

Time to Get Real

James Winterstein, DC, President, National University of Health Sciences

When one reads the profession's newspapers, one can readily get the impression that various segments of the profession led by several highly visible and vociferous individuals are still attempting to define the profession in a way that would reflect the early concepts of chiropractic as they were propounded by the Palmers. These would-be leaders like to tell everyone who disagrees with them that they are not "real chiropractors," or just "wanna-be MDs." They like to ask, "If you don't want to be a chiropractor, why don't you just go to medical school?" They also, for obscure reasons, confuse science with allopathic medicine, seemingly thinking the two are the same whenever one calls for more science in chiropractic.

These people often say things like: "The medical (meaning allopathic) model has failed and is rapidly falling apart. People are turning in droves to chiropractic." This, they assert, is because people have suddenly discovered the truth about chiropractic at long last.

"We have finally been vindicated, but beware, the medical doctors are now trying to steal what is rightfully ours. We must save chiropractic! Join the battle of right over might! If not now, when? If not you, then who?"

What great-sounding rhetoric - to some people. I think most of the rest of us are taking a more pragmatic view of the situation, and a pragmatic view requires us to see the following:

1. The allopathic model of health care is not going to disappear from the scene. Even if it were all wrong, it won't disappear because it is a huge business complex, thoroughly and inextricably interwoven with the pharmaceutical/hospital/medical-center complex. It is not going away. Take that to the bank, or, if you wish, "follow the money!"
2. We are often referred to by the image-makers as part of "mainstream health care," but we are not yet well integrated with the allopathic system, nor are we adequately integrated in the third-party system, leaving us in a current state of limbo.
3. In most studies, we continue to be considered a part of "complementary and alternative medicine (CAM)." One recent study by Dr. Eisenberg, et al.,¹ provides some interesting information about patients' perceptions of conventional care as compared to CAM care. Here are some responses from those who used CAM in the past 12 months:
 1. Twenty-one percent said alternative therapies were superior to conventional therapies; seventy-nine percent agreed that "using both conventional and alternative therapies is better than using either one alone."
 2. Here is a surprise - 52 percent said the CAM provider spent more time with the patient; 49 percent disagreed. I thought we should win this hands down.
 3. Another surprise - 42 percent believed the CAM provider offers a more understandable and useful explanation of the medical problem than the conventional provider - 56% disagreed.

4. And still another - 41percent felt the CAM provider was a better listener than the conventional medical doctor - 52 percent disagreed.

Some of our hallowed positions - that we listen better, we explain better and we spend more time with our patients - were "shot out of the water" by the CAM patients themselves. Perhaps we are becoming too much like the allopaths of the past, while at least some allopaths are becoming more like the chiropractors of the past.

1. There was the revelation that 51.2 percent of the patients that had been to an MD and a CAM provider in the last year visited the MD first; 18.5 percent went to both at the same time; 15.4 percent visited the CAM provider first; 10.4 percent never saw a CAM provider; 1.4 percent never saw the medical doctor; while only 3.1 percent said the provider choice varied by condition.
2. Let us take a look at the various state laws that govern chiropractic. With one or two exceptions, these statutes require chiropractors to diagnose, to keep proper patient records, and to refer as necessary. The great majority allows a scope of practice that exceeds the "hands-only" laws of the past, and many states permit the chiropractic doctor to refer to him or herself as a physician.
3. The surveys conducted by *Dynamic Chiropractic* and by the National Board of Chiropractic Examiners, consistently reveal that the majority of chiropractors, by a significant margin, practice more broadly than "subluxation correction only." That group is actually a small minority of the profession.

Where does this knowledge leave us as a profession? We are living during a time when the people who have moved into economic power are those who were activists in the late 1960s and early 1970s. They were "anti-establishment" all the way. Now, they are living their lives with a certain degree of "anti-establishmentarianism" in the area of health care, because it is one aspect of their lives that is fairly readily affected by them.

They have written books on the subject, they have lobbied the government, and they have used some of their discretionary income to dabble in the unusual, the mystical, and the bizarre. All of this is little different than the positions they took 30 or 40 years ago regarding virtually all aspects of society. Their interest in mystical healing concepts has opened the doors to Eastern medicine. Their interest in new age concepts has encouraged people to dabble in herbs, magnetic therapy, crystal healing, nutrition, etc. Because of this great interest by a large segment of the population that has significant economic influence, we see some movement even by so-called "orthodox medicine" to attempt to meet the needs and desires of this society; thus the numerous complementary and alternative medicine programs at various allopathic schools.

I do not think this is the end of the story, however. Sooner or later, perhaps within the next decade, we will to see a vigorous return to the concept that health care must be evidence-based; that it must be supported by science. In my estimation, as that process reasserts itself, we will see a number of current practices falling by the wayside. I do not relish the idea of going back to the days when chiropractic was looked upon as a "fringe" practice.

To prevent this, we must take every opportunity now to become more and more "orthodox" or "mainstream." I personally have always liked the cash practice. In my concept of that, everyone gets cared for, whether they can afford it or not, but the cash practice that is being promoted today is designed explicitly to serve those with "discretionary" money. In that scenario, what happens to the people who cannot afford to pay for chiropractic care? The reality is they do not get

chiropractic care, and thus the need to be part of the third-party reimbursement program, whatever that turns out to be.

Certainly, our current movement into the military, and hopefully the veteran's affairs medical care programs, are a giant step in the right direction - mainstreaming our profession. Important as these movements are, there must be more:

1. We must accept the reality that we are fundamentally a profession of so-called "mixers." (Most of us are broad scope and we need to acknowledge and promote that. We must let the majority rule.)
2. We must continue to work toward full inclusion in any and all third-party systems.
3. We must encourage and promote integrated practices - that is between practitioners of chiropractic, allopathic and osteopathic medicine;
4. We must expand our scope of practice at every opportunity with the understanding that ours is to be the practice of holistic medicine - without the use of prescription drugs and operative surgery.
5. We must work toward greater practice of evidence-based chiropractic medicine. When the current interest in the unusual methods of health care wears off, we must be an accepted part of the social reality - no longer on the sidelines - no longer marginal.

It is time for us to become much more pragmatic in our intra-professional relationships, in our inter-professional relationships, and in our relationships with those decision makers - legislators, state board members, members of the judiciary and members of the press - who have dramatic power to influence our future as a profession. In short, it is time to "get real" and forget about all the internal arguments, the undermining that goes on, and the seduction of students from one school to another with financial enticements, etc.

If a segment of the profession wants to regress - to embrace the past - we must let it go. The rest of us must welcome the future with all of its uncertainties and all of its opportunities. It is the only way that chiropractic medicine will be around for the benefit of future generations. It's time to "get real!"

Reference

1. Eisenberg D, Kessler R, et al. Perceptions about complementary therapies relative to conventional therapies among adults who use both: Results from a national survey. *Ann Intern Med* 2001;135:344-351.

*James Winterstein, DC
President, National University of Health Sciences
Lombard, Illinois*

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