



## Ostéopathie pédiatrique : l'Unité pour l'ostéopathie (UPO) rejette toute forme de désinformation et appelle à un dialogue scientifique constructif

La Société française de pédiatrie (SFP) a indiqué le 25 avril envisager de « *contre-indiquer la pratique de l'ostéopathie chez les nouveau-nés et les nourrissons en l'absence d'évaluation d'efficacité, et surtout devant le risque auxquels sont exposés les nouveau-nés qui font l'objet de ces manipulations, au mieux inutiles.* »

La profession d'ostéopathe est réglementée depuis 2007. Le diplôme d'ostéopathie est délivré à l'issue de 5 années de formation, 4 860 heures, dont 1 500 de formation pratique clinique au contact de patients.

L'Unité pour l'ostéopathie partage pleinement le souhait formulé par la SFP que les nourrissons puissent bénéficier de soins qualitatifs et sûrs.

L'ostéopathie périnatale et pédiatrique est régie par des recommandations strictes de bonnes pratiques et d'éthique<sup>1</sup> élaborées par la SEROPP, membre de l'UPO.

### Des preuves d'efficacité et de sécurité documentées

Contrairement aux inquiétudes exprimées par la SFP, l'ostéopathie pédiatrique a fait l'objet de plusieurs dizaines d'études cliniques rigoureuses, montrant notamment une diminution significative des pleurs dans les coliques du nourrisson, une amélioration des difficultés d'allaitement, une réduction des asymétries crâniennes, une diminution de la durée d'hospitalisation des prématurés, une stabilisation des paramètres physiologiques des nourrissons.

En outre, aucune complication grave n'a été recensée dans les revues systématiques de la littérature scientifique.

Ces publications montrent l'utilité de cette pratique quand elle est réalisée par des professionnels compétents disposant d'une formation spécifique en ostéopathie périnatale et pédiatrique.

Recourir pour leur nouveau-né à une consultation chez l'ostéopathe constitue pour les parents une démarche sans risque susceptible d'améliorer de nombreux troubles fonctionnels des premiers mois de la vie, voire de diminuer le risque d'une asymétrie crânienne aux conséquences de mieux en mieux explorées.

Hors de toute prescription médicamenteuse, la prise en charge ostéopathique présente un excellent rapport bénéfice-risque chez le nourrisson.

### Un appel à la collaboration scientifique

<sup>1</sup> [https://seropp.org/wp-content/uploads/2024/05/2022\\_-recommandations-de-bonnes-pratiques-et-dEthique-SEROPP.pdf](https://seropp.org/wp-content/uploads/2024/05/2022_-recommandations-de-bonnes-pratiques-et-dEthique-SEROPP.pdf)

L'UPO propose à la SFP d'engager un travail commun visant à définir des standards d'évaluation rigoureux de l'efficacité et de la sécurité des soins ostéopathiques chez le nourrisson, dans le respect mutuel des expertises de chacune des disciplines.

La seule ambition de l'UPO est d'accompagner sereinement les jeunes patients et leurs familles, en toute éthique et transparence.

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