

## The Adjustment -- Responses from the Field

Editor's note: Don Petersen's 7-29-96 "Report of Findings" posed two questions:

1. Should we teach MDs to adjust?
2. If not, what can the profession do to persuade those teaching MDs to adjust to cease the practice?

This is the second and last installment of responses from the profession to those queries. Thank you for participating. We have received an overwhelming number of responses, and while we can't print them all, we have selected and edited a representative sampling.

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NO, but the Reality is YES

Wouldn't it be nice if we had the political power to require anyone who wishes to provide skilled spinal adjusting to either attend chiropractic school or obtain 2,000+ postgraduate hours with lab and examination(s)? Isn't that what our options are if we wanted to prescribe medication? Unfortunately, we do not have the political power, money, or a monopoly on these procedures, and it saddens me that we have to even contemplate this question.

I wish our profession could sit back and just say NO, but the reality is that MDs who want to learn manipulative or spinal adjusting techniques can certainly learn them from other providers, such as a physical therapist or osteopathic physician. I am flattered that some within the medical profession have recognized that we are the most qualified and knowledgeable providers of skilled spinal adjusting.

Have we forgotten what it was like to be a student? Let's not forget the awkwardness of doctor-patient positioning, the hours of skilled palpation, the difficulty of finding end joint motion and the confidence needed to overcome our natural inhibitions of applying specific high velocity procedures on a live human body. Do you really think they can learn these procedures in just weekend courses? Could you? Also, I personally do not believe that anyone can require the skill to become and maintain a high level of proficiency in spinal manipulation unless they commit themselves to providing these procedures on a daily basis.

This is why I feel that programs such as these should only be done through CCE accredited postgraduate colleges where the content can be monitored.

So yes I am in favor of the idea instructing MDs to manipulate, because I know if it is done by high quality individual DCs like John Triano or James Cox who can throw so much information at you that your head spins. I feel certain that by sharing this knowledge and letting them attempt to provide these often complex procedures that the vast majority will go out and find a good chiropractor.

*Peter DeFranco, DC*  
*Bessemer, Alabama*

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## NO, but Chiro's Don't Have the Backbone

The adjustment should most definitely be restricted to chiropractors, but attacking the person teaching the MDs is the wrong approach. It does though make a good forum for discussion and possibly consolidating the ever elusive unified chiropractic opinion.

As a Palmer College student, I have the responsibility to find my own patients from the general public. While speaking with a potential patient about the validity and need for chiropractic care, he told me he would have to ask his doctor first to make sure it was "OK." He informed me that his doctor was generally in favor of chiropractic. What made him think this? His doctor (an MD) adjusts his neck all the time. Yes folks, we've got trouble right here in Chiro City.

We need to solicit our state legislators similar to that of Washington and Kansas and have it be law that only those who have chiropractic training from a chiropractic college may perform the adjustment. That is the root of the problem, but chiropractors don't have the backbone to bond together long enough to get the job done.

In the words of Dr. Glen Stillwagon, by not staking our claim to the adjustment, by not bonding together as a unified political front, we are giving our right to the adjustment away. Without a unified chiropractic front, our legal gain is but a toothless lion. On a daily basis, one chiropractor at a time, state by state, we are simply giving our right to the adjustment away.

*Bruce Gwinnup*  
*Palmer College student*

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## NO -- "You Don't Have to Be a Rocket Scientist"

Dear Editor:

A few months ago I attempted to enroll in an osteopathic class at Michigan State. I was told DCs were not qualified. I spoke to Phil Greenman, DO, and Dana Lawrence, DC, concerning this. I have heard nothing. Soon after I was also informed I cannot use the Osteopathic Manipulation Code in the CPT manual, but should use another lower paying code. You don't have to be a rocket scientist.

*L.G. Sassadeck, DC*  
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## No Short-Cuts

The topic of teaching chiropractic to MDs has been discussed at length by many of the leaders of our profession around the world. This was debated at length at the 1993 WFC General Assembly in London, at which I had the pleasure of being Singapore's national delegate.

The consensus of those represented there was that we can teach adjusting to MDs, but that there

are no short-cuts for them. It was decided that for a medical doctor to become a chiropractor, he must be in residence at an accredited college for two years.

Under what other terms should we teach then to adjust? I say none.

I have had the pleasure to be a supervisor to several chiropractic clinical residents from three different schools. These men and women had all spent years in residence learning their adjustive skills, and most were good, but none of them was truly 100 percent proficient. Adjusting cannot be taught in so short a time. Chiropractic management can not be learned in so short a time.

Medics can probably learn enough in a weekend to be dangerous to their patients and the reputation of adjusting/ manipulation as a safe and effective treatment option.

To censure those in the profession who are teaching MDs is not so difficult. Remember, money talks. Boycott their seminars, courses and licensed equipment. If you are on the continuing education committee for your association, do not invite them to speak at or participate in your programs. State boards should consider it a serious breach of professional ethics and consider suspension of license.

*Janet Ruth Sosna, DC, CCSP  
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Republic of Singapore*

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Resounding NO!

The answer to your first question is a resounding NO!

If a DC is licensed under a state statute which states that you must be a DC to practice chiropractic and that anyone else practicing chiropractic (spinal adjustment) in that state is guilty under the law of practicing chiropractic without a license, then wouldn't it be considered unprofessional conduct for a licensed DC to be an accomplice to the breaking of that statute by teaching non-DCs spinal adjusting? In my opinion, state boards should then take action based on unprofessional conduct.

*Russell B. Grazier, DC  
Portsmouth, New Hampshire*

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"Why Are They Doing It?"

A better question is, "Why are they doing it?" I believe it's for the money and that's exactly how we should respond. Do not support these doctors in any way. Do not take their seminars. Do not buy their table (there are some great look-a-like tables). Do not buy their adjusting equipment.

*Eddie L. Hansen, DC  
Bellingham, Washington*

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NO, Lack "Inside-Out"

I am not in favor of this idea. Medical doctors lack our philosophy of "inside-out" healing and will bastardize our beloved chiropractic.

*Noel Abood, DC*  
*Solon, Ohio*

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NO, Unethical

No, we should not teach MDs and other health care professionals how to adjust.

The Federation of Chiropractic Licensing Boards should make it plain to all who do that it is unethical and that they might risk revocation of their license to practice.

*Dorothy Darst Peaslee, DC*  
*Fairfield, Iowa*

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NO, Will Lose Uniqueness

We should not teach MDs to manipulate. I would think any chiropractor wouldn't even think of it. I have had patients switch to osteopaths because they pay less going to an osteopath, even though the osteopath charges twice as much. This is because insurance reimburses the osteopath a lot more. The only reason I get some of the patients back is because the osteopath is very rough. If they are taught specific chiropractic adjustments we will lose our uniqueness as a profession.

I would ask all members of the chiropractic profession to not associate in any way with any chiropractor who is teaching chiropractic techniques to other health care providers. They may have all kinds of rationalizations for teaching other health care providers chiropractic, but then greed for money at the expense of the profession is the only logical one.

*Steven J. Zwiener, DC*  
*Kennewick, Washington*

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YES, but No Plumbers

Why not? I do think you should draw the line at plumbers though. A wrench versus an activator gun, no contest.

Do you believe a chiropractic adjustment by a chiropractor only will turn things around? Chiropractic is great for spinal problems and relieves most problems. Don't make it something only a chiropractor can do.

*Perry D. Postulka, DC*  
*La Mesa, California*

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## NO, Like Col. Sanders Giving Away His 11 Herbs and Spices

Years ago I was active in both the medical and dental fields. I have been where MDs are, but they have not been where I am. Teaching MDs about chiropractic would be like Col. Sanders giving away his 11 herbs and spices. I feel sorry for any real chiropractor wanting to gain personal benefit from doing so, or self-aggrandizing himself to a profession that could care less and wants to destroy us.

It is a distinct possibility that if we teach MDs to adjust, more malpractice lawsuits will be filed against the MDs who try to use said knowledge. James B. Saul, BA, DC Mountain View, California

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## NO, They're Learning Brain Surgery

The individuals doing this are learning how to do brain surgery on weekends and do not have the time to be IN CHIROPRACTIC.

Question 2. Probably nothing.

Keeping the faith.

*Bob Ressmeyer, DC  
Columbus, Georgia*

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## Demonstrating OK, Teaching, NO

The scientific exchange of information and data is critical between all health care professionals. Demonstrating chiropractic techniques is essential in understanding what we do for other professionals. The line should be drawn when individuals steal the role of chiropractic colleges, i.e., teach students to become doctors of chiropractic.

- Lobby and work with appropriate lawmakers to give DCs sole right to manipulative techniques.
- Communicate to malpractice carriers to be sure they understand additional risks they incur when their insurers are holding themselves out to be "quasi-chiropractic colleges" to instruct non-DCs in chiropractic treatment.

*Jeffrey K. Stout, DC  
Normal, Illinois*

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## NO, Where Were They When DCs Were Being Jailed

My father was one of the last two chiropractors jailed in this country in 1974 for practicing what "THEY" now want "US" to teach them. I also remember being a child of five years old wondering where my father was on one of the other times he was arrested and incarcerated in the 1950s.

Then as I grew older I couldn't understand how "THEY" could arrest and try to destroy people like this who were simply trying to help other people.

Sure, share technical research and clinical information. Sure, encourage interprofessional cooperation and foster appropriate referral mechanisms, but encourage the practice of our technical components by those ill-qualified? I think not! If "THEY" can already adjust or manipulate legally, then let "THEM" figure it out for themselves. Just because they CAN doesn't mean they SHOULD!

There appears to be a few amongst us in this profession who need to start thinking. In the words of Forrest Gump, "Stupid is as stupid does!"

As to how to stop such activities? Perhaps create a professional moral imperative and stop purchasing their products and seminars.

*Steven R. Mooring, DC*  
*Pueblo, Colorado*

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NO, and Ostracize Those That Do

I agree with you, DCs should not teach MDs to adjust. If DCs do teach MDs how to adjust or use flexion/distraction, their names should be put on a list for all to know so that they may be ostracized from the profession until they apologize and change their ways.

*Christopher J. Feltes, DC*  
*Aurora, Illinois*

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YES, MDs Are Not the Enemy!

Medical doctors are not the enemy! I have worked with dozens who are open-minded and supportive of chiropractic. Although they do not understand what we do, they recognize many of the benefits.

As for teaching medical doctors to manipulate, I see nothing wrong with this. If an MD sincerely wants to learn how to use this wonderful treatment then I applaud his/her efforts and see no reason why he shouldn't. Are chiropractors the only providers "holy" enough to practice manipulation with beneficial results to the patients? No, it is a training issue. The chiropractic profession should take the initiative and offer an extensive program (100-200 hours) for medical providers so they can be certified in manipulative techniques. This would do a great deal to promote the profession of chiropractic and open doors for chiropractors.

Let's face it. This is all about the pocketbook, which is what most DCs are really concerned with anyway.

*Jeffrey Schneider, DC*  
*Naval Hospital*  
*Camp Pendleton, California*

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## NO, Next the MDs Will Offer Crash Course on Manipulation

NO, MDs have no business adjusting. If they want to learn to adjust, go to chiropractic school and learn the philosophy and practice of chiropractic just as we all did. There are DCs out there who aren't making it in the real world (I think they know who they are), and they are willing to sell out chiropractic for a quick buck. What do they think will happen when an MD offers a quick crash course on manipulation therapy? Do they (the DCs teaching them) think the MD would choose a DC or MD to learn from?

As for Mr. Cox, you can control who is in your courses. All you have to do on your registration cards is state for "Doctors of Chiropractic Only."

*S.P.C.*

*DC*

*Forest City, North Carolina*

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## YES, If They Learn from the Best Teachers

As proof of the effectiveness of manipulation becomes evident, more and more MDs will want to learn manipulative procedures. And they will learn them. For the sake of the patients they will be treating, and for the sake of the doctors/students themselves, they should learn from the best teachers in the best settings. I can envision a day when chiropractors will be sought out to teach manipulation in medical schools and osteopathic schools.

But should chiropractors (or anyone else) offer weekend manipulation seminars to any practitioner that signs up? No, not now, not ever.

What should we do? Work for the establishment of pan-professional manual therapy programs that incorporate MD/DC dialog and ongoing supervision of recent graduates and others who are just beginning to employ manipulative techniques.

*David J. Eliot*

*Smithtown, New York*

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## NO, We Should Remain Unique

Should we teach MDs to adjust? No!

Connecticut is presently in the process of legislatively preventing MDs from practicing chiropractic. If we as a body see the value in protecting our profession, it is certain that the profession of chiropractic would support this view. The colleges of chiropractic should also be solicited for their response so we can identify the solidarity of this profession.

Chiropractic is, and should remain, a unique and distinct part of the healing arts with anyone wishing to practice this profession having to be fully trained under the prescribed curriculum of a chiropractic college. Anyone individually teaching techniques of chiropractic to MDs would be doing our profession an injustice and should be exposed by having their license revoked and ostracized.

*Julius L. Sanna, MS, DC*  
*Danbury, Connecticut*

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Absolutely NOT

Should we teach MDs to adjust (manipulate)? ABSOLUTELY NOT!

Stop participating in any seminars or buying any texts or equipment of those individuals involved.  
Stop funding the schools who use these individuals as instructors or researchers.

After 31 years of practice, it never ceases to amaze me how people in our profession always want to hurt the profession. They can rationalize it to themselves, but it is still a SELL-OUT.

*Seymour Shribnik, DC*  
*Weymouth, Massachusetts*

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You're Not the Only One

No, Mr. Petersen, you aren't the only one. I'm confident that you are part of a vast majority of conscientious crusading doctors and patients of chiropractic. I'm also confident that those who would welcome medical-types among our ranks have never sacrificed for chiropractic. Sorry, but I can't believe this is happening. It seems that there are those who do believe a leopard can change his spots, but I don't. I guess it's ironic that we can now call some medical doctors "stepchildren of the chiropractic profession."

I can see it now. A common low back patient gets "conservative chiropractic care" performed by a staff doctors (MD) "trained and proficient in the art and science of chiropractic manipulation."  
Then the patient gets a recommendation for surgery, which fails.  
Now the patient has to live with the disability, convinced of having already tried specific chiropractic adjustments.

*David Carter, DC*  
*Siloam Springs, Arkansas*

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