

## The Wonders of Animal Chiropractic

AN INTERVIEW WITH DR. MICHAEL GLEASON

Editorial Staff

Animal chiropractic has been a part of chiropractic since its inception. -- Dr. Michael Gleason.

In the latest version of the movie Doctor Dolittle, comedian Eddie Murphy possesses the amazing gift of being able to "talk to the animals." While it's still impossible for humans to converse with the other members of the animal world, it is entirely possible for veterinary chiropractors to have a dramatic effect on the health and well-being of their animal patients.

A case in point is Michael Gleason. A 1984 graduate of Palmer College of Chiropractic West, Dr. Gleason originally began his practice by treating and adjusting human patients. While sharing an office in Ventura, California in the late 1980s, Dr. Gleason began working on animals in conjunction with local veterinarians, and his practice has grown steadily from that point on.

Since his first animal adjustment more than a decade ago, Dr. Gleason's patient base has undergone a near-complete reversal, from treating only humans to maintaining a full-time animal practice. Although his practice is based in Tracy, California, Dr. Gleason travels hundreds of miles a week throughout the San Francisco area and treats a multitude of animals from family pets to highly-prized show horses.

Recently, Dr. Gleason was kind enough to sit down for an interview and discuss the pros and cons of practicing animal chiropractic.

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DC: How did you get started in terms of being a veterinary chiropractor? What was the deciding factor that made you choose veterinary chiropractic?

Dr. Gleason: I think like most chiropractors, I kind of played with animals while I was in school. I mean, if you're petting an animal and you're a chiropractic student, it turns into palpation. That's just second nature.

Like most chiropractors, in my human practice, I would occasionally have clients that would ask me to look at their dog or their family cat or rabbit or whatever. And I enjoy doing that. One of the big factors was what turned out to be a referral: a family's veterinarian told them to find a chiropractor for their dog. They asked me to take a look at it. I said I would like to do that, and it led to a relationship with that veterinarian.

That led to further study into the anatomy and biomechanics, then looking at x-rays and working with the vet one day a week. What ended up happening is, that part of my practice grew faster than the human part of my practice. This was back in the late '80s when I was in the Ventura area.

DC: And you ended up becoming a certified by the AVCA (American Veterinary Chiropractic Association) in 1991.

Dr. Gleason: I ended up doing that, yes. I started doing animals basically just by applying my knowledge and skills from humans. The concepts and principles are all the same; the anatomy's different. So if you figure out the anatomy and you're good at dealing with animals ... for me, it was kind of a natural thing.

Probably the biggest business decision was that I was getting more calls per week for new animal patients than for new people patients. And it was around that same time that I found about the AVCA course. I did take that course, and by the time I was done with the course, I was down to one day a week in my office seeing people and six days a week out working on animals.

In that period, we had moved up to the Bay area, so I was traveling all over the Bay area doing animals. There were only probably two other people in the state that had anything close to a full-time animal practice at the time. Shirley McQuillan was doing quite a bit with horses. So partly because there weren't that many people doing that nature of work, and partly because I was real good at it, it grew rapidly.

DC: Do you still adjust humans as well as horses?

Dr. Gleason: My practice right now is full-time animals. I adjust my family at home, and that's about it. Occasionally I'll adjust a trainer at a barn, but that's very rare. Mostly what I do is make sure that the owners or riders or trainers are under chiropractic care by a colleague. Animals need less frequent care than people do, so I may be in an area once or twice a month to take care of the animals in that area. People need more than that, so I choose not to take responsibility for the people who oftentimes need once a week or even three times a week, but I do try and make sure that they get to see colleagues of mine in the area.

DC: If you could, describe what an average day is like in your office. The amount of traffic you see, the amount of traveling you do ...

Dr. Gleason: That's a fair question, but again it's tough, because every day is different. I do large animals in the field; I do small animals in a veterinarian's office. On a typical small<sup>a</sup>animal day, I will go to the clinic of a veterinarian who I have a relationship with. They've got one or two vets seeing patients that day and then I'm seeing patients that day. I may see anywhere from 15 to 30 or 40 animals in that office on that day.

So it depends on the office, it depends on the veterinarian, how well they understand the concepts of chiropractic. There are some offices I go to where I only see three or four patients. I'll go there for just a morning. Part of what it is, is that with one veterinarian, what they send me is the classic back-pain symptomatic patient, whereas with another veterinarian who understands that chiropractic is a system of health care, I'll see any animal that has a history of trauma, because the vet knows that you need to evaluate the quality of the joint motion. I'll see any animal that has a problem, because the vet knows that it may involve the nervous system, and if we can get them adjusted, it may help. So there's a tremendous variation with that.

With large animals, I will be in one particular part of the Bay area on one day, on the peninsula, in the Woodside or Portola area. I may make 15 different stops at different barns, and I'll see anywhere from one horse to ten horses at a barn. These are horses in which I know who the veterinarian is and I have a working relationship with that veterinarian. The way I practice, I require some kind of referral from a veterinarian before I'll see the animal.

DC: What types of horses do you adjust? Are they typically racehorses, or are they family pets or workhorses?

Dr. Gleason: I don't see that many family pets. I used to do racehorses a lot; I don't do as many of them anymore. Typically, it's some level of a performance horse, a horse that's doing competitive dressage, or the owner wants to do competitive dressage, or hunter-jumper, or eventing ... they are pretty much show horses, or a horse that the owner wants to show, so there is the performance involved.

DC: What types of problems do you usually see with the horses? What types of techniques or instruments do you use to adjust them?

Dr. Gleason: What we teach at the AVCA is basically what we consider to be Diversified techniques. We teach adjusting by hand.

In the advanced courses that we have, we may teach some Activator<sup>®</sup> type of adjusting. We are very much opposed to the use of mallets or 2x4s or pieces of equipment that ensure a large amount of leverage. That's not necessary. We don't believe it's necessary.

I know there's people out there doing that kind of stuff that are helping the animals, but to me and the people that I teach with in the course through the AVCA, if you understand the joint mechanics, and the physics of the adjustment, of the thrust, acceleration is very important. It's not how big of a hammer you use, it's how quick you are with the thrust. You don't have to move it very far. None of these joints move very much in the spine of a horse. The surface area may be twice the size of a facet joint in a human, but it doesn't require a hammer to overcome restrictive barriers in these particular joints. You can do it with your hands, and you can do it very, very safely, without injuring the animal.

DC: What's the biggest difference that you see between adjusting humans and horses?

Dr. Gleason: I get real dirty. I can't give you just one. I can do things with my animal clients that I would get arrested for doing with my human clients. For instance, letting them tell me they appreciate what I just did.

Your human patients don't turn around and give you a big smack on the face, and horses, they are affectionate animals. They will lick you and nuzzle and, you know, play with your nose and stuff like that. They are also capable of showing displeasure; a horse can kill you with a kick or a bite.

Now with the human patient, you're going to put up with the emotional aspect of the healing process and dealing with all those issues. You listen to your client, to your patients when they're complaining or whining or moaning or whatever. I don't have to deal with that with the animals so much, but they do kick and bite, so it's not all roses, that's for sure.

DC: Do you see the results faster with your animal patients?

Dr. Gleason: I think I do, yes. The humans can tell you. They get off the table and it's like, "Oh, my goodness. I can breathe. I can take a deep breath." The horse can't say that, but when you finish the adjustment and they take a deep breath and sigh and put their head down and they're almost asleep, they're so relaxed, it's very clear that you've made some changes in that animal. Then when the rider or owner tells you that day or the next day that they had the best ride they've ever had, then you know that you've made a change for that animal.

Typically, I find that animals do respond quite rapidly. A really common thing, as an example, is that I'll have a dog that comes in and they're getting up there -- 10, 12, 13 years old. One of the complaints is that the dog can't jump in the car or get on the couch or go up and down the stairs like they used to. We'll get them adjusted, and I caution the owner not to expect miracles right away, but typically -- not every time, but typically -- the dog will leave the office and jump in the car

before the owner can even offer to help them. So it's immediate. The animal is better. They're able to do stuff they weren't able to do.

DC: Would you say that's the best part of your job?

Dr. Gleason: That is a big part. I enjoy the rapport that I have with animals. If I'm in a room and there's an animal in the room, that animal and I know that where they're supposed to be is in my lap. That's just where I'm comfortable, and the animals know that. I typically get a response from owners such as "My dog doesn't like big men" or "My horse hates men," and I never have problems with that. I usually don't have problems with that, and animals that typically have those kinds of problems don't seem to be affected in my presence.

DC: Is there a downside to adjusting the animals?

Dr. Gleason: Yes. Because the animals respond faster, you need a higher turnover. Even the maintenance aspect of my practice, there's not a sufficient volume like there would be in a human practice. I constantly have to educate the veterinarians as to what animal chiropractic is about so that I can get referrals. I also have to educate the public about chiropractic so I can get new patients.

Another upside is that this is primarily a cash practice. I don't have to deal with third-party pay. I don't have to deal with Medicare or MediCal. Occasionally, I will get a workers' comp case. In particular, with police dogs or police horses, if I'm seeing them, it's usually a work comp case through the veterinarian. The vet does the paperwork, but it's still a work comp case.

In the last ten years, I've seen two horses and a dog that were represented along with the owners by attorneys for car accidents in personal injury cases. Again, the veterinarian handles the paperwork, but I was involved with the case. But Blue Cross, Blue Shield ... that stuff, I don't have to deal with that.

DC: So that is one of the advantages.

Dr. Gleason: It is. And you know, it's interesting. A lot of the people that come to a course, and even a lot of the people that are taking Dr. Inman's course, that's one of their main interests. They think, hey, they're getting out of the managed care market and into a cash practice. I think if that's your primary motive, it's a mistake. I know people who are actually afraid of animals, and if you're afraid of animals, you should not be at this seminar. There's just no reason for you to be doing this.

DC: Where do you see veterinary chiropractic going in the next decade or so? How do you see it advancing in the future?

Dr. Gleason: That's a really good question. I've been involved with some of the activities between the veterinary board and the chiropractic board in the last three or four years, and I'm not happy about the way that it's gone. I know there are some changes that are happening in a positive direction, but I'm worried. There are certain factions within the chiropractic profession that don't feel that animal chiropractic is of any importance whatsoever.

The AVCA got a letter from the attorneys representing the ACA a few years ago telling us that we couldn't use the word "chiropractic" because the word chiropractic legally is defined as involving humans only. I have a very big problem with that, especially when they mentioned in the letter that historically that was never the case. In fact, historically, the Palmers had a veterinary clinic at the school back in the 1910s. Animal chiropractic has been a part of chiropractic since its inception.

The other aspect of it is that we are up against the veterinary profession, which without question has a monopoly on health care for animals. The legal definition of veterinary medicine includes health care of any kind. I'm up against that problem every single day, and I'm not sure how that's going to turn out.

I would like to see cooperation. I teach a course down in Australia. RMIT is offering a master's course in animal chiropractic, and that course is open to veterinarians and chiropractors. In Australia, we're seeing more cooperation between the two professions. They're working together to control the quality of people who are working on the animals, whereas in California, for instance, the chiropractic board wants to draw a line in the sand and say you can't cross over this line, and the vet board wants to draw a line in the sand and say you can't cross over, so everybody loses control of what goes on. I don't think that's right.

DC: That would eventually lead to a loss in quality as well.

Dr. Gleason: Absolutely. It makes it easier for the lay practitioner. There are a tremendous number of lay people performing manipulation or "chiropractic" on animals. Because there is no licensing for animal chiropractic, anybody who wants to print cards can do it. And there are, especially in the field of equine work, a tremendous number of people that have no formal training. They have maybe a few months of riding with another lay practitioner, and they're doing serious long lever manipulation. Again, they don't hurt every animal they work on, but it's not the safest way to adjust. I don't even consider it adjusting -- it is long lever manipulation. It's just tough to deal with right now.

DC: If somebody is interested in learning more about animal chiropractic, or becoming certified in veterinary chiropractic, who would they contact?

Dr. Gleason: I'm happy to answer questions when I can. Quite often, my day ends at 9:00 or 10:00 at night, but another thing is to call Options for Animals and the American Veterinary Chiropractic Association. They're related. The office is in Hillside, Illinois, and their number is 309-658-2920.

Technically, at this point, AVCA is the professional organization, and Options for Animals is the educational organization, but it's the same people in the same office. They can send people information on the course, and that same number is available to the public if they want to find out who has the advanced training in their area. Our course is also open to both veterinarians and chiropractors, and it's almost always half and half. There are probably 300 DCs who have been through the course and another 300 veterinarians who have been through the course, about half of whom have finished all the requirements and are considered certified would be on the referral list. A big part of what they do at the AVCA office is make those kinds of referrals.

DC: Is there anything else you'd like to add about animal chiropractic? One final message you might want to say to the profession?

Dr. Gleason: I would encourage people to learn more about it. I started doing animals before I went through the course, but the AVCA course will help you eliminate a lot of mistakes that you might make otherwise.

I don't want to discourage people from trying to adjust, either. On the other hand, I saw a dog a while ago that a doctor had done a side posture on, kind of a lumbar roll. It was on a 14-year-old poodle, and the dog was paralyzed for four days because of the adjustment. You really need to know what you're doing. You can't just apply everything; you need to know the anatomy first. That is very important.

DC: Thank you, Dr. Gleason.

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