

Affirmative Action for Chiropractic?

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The concept of helping oppressed groups of people with governmental assistance has become a very controversial issue. While President Clinton and minority leaders still support such help, other organizations like the University of California Board of Regents recently nullified their affirmative action program with regard to student admissions. No longer will historical, social or economic handicaps be considered when applying to any UC campus. Of course, many minority groups have criticized this change in policy, declaring it signifies a return to the discriminatory ways that have excluded minorities of all types from full participation in the American system.

While many white, male republicans applaud the end of assistance for minorities and women, the question remains: Just what is the role of government in assisting oppressed people? Aside from guaranteeing a level playing field, does government need to give added assistance or preferential treatment to groups of Americans who have suffered as a result of illegal discrimination in the past? This question, by and large, is still open to debate, although public sentiment seems to favor helping those in dire need.

If minorities feel entitled to such assistance, why hasn't chiropractic called for such assistance as well? After a century of intense discrimination by the medical profession/monopoly, the insurance industry, workers' compensation and, most notably, the exclusion of DCs from public hospitals, a case can easily be made that chiropractors have been an oppressed group as well. For instance, while chiropractic colleges applaud when they receive a few million dollars in grants from the federal government for research and education, it is a joke when compared to the \$26 billion dollars medical colleges receive annually.

Even when the federal court system upholds chiropractic's claim of discrimination and antitrust behavior by the medical establishment (as in the *Wilk et al. v. AMA et al.* case), relatively little changes. Of the 5,000 public hospitals in America, just how many DCs have been allowed on staff? Too few to mention. Patients are routinely denied freedom of choice in our hospitals, and legal informed consent is still violated every time a patient undergoes a back surgery without being told that spinal manipulative therapy is a viable option now recommended by the U.S. Public Health Service itself. Instead, when patients do ask about alternatives to their impending back surgery, generally the surgeon does his best rendition of the voodoo diagnosis to scare the patient: "If you don't have my surgery, you'll get worse. And if you let a chiropractor touch you, you'll be paralyzed!" Enough said, patient scared, surgery done!

I recall my attempt to integrate the local public hospital in my town. I presented to the hospital board the same expert testimony and scientific research that convinced the federal court in the *Wilk* case, only to be denied by the board with the singular remark that "A hospital is a place for practicing medicine, and chiropractic is not medicine!" They violated the exact essence of the federal court's decision that a hospital cannot excluded a chiropractor just because he is a chiropractor! When I mentioned this fact in a letter of rebuttal, the "Jim Crow, MD," board members simply laughed and ignored the federal court's ruling. I was ruefully told that "no Yankee judge is going to tell us what to do!" In fact, my attorney told me that the head of the board, in private conversations with him, referred to me as the "Malcolm X" of chiropractic for not staying

quiet in my closet office like most good chiropractors here had done for decades. Apparently I was shaking the medical pedestal, and they didn't like it!

Even after the recent research on acute low-back pain by the U.S. Public Health Service's AHCPR, the Manga Report from the Ontario Ministry of Health, and the British (Meade) study, to name but a few, chiropractic still remains on the outside looking in. The medical profession has totally ignored these recommendations to refer LBP patients for spinal manipulation, and their managed care gatekeepers have virtually locked the door for patients to exit the medical system to enter the chiropractic system. In fact, once a patient enters the medical system, they get a one-way ticket on the medical railroad that leads to drugs, ineffective PT modalities and, when that fails, back surgery--a dead-end destination in most cases.

What good is research when it is ignored by the powers-to-be? We know the medical profession is not interested in integrating our services into the mainstream medical system that generates of \$50 to \$100 billion annually for back-pain cases. They have no interest in sharing this lucrative market with anyone else, especially chiropractors. Their defensive tactic to exclude patients' access to chiropractic care is easily illustrated with examples of medical gatekeepers who daily deny patients' their freedom of choice. Public hospitals have little interest in lowering their revenues by including chiropractic care which has been shown to be safer, cheaper and longer-lasting. And with AMPAC in control of most politicians by way of huge PAC donations, most elected officials seem deaf to our pleas. Indeed, chiropractic remains viewed as the unemancipated "darkies" of the health care world by most conservatives. Just watch Newt Gingrich take the chiropractic PAC money, smile as he shakes our hands, then vote against us at every turn as he did on the Medicare revisions.

More recently, the AMA propagandists have decided to go on the offensive with their war on chiropractic and "alternative" health care of all types. Their house of delegates just passed a resolution this last summer calling for a warning to the public about the hazards of alternative care. Just as ABC News' "20/20" blasted chiropractic a few years ago with their embellishment of the one in a million iatrogenic casualty rate, the AMA misinformers have elected to continue with their campaign of fear and distortions.

For instance, the February 1998 edition of Prevention magazine published an article, "Alternative Medicine: What Works," which accurately mentioned our success with low-back pain, but the writer also warned the readers "to avoid chiropractic manipulation of your neck, since the American Academy of Neurology warns that in rare cases it can damage the arteries running through the back of the neck, which can lead to stroke."

The voodoo mentality of the medical press is eager to throw stones at our profession, all the while remaining silent about their own iatrogenic rates. Compared to the 15,600 morbidity rates per million caused by back surgeries, the one in a million rate of chiropractic is laughable. Yet the public is never told of medical mistakes, which now reportedly is the third-leading cause of death in our country.

So, are we chiropractors to sit idly by and suffer the slings and arrows of this outrageous situation? What can we do to oppose this unethical onslaught? Obviously our recent attempts have gone for naught. Let's admit that the expensive CCF documentary, Simple Beginnings, was a bust. While a few straight chiropractors enjoyed this depiction of our profession with their rhetoric about philosophy, it did little to impress the public. This video simply preached to the chiropractic choir. Even the recent roadblock TV ad on the major news shows was a wasted one-time shot in the dark. Apparently our chiropractic PR people haven't learned the major principle of advertising: Repetition. "Little plus often makes much" is sage advertising advice that the CCF has yet to learn.

Hopefully the new Alliance for Chiropractic Progress can learn a few valuable lessons from the mistakes of the CCF's Simple Beginnings campaign.

Without any type of affirmative-action assistance or our own effective PR campaign to help us to inform the public about our valuable services, the public is bombarded by chiropractic advertisements that put our profession to shame. "Free Spinal Exams" have become the bane of our profession, ranking just below the "Free Chicken Dinners." No doubt the public and medical profession must think: If chiropractic is so great, why do they have to give it away to lure in patients? This bait-and-switch ploy is so ingrained into the chiropractic profession that even the thought of not doing it sends panic through the minds of most chiropractors.

The chiropractic profession today reminds me of the old Negro baseball leagues. Being excluded from the mainstream, we chiropractors have simply lived on the edge of the system, fighting for crumbs and the leftovers of the medical world. And just as the oppressed black community gathered itself every Sunday to uplift their downtrodden existence in their fundamentalist revival churches, we chiropractors do the same with our fundamentalist "super-straight philosophy" seminars. Indeed, the similarity is striking. As well, other signs of the disenfranchised, alienated chiropractic community are evident in our professional disunity, with many splinter groups and the poor membership to the ACA (the only politically effective chiropractic association). Just as the black community is riddled with manifestations of oppression, so is the chiropractic community.

What can be done? Reportedly, chiropractic takes care of 40% of the back pain patients, although we are only one-tenth the size of the medical profession. Obviously the public, despite the medical interference, recognizes our effectiveness with greater patient satisfaction rates according to the Gallup poles. Can we sue to demand equal per-capita funding from the federal government for our colleges and research? Should every DC demand access to their local public hospitals? Should we publicly boycott those insurance companies like "Snake Farm" that discriminate against us? Should we demand equal access in the workers' compensation programs without medical gatekeepers?

Rather than wasting money on self-aggrandizing, ineffective ads and videos, should the ACA/ICA cooperative venture begin an aggressive PR program that addresses these issues head-on? Or will we continue the policy of avoidance and sidestep bringing these important issues to the public by merely talking about our educational standards instead?

Or do we have to wait until a Happy Chandler (the baseball commissioner who allowed Jackie Robinson to play in the majors) appears on the medical scene and allows our real integration into the system? Will we have to passively sit by and pray for help from some humanitarian politicians to do the right thing? Passive resistance? Strikes and boycotts? Aggressive PR? Political lobbying? Guerrilla marketing? What will it take to lift our profession from the abyss it finds itself in today?

In the meantime, there is one proactive tactic you can employ on a local level until our national/state leaders wake up, unite their efforts and join this fray. Perhaps the single most persuasive piece of information we chiropractors have in our limited arsenal of research is the AHCPR report on acute low-back pain in adults. This definitive study is the most thorough investigation on this subject ever compiled by a governmental agency. Their patient guide, "Understanding Acute Low Back Problems," is a small brochure that you can get for free (200 copies) by telephoning 1-800-358-9295. Why every DC and every state association isn't screaming this information from every mountaintop is a wonder to me. Here we have the US Public Health Service telling the public that spinal manipulation is a proven method for back pain, that standard physical therapy modalities are temporary and expensive, and that "Surgery has been found to be helpful in one in 100 cases of back pain." What more could we ask from any agency?

Our profession has waited over a century for support and proof, yet when it comes, we sit on our hands! I urge every DC to order this brochure and give it to every new patient and prospective patients and let the government endorse you. I took this information and had a PR firm create newspaper ads highlighting these findings, which I will gladly share with anyone who sends me a SASE. I have also written numerous newspaper columns (which are printed for free) using this same information to support my claims. No longer is this issue simply "my opinion vs. the MD's opinion." Now we have the full recommendation of the US Public Health Service behind us for the first time in our history. Don't waste this opportunity. Get these brochures and use them!

I also have a 30-minute infomercial which focuses solely on this new guideline. You can do the same for only a few thousand dollars in production costs and a small fee to air it on your local cable access station. Instead of using "free spinal exams" that degrade our profession and taint your image, I urge you to design a PR campaign around this incredible AHCPR report. Perhaps if enough DCs do, our image will change from being the "Free Chicken Dinner" chiropractors, to the best practitioners to handle this epidemic of back pain. Indeed, would you rather be known as the best doctor for back pain or the cheapest? The answer should be obvious. I hope you agree. Send me a SASE, call for the AHCPR brochures, and stir your creative juices to develop a smart marketing campaign around this incredible resource.

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