

We Get Letters

A once proud profession has taken the turtle adjustment

Dear Editor:

In the November 4, 1994 edition of Dynamic Chiropractic, page 8, there is a letter to the editor written by Attorney Allan M. Freedman. I have known Mr. Freedman since 1976 and would like to make the following points to the chiropractic profession.

1. Mr. Freedman's credentials with respect to the chiropractic profession are without equal. He has worked unselfishly for many years to bring about positive changes and to ensure chiropractic's future.
2. Mr. Freedman is very much aware of what is going on in the academic and political forums of our profession, and in a lot of cases, more so than the very people who employ him (thank you, Mr. Freedman).
3. During the last 12 months I have traveled to numerous countries and lectured to thousands of chiropractors and without exception one thread of disappointment is conspicuously obvious, and that is, few if any (chiropractors) know anything about OMSI and even fewer care. A good example of this occurred when David Cassidy joined the OMSI. Did you hear the uproar or were you deafened by the crack of chiropractic silence! In all fairness, Dr. Cassidy has now resigned from the OMSI, however, he has left a significant number of people with a sour attitude toward his future credibility. Mr. Freedman states in his letter: "Your reports have been most informative and I trust are not falling upon deaf ears within the profession." I disagree vehemently as the sounds of silence echo throughout the profession!
4. "Has the profession become so complacent in its approach to the fact that it is the third largest primary health care provider that it has been blind-sided? I would suggest that this is exactly what has happened" (emphasis mine). I totally agree with his statement. Self-absorption, too much money, a lack of genuine continuing education, constant in-fighting and back stabbing, all coupled with part-time office hours and greed, has turned a once proud profession into a huge group who has taken the turtle adjustment. The profession cannot simply draw its bloated head inside its shell and ignore the obvious, or will it?
5. Mr. Freeman continues: "Since the orthopractors have developed a 'code of ethics,' and are able to refer a patient to a practitioner who abides by such a code, is it not likely that patients will soon be investigating what alternative practitioners are available?" The obvious riposte to this is that it was the chiropractic profession who first created a set of guidelines. Come on now, you remember the Guidelines for Chiropractic Quality Assurance and Practice Parameters, the book that was sent to each doctor of chiropractic? I wonder how many actually took the time to read this text, apart from the vocal minority who took the time to

critique without forethought. Wake up, this is 1994 and patients are not going to continue to buy your wares when someone else has a better product.

6. "... I would suggest that any chiropractors who involve themselves in orthopractic should take a long, hard look at what they have done." Consider this, a few weeks ago, while at one of our many chiropractic colleges, an instructor asked the class how many had received chiropractic care prior to being accepted into the college. It should come as no surprise to anyone that in excess of two thirds had never been to a chiropractor. The question that begs to be asked is this: "Who is accepting these students into our educational institutions, and since they have no idea what the chiropractic way of life is, it is no wonder that they join organizations such as OMSI." I believe that the onus falls on the admissions departments of the chiropractic colleges first, and the misguided, nonbelieving, failing, or not practicing and confused chiropractor second.

Ask yourself this question: How many of my colleagues are members or are anticipating becoming members of the OMSI? When you have an answer, look at their practices, if they have one, and you will see failure or someone who is hiding behind the word "research" or "literature review" as a means to justify their inability to be a proud doctor of chiropractic with a firm grip on the chiropractic adjustment and way of life. Please do not be shocked by the magnitude of these failures as there are more than you think.

7) Mr. Freedman makes another significant statement when he states, "Mark my words: If the associations do not take immediate steps to remove any relationship between themselves and chiropractors who join orthopractic, the profession is doomed." What is wrong with these statements?! 1) Associations taking a stand, 2) removing orthopractic DCs from the register, and 3) doomed profession. Not meaning to rain on anyone's parade, but it will be a foggy day in purgatory before the first two happen, however if we don't get off of our collective, corpulent, and complacent butts the third is a given. I can't speak with certainty about the rest of the world, but as of this moment I am genuinely confused why our local associations allow these orthopractors to bill under the disguise of being a doctor of chiropractic by convenience. Why not take away or suspend their license to bill and send them back to school (without pay) for some chiropractic education, and if they are hiding behind the research umbrella, then cut off their funds as well.

So do we fight or take the turtle adjustment? I know what I am doing, do you?

Keith Innes, DC
Ontario, Canada

ACA President Russell Sawyer Jr., Responds to Dr. Keating

Dear Editor:

I would challenge Dr. Keating to reflect a bit and realize that it was the American Chiropractic Association (a political organization) and the National Chiropractic Mutual Insurance Company (the leading chiropractic malpractice insurance company) who funded the RAND study, which enabled those chiropractic and medical research scientists to gain greater credible data. The cost of that study was about one million dollars. It is also the American Chiropractic Association which has given millions of dollars to the Foundation for Chiropractic Education and Research (FCER) enabling them to fund various "research projects" to which everyone proudly refers when asked

about research. I would remind Dr. Keating that we do not live in a perfect world and those who engage in the politics of the profession are as valuable as those who engage in research. I believe the ACA has demonstrated over and over again, not only the commitments to research, but the importance of our researchers.

I am not a researcher. I am a pragmatic (perhaps a bit old- fashioned) realistic practitioner who is writing to my colleagues about chiropractic. I have not perhaps incorporated all the checks and balances I should or could have. I do not dispute the fact that the studies, i.e., RAND, Meade, and Manga, are not research that "proves" chiropractic in the strict sense of the word, but we can and I believe should at least take the opportunity to put our best foot forward and use every small morsel of hope to demonstrate to the chiropractic community that doomsday is not around the corner. As the president of the ACA, I want to see the rainbow, not the rain. I want members to know that pragmatic research such as Meade et al., is demonstrating the fact that chiropractic care compared with hospital care is effective in cost. It is also effective over long periods of time. This provides compelling evidence that chiropractic is beneficial in chronic as well as acute cases.

So in essence, I took some literary license with the facts and shared some hope and perhaps some positive outlooks in these tough, difficult days of ever-increasing bad economic news.

I do stand guilty of all the things Dr. Keating so aptly describes as lacking the technical scientific basis for what I say. Those doctors of chiropractic writing for scientific journals, writing testimony for Congress, writing a professional speech for researchers and any other forum which requires the rigors of scientific scrutiny, need be aware of the advice of Dr. Keating and use research articles as they were intended. The ACA is well aware of the need to provide a credible and trustworthy review of research to preserve the integrity not only of the process, but of the researchers. ACA will continue to do that and be more aware of the need for such scrupulous oversight.

I however feel a bit less restrained when I write my articles intended to provide general information, a ray of hope, a bit of motivation, a respite from the negativity which surrounds us each day, and to avoid being so precise as to make my message bland.

Perhaps my articles are not for the Dr. Keating's of the world, but are intended to give the membership of the ACA some news in general enough terms to generate some positive feelings in the minds of the reader. I have taken the critical comments of Dr. Keating very seriously and in the future will try to be a bit more sensitive to the need to review the articles because of the position I hold.

In closing, I would ask Dr. Keating to not be so critical of every single article written by every single chiropractor. I ask him to continue to take to task those DCs who are in the scientific community and who purport to speak the language of science, and give those of us who volunteer our time to serve our membership a bit of slack and perhaps some understanding that we do not profess or possess the scientific background to warrant such high standards of criticism. I appreciate the efforts of Dr. Keating and I am thankful that we have the critical commentary to help advance the image of the profession.

As an old farmer from Nebraska used to say, "I'd rather say I seen somethin' when I saw somethin', than say I saw somethin' when I ain't seen nothin' ..."

Russell Sawyer Jr., DC
President, ACA

Do You Know "Happy Back?"

Dear Editor:

Do you by any chance know or ever heard of a kidney-shaped cushion called "Happy Back"?

If you could help on this I would appreciate it.

*John G. Watson, DC
1540 Haywood Road
Hendersonville, NC 28739*

Smart Questions Will Keep Us on the Right Road

Dear Editor:

As chiropractic enters the next 100 years, it is good to hear that someone thinks that we ought to take some time and ask a few "smart" questions about technology before someone tries to feed us the answers they want us to hear. Shaun Callahan's letter about how we should enter the information age as a profession (in the October 7, 1994 issue of "DC") is very wise. Chiropractic is too important of a profession to rush out and be speed demons of the information highway before we know if the road takes us where we want to go.

The fact that Chiro-Serve is taking the time to ask questions first and come up with a plan that meets our profession's needs is highly commendable. Finally, a company that is not trying to peddle their products to us in order to make the quick buck!

*Debra Barlett, DC
Bowie, Maryland*

"Dr. Seaman need not fear for the minds of the 'unsuspecting and vulnerable students.'"

Dear Editor:

I was delighted by Dr. Seaman's article "Nociception and Subluxation" in the 10/21/94 issue. It is very important for all chiropractors to identify those philosophic and scientific bonds that unite us. There has been too many articles that poke fun at BOOPers, failing to note that the basis of their concept (interference of mental impulses) is dead on. This article was well written as well as fair in its assessment of the "old school." The Palmer tenets are amazingly accurate, considering the dearth of evidence there was at that time upon which to base them.

I graduated from Palmer, Davenport and saw Dr. Fred Barge speak frequently. He is a great supporter of the school, as well as the profession. I love his philosophy lectures because they are dramatic and energetic. Our teachers exposed us to science, and pointed out the holes in BOOP philosophy. Dr. Seaman need not fear for the minds of the "unsuspecting and vulnerable students." Students who choose to close their minds to the wealth of clinical and research literature cited in our classes, and found in our libraries, become BOOPers by default, not because of exposure to the good Dr. Barge.

I hope his future articles might be more specific than simply stating "green vegetables and cold water fish" and "we can consume macronutrients" when recommending dietary interventions for us recent students. I only received a four credit course on nutrition, and would like more facts or citations to support the dietary advice I offer patients. I look forward to future articles from Dr. Seaman and hope that other authors will adopt his method of seeing the unifying similarities between the various schools of chiropractic thought. We are on the eve of our second century, and I hope it will not be marred by the same schisms and antipathies that divided chiropractic in the first.

Frank Painter, DC
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