

Thank You Consumer Reports!

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Has anyone written a letter to Consumer Reports thanking them for their critique of chiropractic? Think about it. Had chiropractic commissioned a blue ribbon committee of independent scientists to give us their unabashed opinion, it could have cost millions of dollars. They did it for us for free. We really should thank them.

Much of their criticism was, in my opinion, factual reporting of the widely differing views within the chiropractic profession. They echoed the two most vocal wings of the chiropractic spectrum. One extreme claims that we are trying to act like "real" doctors when our primary goal should be only pure, simple, unadulterated adjusting. The other extreme cries that we must renounce outdated "philosophical" concepts and become orthopedic specialists who manipulate.

The article was negative in tone, but still contained a lot of objective reporting. Chiropractic must avoid the tendency to rant, scream, and cry foul about this report. Too much griping may obfuscate our ability to learn from its inherent accuracy. As they mentioned in the first page, "the problems we identified two decades ago still exist." Will they again write this two decades from now? I hope not.

As DCs throughout the '80s progressively lost most group health care reimbursement, they could blame the bias of the HMO. The Wall Street Journal article on pediatric chiropractic was labeled by the profession as an inside hit job by the AMA. When the Clinton administration told chiropractors that the new health plan included generous physical therapy benefits without chiropractic coverage, DCs screamed, "Bias, as usual!" After the "20/20" show bashed the profession's unscientific, rag-tag minority, chiropractors in droves claimed biased, distorted journalism. And the chiropractic profession undoubtedly had a right to criticize the recent newspaper articles extolling the dangers of stroke from cervical manipulation. But DCs will have a hard time producing more than hollow howls against Consumer Reports.

Consumer Reports is well known as being a fair and unbiased magazine. Yes, they have their faults and prejudices. But the majority of lay people, lawmakers, and health care professionals view their findings as credible and objective. Too much public criticism of their magazine may backfire. The public could see chiropractors as a childish profession crying about an article that accurately describes the public's general attitude. The public sees chiropractors as family back and neck doctors who also teach preventative health care. They do not see us as being a substitute for their family physician.

The idea that DCs will compete in the near future with the family care physician and internist is a pipe dream. The basic principle of primary care involves the diagnosis, testing, and risk assessment of many serious and acute diseases. With this responsibility will go the baggage of high technology, and the mastery of the physiological and chemical basis of disease.

The likelihood that chiropractors will have the diagnostic technology, the hospital exposure, or the pharmaceutical knowledge to compete with medical school education in the near future is ridiculous. Consumer Reports is correct in asserting that the diagnosis and management of serious

health problems has never been part of the chiropractic practice and naturally falls within the allopathic domain.

The rising incidence of cancer and HIV infection means that DCs would be responsible for screening and understanding the areas far beyond their historical area of expertise. Understanding the actions of hundreds of drugs and being well versed in the values of different types of surgeries are foreign to the doctor of chiropractic. Being able to safely draw blood would be an important part of the primary care doctor's domain. I doubt if all chiropractors and colleges have the desire to develop nationwide, uniform protocols for drawing and preserving disease blood and urine samples.

It is my opinion that the majority of the profession see themselves as being specialized in the biomechanical treatment of the musculoskeletal system with a secondary emphasis in the treatment of early-onset chronic, degenerative disease. Treatment of musculoskeletal injuries and the prevention of disease has always been the mainstay of the chiropractic profession. This holistically oriented, biomechanical practice has almost no resemblance to the allopathic practice of the present day primary care physician. And it bears little resemblance to the super straights of our profession who refuse to diagnose disease. Seizing the middle ground may be the only possible tack to preserve our reputation and navigate the treacherous waters of health care reform.

Most of the "allied" health care professions have only survived because they have not battled medicine. Podiatrists, dentists, physical therapists, optometrists, etc., are all able to thrive only because they have carved out a niche which is not a historical strength of the medical doctor. When homeopaths battled the medical profession their destruction was inevitable. When faced with the possibility of years of struggle or a golden parachute, osteopaths abandoned their roots in natural healing and joined the allopathic fold.

Someday optometrists may be considered primary care doctors of the eye and podiatrists primary care doctors of the foot. Dentists may be allowed this status as regards the mouth and chiropractors, if they play their cards right, could be allowed primary care status for the musculoskeletal system.

Professional survival depends on chiropractic's unique practice of providing manipulation, exercise and high level wellness care. Chiropractic has a niche which will probably become more important as our society moves away from costly drugs and surgery and begins to stress the benefits of prevention and wellness. It must be realized that a profession cannot be composed of holistic musculoskeletal specialists and primary care generalists simultaneously.

It is my opinion that chiropractors must maintain their portal of entry status and strive to be considered primary "health" care providers or primary musculoskeletal providers. But we must avoid trying to be seen as primary "medical" care doctors. We need to be grouped with doctors of acupuncture, naturopathic physicians, holistic medical doctors, wide scope physical therapists, etc., and not with primary care physicians and internists.

By maintaining our historical practice rights we will be more likely to solidify our place in the health care system. To try to compete with physicians presently specialized in primary care medicine, internal medicine, and infectious disease will be futile. Continual battles will only rob us of our limited financial base and splinter us into super straights, mixers, and orthopractors mortally wounding our present professional status.

Chiropractic must have five primary goals to heal the profession and prepare for success in our future health care system:

1. The profession must improve the quality of chiropractic education and begin attracting the best and brightest students into the colleges. Smart students will make smart choices regarding the future direction of the profession. Schools that do not comply with improved quality standards must be closed. To strengthen the profession's political hand, schools must develop ties with major colleges and medical centers. This will give chiropractic access to the best people, technology, and information.
2. Many states have confusing, conflicting licensing laws. Putting energy into creating a national chiropractic license with uniform requirements and responsibilities will make DCs more able to compete with other professions for national and government managed care contracts. Chiropractors must define more clearly who they are now before they seek to change the basic foundation of their scope of practice. Chiropractic leaders cannot worry anymore about offending the vocal minorities; the profession's survival is at stake.
3. Chiropractic must enforce standards of care parameters. DCs must work with government and the insurance industry to eliminate the few bad apples that give the majority of hard working doctors a bad name. It is time to realize that chiropractors that are targeted by the media as "quacks" are costing the profession millions of dollars in lost revenues. Ethical doctors are tarnished by their errant colleague's silly behavior.
4. If some doctors desire to practice primary care doctoring, let them set up diplomate programs in internal medicine. Let them organize college-sponsored, scientific continuing education programs covering systemic disease, straight chiropractic, OTC pharmaceuticals, botanical medicine, pediatrics, etc. We should be open minded about allowing doctors to establish many areas of specialization. However, we must stick to the natural, biomechanical principles which define our primary scope of practice.
5. We must immediately discontinue our war against medical doctors. Striving to gain the practice rights of another, more powerful profession is a futile endeavor. There is little doubt that specialized physicians, osteopaths, physician assistants, and advanced level nurses will become partners with the internist and family care physician in taking care of the primary medical needs of the American public. Chiropractors, being viewed as spine and sports specialists with no training in pharmaceuticals and surgery, will not be accepted into this select group in the near future.

If we continue to spend our valuable time and resources battling to radically expand our national practice parameters, physical therapists may solidify their recent gains and become the providers of choice for musculoskeletal complaints, sports injuries, and high level wellness. Physical therapists are presently establishing doctoral level programs in physical medicine. They could easily supplant us as the primary care providers of manipulation and high level wellness if we continue struggling to become "real" doctors.

Doctors of acupuncture and naturopathic physicians are licensed in many states. These professions are slowly, steadily adding new schools and gaining improved right to practice laws in all parts of the country. Unless DCs continue to develop their historical foothold as the primary practitioners of wellness and preventative health care, they may see these professions rapidly surpassing them in strength and popularity.

In summary, I would like to propose that we all write Consumer Reports and thank them for helping to define our weaknesses. Hopefully, in 20 years, the unscrupulous management gurus, hustlers, hucksters, and unscientific cults will be only a footnote in the history of chiropractic. I plan to be around for the following article and expect a much better report card next time.

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