

We Get Letters, E-Mail...and Releases

Editor's note: As we go to press, the ACA has fired off a strongly-worded news release stating that a "fringe group" aided the medical lobby's anti-chiropractic campaign at the October 3 testimony of chiropractic representatives to the House Committee on Veterans Affairs Subcommittee on Health.

The "fringe" group the ACA speaks of is the WCA. The WCA, the AMA, the American Osteopathic Association, and the American Physical Therapy Association all presented the subcommittee with written testimony. The spoken testimony to the subcommittee was delivered by representatives from the ACA, ICA and the Association of Chiropractic Colleges.

The ACA release states in part:

"A reckless crusade by the World Chiropractic Alliance (WCA) to sabotage the chiropractic profession's chances for parity in federal health care legislation was brought to a head October 3 as the fringe group aided prominent medical organizations that were testifying against comprehensive legislation that would guarantee chiropractic care for the nation's veterans.

In a hearing before the House Veterans Affairs (VA) Committee Subcommittee on Health, the WCA submitted written testimony absurdly claiming that the 'full scope' legislative provision supported by the American Chiropractic Association (ACA), Association of Chiropractic Colleges (ACC) and International Chiropractors Association (ICA) would virtually bar doctors of chiropractic from subluxation-correction services in the VA. Further, the WCA statement argued for a VA provision consistent with the federal Medicare program, which does not reimburse for diagnostic services nor does it reimburse a doctor of chiropractic for services that are authorized under state law.

The testimony followed an earlier issuance of a WCA statement. In this statement, electronically broadcast to members of the chiropractic profession, Dr. Terry Rondberg, president of the WCA stated: 'We have to make sure we completely counteract the American Chiropractic Association's efforts to include the provision as part the VA bill.'

Also seeking to defeat the ACA-ACC-ICA-proposed legislation were the American Medical Association (AMA), American Osteopathic Association (AOA), and the American Physical Therapy Association (APTA).

ACA President Dr. James Mertz stated:

"There is no question that the WCA testimony helped the AMA, AOA and the physical therapists in their efforts to limit chiropractic care. In our view, the WCA has become a stooge of the medical profession with these destructive efforts. We are shocked that the WCA has aligned itself with the medical lobby on these critical legislative efforts - hurting the chiropractic profession's chances for parity at every turn.

Dr. Rondberg Elaborates on WCA's Position

Dear Editor:

I read your "article" about the VA bill and wish to inform you that you are inaccurate in stating that the WCA opposed direct access to chiropractic in the Veterans Affairs health system. In fact, we strongly supported direct access and have worked hard to make sure all veterans have the right to receive chiropractic care regardless of their condition, symptoms or disease.

However, the World Chiropractic Alliance did object to the reference to chiropractic as a method of treating "neuromusculoskeletal conditions," and the absence to even a single reference to subluxation correction.

Without reference to our unique character, chiropractic will be seen as a type of medical treatment. Chiropractic care would become a duplication of medical services already provided by medical doctors. I believe we must state clearly that the services we provide - the diagnosis and correction of vertebral subluxation - are unique and cannot be provided by medical doctors, physical therapists or any other provider. This is the only way we can ensure a permanent and meaningful role in the VA health care system.

Please take a moment to look at the information we presented on our website (www.worldchiropracticalliance.org/whatsnew/va_testimony.htm).

Your willingness to rectify the misinformation in your article will demonstrate that it was not your intent to deliberately mislead the profession in order to malign the WCA and its subluxation-based members.

Terry Rondberg, DC
President, World Chiropractic Alliance

Editor's note: The meeting with the Department of Veterans' Affairs that Dr. Rondberg is referring to was held in Washington, D.C. on February 24, 2000. The article that he is referring to that we published was "An Increased Role for Chiropractic in the VA? Don't Hold Your Breath," *DC* Oct. 16, 2000.

A Bone to Pick

Dear Editor:

I read with interest the October 2 article on the variety of websites that various doctors are publishing on the internet. However, after viewing one website in particular, I saw again something that has been disturbing me for a long time.

I have noticed over the years that a number of my colleagues are utilizing a skeleton in some of their advertising. They are thinking they are representing themselves as the skeletal experts when in fact the actual impression they are conveying is not that at all.

This must be said and there is really no subtle, gentle way of saying it so I am just going to say it. I am not known for my tact and diplomacy (I have been taking lessons from Dr. Laura) so I will take the heat. What I have to say needs to be said and can only benefit our profession.

So here it is. A skeleton represents death, plain and simple. When a skeleton is used in advertising, it is almost impossible to incorporate it so that it does not represent death. One website featured in the article used dancing skeletons. Although I know what their intent was, what they actually portrayed was death walking. I know in our profession that we deal with the spine and the skeletal system, but to use the skeleton in this manner only conveys the impression of dead people or worse. This is not the image we want.

My advice is to avoid the use of skeletons in any form of advertising. It is my hope that anyone using a skeleton in any of their advertising (business cards, yellow page ads, letterhead, etc) will heed this advice and immediately find a good graphic designer to develop a logo that is more representative of adding life. We need to portray our profession in the positive manner it deserves. Let's use icons that show we can add vigor and well being.

Steven Gould, DC
Portland, Oregon

"The Public Is Confused"

Dear Editor:

Re: Report of My Findings ("Chiropractic Education in Transition: How Will Our Chiropractic Colleges Survive?" *Dynamic Chiropractic*, Sept. 4, 2000, www.chiroweb.com/archives/18/19/24.html).

Interesting article on the future of chiropractic; several points could use some discussion. Enrollment in chiropractic colleges is down, yet the possibility of three more colleges coming soon, it is almost like history repeating. I Think D.D. Palmer owns the record for starting the most schools, with John Howard following. Now even the one once owned and run by the medical physicians has to offer more "alternative medicine" courses to remain solvent.

"What they can make money doing" sure explains a lot about some in the profession. One only has to look at several chiropractic colleges as they change names and curricula to get on the bandwagon of alternative medicine to attract students.

The public is confused about what we do. Just look in the yellow pages under *chiropractic*. You'll find: acupressure; acupuncture; vitamin therapy; nutrition; sports injuries; workers' compensation; personal injury; physical therapy; occupational therapies; rehabilitation; diagnostic services; *shiatsu* therapy; herbal medicine; magnetic therapy; manipulation under anesthesia; even ads that state "Down in the back? We can help you." Then, on top of that, we are listed under *chiropractic* physicians, as if that makes us look more professional.

Most of the drug advertising states: "Consult your physician before" using this or that product, this adds to the confusion using the term "chiropractic physician." Now, some want the term "chiropractic medicine." This should truly be a consumer safety issue.

An old saying comes to mind: "jack of all trades, master of none." There is the argument that DCs should concentrate on being the best adjusters, rather than just another form of alternative care provider. Shouldn't DCs strive to keep chiropractic "pure" and remain a distinct profession? Isn't this what has made chiropractic so successful for the last 105 years?" You sure hit the nail on the head with this part of your article. Just think if we concentrated on finding the subluxation and being the best adjusters - we would not have enough chiropractors to meet the demand. The

chiropractic colleges would not be at a loss for students.

Time will tell if we end up like the osteopaths, or continue to be separate and distinct, becoming more successful than we have the last 105 years.

Norris Erickson, DC,LCP (Hon)
Aurora, Illinois

"Two important questions that need to be answered"

Dear Editor:

I check *Dynamic Chiropractic* about one to two times a month to check the current news and to see if Croft, Liebenson, Hammer, etc., have written any articles. But lately you have been asking questions to the readers with an opportunity to answer. I have found this quite enlightening and it has made me aware that there are many DCs out there that feel the same as I do on many issues.

I am also requesting as I see others have that in the future you should ask these questions in some form:

Should we increase the scope of practice to include prescription and minor surgery for those that went on for additional training that our institutions provided?

Since our profession has such a major divide with significant fundamental differences, why don't we split the profession? Have those that wish to restrict their practice and have a specific title and scope versus the other broad-based group that can be identified with terms such as chiropractic physician or doctor of chiropractic medicine.

The final question that needs to be addressed is the variation in scope of practice from state to state. Shouldn't we make it a priority to set consistent state requirements for entrance to practice as well as consistency in scope of practice? There is a significant difference in practicing in Michigan as compared to Oregon.

Scott Lakes, DC
Richmond, Indiana

Academic Bias toward DCs?

Dear Editor:

I wanted to bring this to the attention of the chiropractic community. I am a biology instructor at Nassau Community College, a unit of the State University of New York. A memo posted on this board (www.hcrc.org/wwwboard/messages/362.shtml) was recently brought to my attention. As chiropractors, we are used to the adversarial relationship we have had with the medical profession as clinicians. But here we see that very same relationship exists in the academic arena. Not only do I possess a chiropractic degree, but I hold two bachelors' degrees, a master's degree and a law degree. Another chiropractor in our department who possess a master's degree has just received full professorship. But still the validity of the chiropractic degree is called into question. Our department also has a podiatrist who is a full professor, but this is not questioned. I am sure there

are many chiropractors in the world of academia. I am curious as to how they would react to this situation.

If I can answer any questions regarding this matter, please feel free to contact me.

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