A)
 - ESSOMM Advisory Board
 - Markus Schilgen (D)
 - Alexander Lechner (A)
 - Lothar Beyer (D)
 - Niels Jensen (DK)
 - Wolfram Linz (D)

- The ESSOMM Second International Instructor Program (in Rome) included topics on: Health Policy information on UEMS, Manual Medicine and Translational Research, Not-sufficiently-classified Low Back Pain, Contraindications/ precautions to cervical HVLA-manipulations, a discussion on “What do we really know about the SIJ?” and Presentations of specific manipulation techniques for SIJ, cervical and lumbar spine.
 - For ESSOMM the Multidisciplinary Joint Committee (MJC) activity is possible within UEMS activities, giving MM-Medicine the voting power of a section. As a full membership for FIMM as a worldwide operating federation is impossible, the aim of setting up the semi-autonomous European subgroup was finally achieved. “Specialty status” must exist in ¾ or more of its EU nation representative societies for a group like UEMS to become a separate section, which cannot be reached. MM members of FIMM are encouraged to join the MJC process by supporting ESSOMM, as this would be good for MM in Europe.
 - The MJC as championed by sports medicine is the model that manual medicine seeks. UEMMA applied but no information was presented by Teyssandier to UEMS at their request, so that path still open when ESSOMM presents in October. A vote for UEMS as an interdisciplinary subspecialty organization to become a Multidisciplinary Joint Committee member could have been considered but was not on the agenda as such. This will be decided at the next meeting in Larnaca/Cyprus this autumn.
- A letter wishing the success of this General Assembly sent by the president of the American Osteopathic Association (AOA) was read by WvH to the group.



He expressed his view that coming from the president of the largest group of manual medicine doctors in the world (nearly 80,000 physicians), that such positive recognition is something that FIMM should continue to cultivate.

- WvH is concerned that we cannot split our energies: IAMMM; UEMMA-ESSOMM, UEMMA & more societies ... and to do such would require changes in bylaws. We need to unite the forces in M/M Medicine and may instead wish to build regional subgroups. Models of cooperation need to be found:
- Joined meetings between FIMM and IAMM

- Cooperation between UEMMA and ESSOMM
- More societies per nation, changing bylaws to encourage inclusion rather than exclusion of MM groups
- Regional subgroups (such as ESSOMM) might be advisable to revisit.
- **VOTE: Move to accept Vice-President's Report: Passed unanimously.**
- Dr. von Heymann closed by thanking the rest of the Executive Board for their support during the transition: Michael Kuchera, Secretary-General; Bernard Terrier, Chairman of Health Policy Board; Marc-Henri Gauchat, Chairman of Education Board; Sergey Nikonov, Science Officer; Viktor Dvorak, Treasurer.

5. Report from the Secretary-General (Michael Kuchera)

- Throughout 2011-2012, the Secretary-General was quite active in teaching and research related to promoting a better understanding of manual medicine.
 - He was on the Scientific Committee and a moderator for the **International Fascial Research Congress (Vancouver, British Columbia, CANADA)**. FIMM was an organizational sponsor at his request. Over 800 attended this Congress where scientific underpinnings for many manual techniques were presented.
 - Eleven **Research Presentations** were delivered by the Secretary-General in 2011-12:
 - IAMMM – 9/11 Copenhagen
 - Nordic Congress – 9/11 Copenhagen
 - AOA Scientific Convention – 10/11 Orlando Florida
 - OsEAN /OIA (Kappa Workshop) – 10/11 Potsdam
 - MWE Annual Meeting – 10/11 Berlin
 - London School of Osteopathy – 12/11 London
 - AAO Convocation – 3/12 Louisville KY
 - International Fascial Research Congress – 3/12 Vancouver
 - National Osteopathic PM&R Conference – 4/12 Philadelphia
 - American Astronautical Society – 6/12 Denver (Paper)
 - ATSU-KCOM & West Point Collaborative Training – 6/12
 - Thirteen (13) twenty-hour national/international invited programs (260 hours):
 - MWE/DAAO – 10/11 Isny Germany
 - MWE/DAAO – 10/11 Bad Iburg Germany
 - MWE/DAAO– 10/11 Bad Iburg Germany (X2)
 - MWE/DAAO – 11/11 Bad Iburg Germany (X2)
 - MWE/DAAO – 01/12 Bad Iburg Germany (X2)
 - MWE/DAAO – 06/12 Bad Iburg Germany (X2)
 - AAO Systemic Dysfunction – 7/12 New York
 - MWE/DAAO – 07/12 Bad Iburg Germany (X2)
 - The Secretary-General encouraged National Society representatives to encourage qualified scientists and educators to apply for IAMMM membership.
- Final symbolic transitional observations were offered by the Secretary-General:
 - In Istanbul, the **bridge** next to the conference centre could represent many things:
 - In reality, it links 2 continents and in many contexts, it “bridges” between the past &the future.
 - Sadly, two FIMM leaders “crossed over” this year – an active founding member and our current president.
 - As FIMM chooses to transition, the analogy of the bridge raises many questions: Where are we to go? Who will help direct traffic? What future will we build on the past? Can we afford to pay the tolls to get there?



- What do I consider to be our best opportunities for a meaningful transition? It is vital that FIMM do what it can to insure that MM Medicine is and remains relevant. It is time to take an active and proactive role in shaping Health Policy: We need to complete our Health Policy document & agree upon a “White Paper” regarding its implementation.
- I’m not unique. In this GA, many are actively involved in teaching; several are top leaders of the International Academy of Manual / Musculoskeletal Medicine; and many are active in MM Research. You all give of yourselves to your patients; that you are here: testament to commitment to advance MM.
- **VOTE: Secretary-General’s report unanimously accepted.**

6. Report from the Treasurer (Victor Dvorak)

- **2011: The overall result for the year 2011 is positive.**
 - 25 Member Societies representing about 12,000 physicians have contributed.
 - The aim to get budget balanced (calendar-year–running-costs for basic expenditures and extra cost for projects) was achieved.
 - Why: There was more income in than budgeted.
 - The result is a surplus of 4,434 Euro (including the debts).
 - Assets on accounts are 30,155 Euro.
 - Question from the Assembly on past deficits: are these all paid off? Yes, all paid off.
 - Question from the Assembly on debtor countries: Even if they leave FIMM, they are expected is to pay their debts.
- **2012: Preliminary report to-date.**
 - FIMM cut down on projects as decided. No surcharge will therefore be requested.
 - Thanks to good organisation of the Turkish Society for Manual Medicine the cost of an expensive city (Istanbul) was less expensive than thought and the GA 2012 therefore costs less than budgeted.
 - An overall result of 4,000 Euros is expected.

7. Report of the Auditors

Todor Todorov presented the auditors’reports (Craig Appleyard absent, but his written report sent and read) – there was no problem with bookkeeping, the documentation was correct and complete.

- Both reports were approved as written/presented
- **VOTE: Passed: Unanimous 13-0-0**

8. Election/confirmation of the Auditors

- **VOTE: Both auditors wish to continue (no floor nominations): Unanimous (13:0:0) approval to elect Todor Todorov and Craig Appleyard as Auditors for 2012.**

9. Report from the Chairman of the Education Board (Marc-Henri Gauchat)

- Russian group asked to replace Maxim Bakhdatze for Vladimir Bartashewich...(13-0-0)
- Members participated in Health Policy development rather than Education Board work which was less important
- New propositions in HPB document will need to adapt FIMM Basic Syllabus and Glossary (possible by e-mail activity, no face-to-face meeting necessary)

10. Report from the Chairman of the Health Policy Board (HPB) – Bernard Terrier (5th report)

- Report about the Board activities
 - Recalling the Origins and Progression of this HPB Project

- **Ongoing projects including budget request included in the 2012 Budget**

- Two messages that are favourable:
 - Task of HPB is 98% finished with mandate started in 2008
 - HPB Director will not read the Guidelines as they comprise 53 pages

All national societies received v1.70. All delegates confirmed to have received the electronic version by e-mail and do not need a printed version. **Terrier** thanked Turkey as hosts for the last meeting of the Board the previous day. As the General Assembly has guided the paper as an extensive consensus document the national FIMM member societies will receive the next revised version in the first half of 2013 to be discussed again and then finally voted on during the 2014 GA.

Synopsis: The document already differentiates four levels of education and training: **Undergraduate, Facility, Capacity, and Specialty**. To finalize the document, there is some additional work needed on the **Introduction** and the chapters on **Contraindications, Complications, and Safety** as well as on the **Annexes** and the **References**.

The HPB-Director noted that the term “**MM Medicine**” throughout the document means “Manual & Musculoskeletal Medicine” and noted with respect to the Prague 2011 meeting that the HP Board accepted the proposal of **James Watt (NZ)** to focus just on the Manual Medicine toolbox within the Musculoskeletal Medicine Specialty syllabus.

Time table for further work on the document:

- Reading and completing Safety chapter and comments due by Oct 7, 2012
- **Version 1.76** will be sent to FIMM national member societies by Oct 11, 2012. **PLEASE RESPOND, WE NEED YOUR SUPPORT**
- Society deadline is Nov 30, 2012
- **Version 1.82** will again be sent to all national member societies and published on the **FIMM website** in February 2013 for final checking
- **Version 2.0** will be ratified by the FIMM GA 2014 and then be published.
- Implementation of the **White Paper, Kuchera** is working on (and maybe Simon Vulfsons will help) (see .pdf version June-2013)

Terrier thanked all FIMM national member societies for their cooperation in compiling the Guidelines.

- **VOTE: The Health Policy Director’s report was accepted unanimously (13-0-0)**

11. Report from the Science Officer of the Executive Board (**Sergei Nikonov**)

It was a hard work to find results of scientific work being appropriate to be presented in Turkish Society meeting. The final scientific program compiled for the International Conference an MM Medicine consisted of these presentations:

- **Michael L. Kuchera:** The Dirty Half-Dozen: Six Somatic Dysfunctions Involved in Chronic Recurrent Low Back Pain
- **Wolfgang von Heymann:** RCT-Study on acute LBP in comparison manipulation to NSAID and placebo
- **Maxim Bakhtadze:** Cerebral perfusion in patients, suffering from chronic neck pain
- **Cihan Aksoy:** Common procedures combining Manual and Physical Rehabilitation Medicine
- **Sergey Nikonov:** Manual therapy in lumbar compression syndromes, caused by disc herniation (posterior lateral and posterior medial).
- **Dimitry Bolotov:** Manual therapy tactics in chronic headache treatment

- **Hüseyin Nazlikul:** Segmental correlations and the role of the autonomous nervous system in segmental dysfunction
- **Ilia Todorov:** Clinical reliability of the most commonly used practical tests for diagnosis of the functional disorders of the sacroiliac joints right after manual treatment
- **Sergei Kanayev:** Carpal channel syndrome. Diagnostics and Manual therapy
- **Wolfgang von Heymann:** Indication/contraindication to MM manipulation therapy
- **Michael L. Kuchera:** Lymphatic Pump Manual Treatment: Implications in Pain, Inflammation, and Vascular-Immune Function
- **Nadezhda Krasnoyarova:** Manual therapy tactics in spine disorders treatment
- **Kirill Kuzminov:** Ultrasound diagnostics of structural changes of the intervertebral disks of lumbar spine in manual therapy
- **VOTE: The report of the FIMM Science Officer was accepted.**

12. Decision on the membership fees for the next year (See # 7 above):

The treasurer FIMM **Victor Dvorak** had already presented his slides for the 2013 Budget

- Simon Vulfsons discussed the question for potential for outside funding. No decision was taken on this proposal.
- At the actual state of FIMM an outside sponsor was estimated to be most unlikely. In the past the FIMM Foundation failed to bring in significant monies. May be a Task Force (**Bernard Terrier**) can start the discussion of the needs for extra monies
- The Executive Board recommends to leave dues as same (without additional surcharge) for 2013
- **Vote: budget and membership fees accepted unanimously as proposed by the treasurer (13-0-0)**

13. **Membership (National Society admission presentation and vote):** No application for membership was submitted. No national member society offended the bylaws, so no discussion on exclusion was necessary.

14. Elections – None this Year

15. Date and Place of the General Assembly 2012

Israel applied to be the host in 2014 in 2012; there has been an indifferent response made by President Palle Holck, but with his illness this application was not pursued further.

- **Simon Vulfsons:** Jerusalem has usually quite pleasant weather in October and November. There is not a special personal danger coming to Israel although it cannot be denied it is in the centre of a site where a bomb is not completely unrealistic. Other cities to meet would be Haifa or Tel Aviv. As the arrangements for meetings – GA in combination with board meetings in advance and the Society invitation in the night prior to the GA – must be completed as early as possible, the GA would prefer a meeting between the end of September and the end of October.
- **Niels Jensen:** Denmark last year also applied to become host for the GA in 2013; they still could see whether this is possible. But with the passing of President Palle Holck a lot of groundwork has to be done. Therefore the DSMM would prefer to propose 2014 to host the GA in Denmark.

- **Vote: GA 2013 in Israel (Jerusalem or Tel Aviv) during first two weeks in October: accepted 11-0-1 (Germany abstained)**

16. Any other business

- **Bernard Terrier** asked the GA permission to form a task force for elaboration of further strategy of FIMM including experts that are not members of a FIMM national member society (i.e. Peter Skew) – **accepted unanimously**
- **Michael Kuchera**: Information on the International Fascial Research Conference (IFRC): **accepted unanimously** to support that FIMM as a supporter without financial commitment to the International Fascial Research Conference

17. Closing the General Assembly by the acting President at 3:50 PM

Respectfully submitted,

Michael L. Kuchera, DO, FAAO