

A Quick Reality Check

In a recent issue of Dynamic Chiropractic there was an article which represented one in a series of debates on the topic of "chiropractic medicine," and as usual, osteopathic medicine was brought up as an example of what can go wrong if chiropractic physicians begin prescribing medicines and perhaps doing minor surgery. After hearing this notion many times before, I thought it would be appropriate to explore this notion further.

Chiropractic and Osteopathic, Bonesetting Brothers

In the August 12, 1994 issue of DC, Gerard Clum, DC, president of Palmer College of Chiropractic West, said in his article, "Doctor of Chiropractic Medicine, Round II,":

"Osteopathy has relinquished any appreciation for the procedure that was once the core of osteopathic practice." He goes on to state:

Why do we assume that the seductive element of moving square into the realm of medicine would impact chiropractic less than it did osteopathy?"

I have found that many osteopaths still have a great appreciation for manipulation and some refer out to DCs for manipulation, but what has been the effect of osteopathic physicians moving from manipulation only to prescribing medications, doing minor surgery, and doing the occasional manipulation? Why would they make a move from manipulation as a core to moving "square into the realm of medicine?"

Osteopathic Free Exams ... Not

To those who think like Dr. Clum, I would ask these questions:

1. Which profession has become the de facto family doctor for many rural resident across the country, doing everything from sewing up gaping wounds to prescribing heart medications.
2. Which profession is, because of its entry level family practice position, well positioned to be in a key role in the coming health care reform?
3. On the other hand, which profession has members doing mall shows and hawking free exams, desperately seeking new patients on a continual basis? Which profession is split apart by constant battling and bickering within the profession and is being attacked in print and on television?

It's obvious that the osteopathic profession is referenced in the first two questions, and chiropractic is unfortunately is referenced in the third question.

Have osteopathic physicians been damaged by abandoning manipulation as their

primary mode of treatment? Are they in malls and giving free exams, free x-rays, and free treatments just to get patients in the door? Have they, in toto, been injured by moving "square into the realm of medicine?" No, quite the opposite. Most osteopathic doctors have more patients than they can handle, are thought of very highly in the community, and their services are seen as crucial to that community.

Osteopathic physicians can still legally manipulate if they wish, but they can do so much more. I am concerned that for many doctors in our profession, manipulation only has become a sort of religion. If manipulation only was such a superior method of treatment, why is it that chiropractic remains to be the only health care system I am aware of which maintains this approach? Homeopathy, naturopathy, osteopathy, traditional Chinese medicine, allopathic, unani, ayurvedic, traditional Hawaiian or American Indian medicine all incorporate medications taken orally to treat various conditions: most also include minor surgery. To be the family physician that many DCs want to be, as opposed to the orthopractic type musculoskeletal specialist, one must be able to take care of family illnesses and injuries. What adjustment takes care of the gaping wound that requires stitches? What adjustment do you use to deliver a baby? What adjustment do you use to set a broken bone? And on and on.

The fact is that our profession is a great one. We have better bedside manners than MDs. We have a better sense of prevention based care, and we deserve to be seen as doctors and essential parts of a community. We should quit giving our services away, but as long as we are seen as only "back crackers" only (and neck and back cracking are seen as something anyone can do), our profession will remain sitting in the back behind the osteopathic doctors when it comes to reimbursement and placement in the health care system.

Proponents of change are often seen as traitors early on in a movement and later as visionaries. The debate on the course of our profession must occasionally be interjected with a reality check. I hope this brief article has been just such an intervention.

John Raymond Baker, DC
Beaumont, Texas

FEBRUARY 1995