

We Get Letters & E-Mail

"Thanks for this very precious souvenir"

Dear Editor:

I was very pleased to see my photo with Dr. B.J. Palmer and the PSC Clinic staff (*circa* 1945) in *Dynamic Chiropractic*, p. 24, July 16, 2001.

Yes, I was a part of the B.J. PSC staff, a student at the time, graduating in 1946 (second from the left in the back row).

Thanks for this very precious souvenir.

During my adventures around the world, I also practiced two years in Paris (1949 and 1950). (*Editor's note:* In the 1950s, Dr. Gagné traveled around the world and wrote what he called a "spiritual odyssey" titled *In Quest of the Truth*.)

I celebrate this year 2001 my 55th year in practice in Saint-Nicolas with my daughter, Dr. Nathalie, near the historic Quebec Bridge. My house and clinic face the wonderful Saint-Laurent River.

I am now on my way to my 80th year, not knowing what fatigue is.

My appreciation again to have included the photo in "The Chiropractic News Source," *Dynamic Chiropractic*.

Thanks for what you are, and for what you may still become.

Robert Gagné
Saint-Nicolas, Quebec
Canada

"It seems that he has finally succeeded in queering his own pitch..."

Dear Editor:

In your May 21 issue, the front-page story, "Toronto Coroner Disqualifies Murray Katz, MD from Inquest" immediately caught my eye. It seems that he has finally succeeded in queering his own pitch, as we say down under.

There is one misstatement of fact that I believe needs correcting: You stated: "The coroner's finding corroborates the opinion of the Royal Commission in its 1979 report, *Chiropractic in New Zealand*, submitted to the New Zealand Parliament that same year, which led to the licensing of chiropractors in that country."

Chiropractors had already been registered (the British equivalent of licensure) under the

Chiropractors Act of 1960, for nearly 20 years when the Royal Commission reported. The mandate of the Royal Commission was to "inquire into and report upon the desirability of providing health benefits under the Social Security Act of 1964 and medical and related benefits under the Accident Compensation Act of 1972, with respect to the performance of chiropractic services..."

Mary Ann Chance,DC,FICC

Editor, *Chiropractic Journal of Australia*

Reference

Inglis BD, chairman, Commission of Inquiry into Chiropractic. *Chiropractic in New Zealand*. Wellington: Government Printer, 1979: pp. xii, 69.

"...mistakes dogma for philosophy."

Dear Editor:

In a recent issue of *Dynamic Chiropractic* (13 August 2001:19[17] pp. 16-7, 26) Guy Riekeman, DC, president of the Palmer colleges, offers an article with a fetching title: "Chiropractic Philosophy and Science: Not Necessarily Strange Bedfellows." This headline suggests a rapprochement between two intellectual disciplines (a convergence that I always took for granted before my exposure to traditional chiropractic thought). However, Dr. Riekeman's discourse suggests misunderstandings of philosophy and science, misconceptions which are all too common in the profession (Keating, 2001), and which serve to continue the historic isolation of chiropractors from science and philosophy.

Dr. Riekeman mistakes dogma for philosophy. To the best of my knowledge, the two most prominent of the "traditional principles" that Palmer University espouses are:

1. Life is intelligent.
2. The subluxation complex is a significant and correctable component in illness.

The former is a metaphor that has not been productive in generating testable hypotheses (but may have some limited heuristic value in practice [Keating, 1994]), and the latter is a potentially testable, but still unvalidated (and largely untested), clinical science theory. As I understand it, the Palmer University System (although not necessarily every faculty member) takes these two ideas as *a priori*, incontrovertible truths. Indeed, Riekeman offers the writings of my friend, Fred Barge,DC,PhC, as exemplary of the "philosophical" instruction available at Palmer College. The rigidity of Dr. Barge's principles is self-professed: "Is there a true chiropractic philosophy? Yes, and there are no alternatives" (Barge, 1991).

The "historical baggage" that Dr. Riekeman refers to is not one based on "philosophy vs. science," but rather one of dogma vs. philosophy and science. It is a confrontation between faith and skepticism, that is, between epistemologies. Despite the considerable investment made in the Palmer Center for Chiropractic Research (which I wholeheartedly applaud), the Palmer system remains committed to the dogma of Innate and the subluxation complex. Palmer is certainly not alone in this respect.

The misunderstanding of science within the Palmer hierarchy is suggested by Dr. Riekeman's

essay. For instance, he avers, "Science points a finger at the unknown and calls it 'quasi-religious.'" Actually, the only scientifically legitimate stance toward the unknown is to label it "unknown." Attempting to explain the unknown by means of further "unknowns" (innate intelligence or "life is intelligent") amounts to pseudo-explanation: a form of word "magic" wherein naming the unknown substitutes for scientific explanation. And when innate intelligence is construed as a fraction of universal intelligence (God), then we have indeed ventured into the realm of theology and religion.

Similarly, when we insist upon attributing beneficial clinical outcomes to reduction of the subluxation complex, we engage in dogma. The subluxation complex is a potentially testable hypothetical construct. It may have great clinical significance, or none, or something somewhere in between. We don't know; we haven't done our homework. The validity (or lack thereof) of the traditional chiropractic lesion has not been adequately explored (far from it). Dr. Riekeman acknowledges that "the hard questions in chiropractic have never been answered by science," but more to the point, they are rarely if ever asked. The president will query, "What is subluxation?" but he doesn't ask whether subluxation complex is real, meaningful, or clinically useful. To do so would be to challenge the dogma of Palmer.

Contemporary Palmer ideology, as expressed by Dr. Riekeman, has progressed a bit beyond the so-called "deductive science" offered by Ralph Stephenson, DC, PhC (who Dr. Riekeman refers to as one of "chiropractic's philosophical greats"). Stephenson's *Chiropractic Textbook*, one of the Palmer "green books," suggested that inferential reasoning (an epistemology based on empirical evidence) was unnecessary, since all chiropractic principles (and the validity of chiropractic methods) could be derived deductively from a true, first principle. Stephenson's principle #1, or "major premise," was an assertion of Universal Intelligence (Stephenson, 1927, p. xxxi). Today's "Palmer philosophy" seems to have abandoned Stephenson's anti-data-collection stance, but still shies away from scientifically addressing the heart of "the subluxation question" (Nelson, 1997). And the "son of universal" lives on in the vitalism of Palmer University's first tenet: "Life is intelligent."

Dr. Riekeman calls for a "new partnership" between philosophy and science in the interest of the profession and the patients it serves. I believe this suggestion is misguided, and based upon incorrect assumptions about the nature of philosophy and science. Philosophy and science are not at odds with one another in chiropractic, and never were. But dogma, disguised as philosophy (and sometimes disguised as science), continues to mislead and confuse the issues. The chiropractic profession cannot achieve the "cultural authority" (Starr, 1982; Vincent, 2000) it has long aspired to so long as it persists in its dogma, so long as it seeks to unite, as B.J. and D.D. used to say, the material and the immaterial. Rather, to advance the science of chiropractic and to better meet patients' needs, a massive infusion of skepticism and critical thinking will be required.

How to bring about such an intellectual revolution within the profession would consume much more space than a letter permits. So I'll close here with a letter permits. So I'll close here with just a reiterated short cut toward this goal (Keating, 1997): reposition chiropractic education within state universities and teaching hospitals. 'Nuff said!

*Joseph Keating Jr., PhD
Homewood Professor
Canadian Memorial
Chiropractic College*

References

- Barge, Fred H. Is there a true chiropractic philosophy? Yes, and there are no alternatives.

Proceedings of the 1991 International Conference on Spinal Manipulation, April 12-13, 1991, Arlington, Virginia, p. 338.

- Keating JC. Innate Intelligence: a label for our ignorance. *Dynamic Chiropractic*, 7 October 1994, p. 45.
- Keating JC. Chiropractic: science and antiscience and pseudoscience, side by side. *Skeptical Inquirer* 1997 (July/Aug):21(4), 37-43.
- Keating JC. Philosophy and science in chiropractic: essential, inseparable and misunderstood. *European Journal of Chiropractic* 2001:46(3), 51-60.
- Nelson, Craig. The subluxation question. *Journal of Chiropractic Humanities* 1997:7, 46-55.
- Starr, Paul. *The social transformation of American medicine*. New York: Basic Books, 1982
- Stephenson, Ralph. *Chiropractic Textbook*. Davenport IA: the author, 1927.
- Vincent, Richard E. The role of the state board in the acquisition of cultural, professional and social authority. *Chiropractic Journal of Australia* 2000 (June):30(2), 58-60.

A Paradox?

Dear Editor,

All I want to know (and this is by no means rhetorical) is, how does Dr. Riekeman gel the "philosophy" that chiropractic is "nontherapeutic" with the receiving of our federal tax dollars (that's your money and mine) for research projects? As a past board member of a couple of nonprofit service organizations, I understand that one is accepting responsibility for someone else's property when they receive and propose spending of tax generated monies. When someone states that what they do is nontherapeutic, then they are refusing to accept responsibility for the effects of their actions on patients. In Dr. Riekeman's case, the public is giving trust to him for the same aspect of its life: health.

Thus, the paradox: I accept responsibility on behalf of the public for the receipt of money, but not for the product it purchased and not for as it is applied.

Daniel Becker,DC,DABCN
North Smithfield, Rhode Island

"...Saddam Hussein and Milosevic"

Dear Editor:

Palmer University lobbied hard to kill a local, state chiropractic effort in Florida. As usual, it played the politics masterfully. The recent justifications put forth by the Palmer leadership in defending their actions are beyond belief. Like all would-be despots, they raise the specter of an outside enemy to deflect criticism of their self-serving behavior. They join the ranks of Saddam Hussein and Milosovic. The tyranny of personality leadership lives and democratic management of the profession suffers another blow. These leaders, whose self-righteous and misleading stand remains, might remember the sage phrase, "He who lives by the sword, dies by the sword."

John Triano,DC,PhD
Plano, Texas

"... ecstatic that CCA is suing...."

Dear Editor,

I was an ASHP "provider" from the beginning - until July 17, 2001. What I endured at the hand of George DeVries and ASHP make me ecstatic that CCA is suing them. An experience of mine illustrates the need for this lawsuit.

In December 1998, a new patient came to my office and stated to my receptionist: "I have no insurance for chiropractic care. I will pay for my treatments myself." He received treatments and massages over the next 13 months and paid for them all.

In January 2000, the patient's wife told him that in May 1999, her employer had added chiropractic coverage and he was on it. He took our office's billing statement and sent it to the insurance company for reimbursement.

Shortly after, ASHP sent me a letter telling me that I was in breach of contract for having charged this patient, and that if I did not reimburse the patient 100 percent of all money paid since May 1999, it would "terminate" me. I called and tried to explain the situation. I am unsure whether anybody at ASHP was intelligent enough to understand the situation, or they had such a hard-line attitude that they just couldn't see the situation for what it was. The amount in question was \$448, and more than half of that amount was for massages that ASHP didn't even cover. They insisted I reimburse the patient for all of the money, including massages.

I hired an attorney. He spent 13 hours on the case and was able to convince ASHP's attorney that they couldn't force me to reimburse for the massages. The company still insisted I reimburse \$210 for the adjustments and told me on the phone that if I would just file a treatment authorization for those dates of service, they would approve them and reimburse me according to the contract. However, when I filed the appropriate paperwork to get those visits covered, ASHP denied authorization, with the reason that it was beyond the time limit for filing authorizations.

Three "levels of appeal" later, they continued denying authorization for payment while at the same time forcing me to reimburse the patient.

My attorney finally told me that ASHP was determined to spend unlimited legal fees to defeat me, and ASHP's own attorney tried but couldn't convince the company to back off. My attorney advised me to just pay the \$210 and move on. I did.

The quote from George DeVries in the August 30, 2001 issue of *Dynamic Chiropractic* ("California Chiropractic Association Sues ASHP, front page) is: "We will vigorously defend ourselves against the (CCA) suit and will prevail." This attitude is the same one I encountered in my legal dealings with ASHP.

I wholly support the CCA lawsuit.

Steven Eggleston, DC
Huntington Beach, California

"...totally irresponsible."

Dear Editor,

The article, "Unvaccinated Victim of Medical Hysteria" (Tim O'Shea,DC, August 13, 2001, volume 19, number 17) is totally irresponsible. Are we chiropractors trained to heal the body using our hands, or are we medical ethicists, untrained and uninformed to encourage our patients to not vaccinate their children? By printing this article, it appears that Dynamic Chiropractic is encouraging the latter. It seems way out of our (your) scope of practice. Articles like these do little to improve the health care dilemma we find us (*sic*) in, and encourage distrust and scorn from the medical profession.

You, and we as a profession can do much better.

Steve Bernfeld,DC
Nipomo, California

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