

Chiropractic Goes to Nepal

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As a chiropractic doctor invited to assist a medical mission to Nepal, I was part of a team of Christian doctors officially invited by the government of Nepal, perhaps the first time a chiropractic doctor has been to Nepal to care for its people.

Nepal, located on the northeastern border of India and China's southwestern border, is a small rugged country nestled beneath the Himalayan mountain range, Mt. Everest being one of its famous peaks.

Our team of 104 people consisted of surgeons, internists, anesthesiologists, pharmacists, dentists, optometrists, nurses and myself, the only DC. As I anticipated they had no idea what a DC did, nor how useful I would be. I explained to the interpreter for the team that I was a doctor who took care of people with back pain, leg pain, neck pain and headaches. This was translated as the back and bone doctor. A sign to this effect was posted and I was immediately swamped. I saw 68 people that first day and between 80-90 patients each day. My interpreter informed me that some people had waited three days to receive my care. Of all the doctors I was the one they liked to see, I was told, because I made them feel better.

This was a prime opportunity for the medical doctors and nurses to observe what chiropractic does. Many of them came around my table to watch. The first day some nurses came by and closely observed that I was treating knees and feet. The result was that I became the orthopedist and they sent me all their orthopedic cases. The medical personnel were impressed with what a chiropractor could do.

We saw many cases of gangrenous lesions, tumors and other conditions that were best treated medically.

I was not able to see much of the country having been assigned to the hospital where there was a great need for the chiropractic care. We could have easily used eight to ten more DCs.

A major problem we confronted was the lack of sanitation, resulting in a broad spectrum of parasitic infections. Malnutrition was very pronounced with rice being the main staple. Being a clinical nutritionist I was able to help many people find the proper food, i.e., proteins, seeds, nuts or vegetables that would address these particular deficits. I instructed mothers how to better feed their children by expanding beyond the basic rice diet. Two medical doctors were quite interested in the nutritional aspects of what I was doing and confessed that they felt their training greatly lacked any knowledge in nutrition.

As I was seeing so many patients with parasites, an MD stated that unless the patient is severely acute with parasites, the procedure is not to give them any drugs to kill the parasites. The body had come to a homeostasis and if you give them a drug to kill the parasites, it will be the next infection of parasites that could be severely detrimental, even lethal. In discussing with the other medical staff the effect of all the antibiotics they were using, aside from the patient maybe feeling better, what will happen in two or three weeks when they are no longer on these antibiotics? The

system being wide open, they will probably contract an even worse infection. The medical staff had no answer to this vulnerability and I could see they really had to think about what they were doing.

I spent a lot of time teaching strengthening and rehabilitative exercises for all kinds of conditions. The people of Nepal are small and very fit. They didn't have disc problems but tended to have more sacroiliac problems due to their heavy lifting practices. We know how well this condition responds to chiropractic and several patients returned a few days following their care to tell me, through their interpreter, how much better they felt.

It was extremely rewarding to treat these people and they were very appreciative to receive our care. Many had suffered with their condition for a long time and it was gratifying to see the relief expressed on their faces. Following their treatment they would bow in respectful appreciation.

I want to thank Dr. Jim Miller and Dr. Bob Zimmer along with my competent office staff for so ably covering my practice during my three week absence to Nepal. A short-term mission tour such as this will be the time of your life.

The people of Nepal were receptive and appreciative of our compassionate health care. People do not care how much we know until they know how much we care.

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