

## Defining Chiropractic

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Throughout chiropractic's embattled history, this question redundantly pops up. Why can't you chiropractors define your profession? This, my friends, is the basic reason we are not unified today. "Unity, without uniformity," without a definitive stance is impossible.

The September 1992 ACA/FYI article "The Writing on the Wall," by Dr. Jerome McAndrews, posed salient questions in respect to chiropractic's position on a number of subjects. I read this article with interest, and I agree with Dr. McAndrews that the profession certainly must address many of the questions he posed. Actually, he was speaking to the right audience on this subject, namely the ACA membership. You see, this has always been the problem with ACA; it refuses to take a definitive stance and, instead, espouses a "states' rights" position. Whatever a state law decrees chiropractic to be, that's fine with ACA, including the use of acupuncture, over-the-counter pharmaceuticals, minor surgery, homeopathic remedies, and injectable vitamins. The list can go on, but I believe the reader can see my point. Such eclecticism does not lead to a definitive stance for the profession, and yes I heartily agree we do need such a stance. Chiropractic must take a definite position on many matters in public health and chiropractic practice.

Dr. McAndrews posed some 20 questions in his article, and I respectfully suggest that there is an organization that does answer many of these questions in its policy handbook. Let us look at some of Dr. McAndrews questions, for instance:

1. "What is chiropractic's role?" The ICA Policy Handbook spells this out plainly. It is "the detection, location, control, reduction, and correction of the vertebral subluxation."
2. "Why doesn't the profession have guidelines?" The ICA does have guidelines, but the ACA with its states' rights stance cannot develop guidelines. The ACA simply states that chiropractic is what each individualistic state says it is. With this stance, how can they produce guidelines?
- 4 & 5. "What is a subluxation and a subluxation complex?" The handbook addresses this too, but I do believe it could be more explicit.
9. "What is the professions' stand on immunization, fluoridation?" The ICA opposes both and says so clearly and succinctly in the handbook.
10. "How do you deal with nutrition, including the use of megavitamins?" This too is clearly addressed in the handbook. Nutritional advice is used "for the overall enhancement of the health of the patient."
18. Do chiropractors treat disease? (Dr. McAndrews produced a list.) The ICA states that chiropractors "hold forth no cure for any disease," this too is clearly explained in the ICA Policy Handbook.

Now the ACA has somewhere between 9,500 and 10,000 full dues-paying members, and the ICA between 2,500 and 3,000 such members, for a grand total of approximately 13,000 members. This, is a profession that boasts a total of 40,000 professionals. It is high time that our people become

involved in a national chiropractic organization. In doing so I would ask the individual chiropractor to pick one or the other or support both, as they are both decent organizations. But if you want an organization that definitely takes a stand on public health issues and defines chiropractic, that organization is the ICA. A simple request of the ICA's Washington office will bring you the ICA Policy Handbook.

Now I can hear the hue and cry of "When you guys merge into one organization, then I'll join." A feeble excuse indeed! One big organization that cannot define what it is, will be useless in determining the future of a singular profession. This basically was the major hurdle that the last merger effort could not overcome. ACA refused, and still refuses, to take a stand on questions such as Dr. McAndrews has posed. He ended his article in the ACA/FYI with a quote from his brother, ACA Attorney George McAndrews. Let me offer you yet another quote from counselor McAndrews. He advises us thusly:

"Don't even concentrate on gaining acceptance; there are factors beyond the limits of health care that dictate against acceptance. Try to gain respect. Beat the hell out of them in the marketplace. Let them worry about being hanged at dawn. Nothing focuses the mind like knowing you're going to be hanged in the morning."

In the light of our times, let's quit trying to pacify, placate, and ingratiate medicine. Let's stand for what we are, a uniquely different, nontherapeutic approach to health care and health maintenance. A profession antithetical to the "outside in" treatment concepts of medicine, let us not worry any longer about acceptance; I repeat the words of George McAndrews:

"Beat the hell out of them in the marketplace, let them worry about being hanged at dawn."

Enuf said,

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