Dynamic Chiropractic

CHIROPRACTIC (GENERAL)

We Get Letters

Editor's note: We're still getting letters responding to the "Point/Counterpoint" between Drs. Fred Barge and James Winterstein in the October 25, 1991 issue of "DC." As their debate obviously struck a responsive chord within the profession, we're presenting two more letters on this subject: one from Joseph Sasso, D.C., president of the Federation of Straight Chiropractic Organizations (FSCO) taking Dr. Winterstein to task; and a letter from Keith Charlton, D.C., former president of the Queensland Branch of the Australian Chiropractors' Association (1978-84), on the editorial review board of JMPT, Philosophical Constructs for the Chiropractic Profession, and the Back Letter for Chiropractors, addressing Dr. Barge's comments.

Dr. Sasso Speaks Out

After having read Dr. Winterstein's response to Dr. Fred Barge's recent open letter to "DC," I am compelled to comment.

I find it incredible that the president of a chiropractic college (Dr. Winterstein) actually believes that "... in some instances the adjustment might produce a negative effect," or that "whether the effect that is produced comes about as a result of release of nerve interference by correction of a subluxation remains to be determined."

Is that what is being taught to the students of National College?

A chiropractor who is well-founded in philosophy recognizes that it is impossible for an adjustment to produce a negative effect. An adjustment restores a vertebra to its proper position in relationship to the nervous system. It is corrective in nature and always produces a positive effect in the body. What cannot be predicted with any degree of reliability, however, is precisely what that positive effect may be. Maybe the (fill-in symptom) would be resolved. Maybe it wouldn't. Maybe the patient will live three days longer. Who knows?

Doesn't Dr. Winterstein understand that regardless of the presence or absence of disease or symptomatology, the body will always function more efficiently when free from vertebral subluxation? That we are right in this principle seems beyond question. Further strengthening of its scientific validity is welcomed. According to the narrow model and expectations of Dr. Winterstein, only a symptomatic change would suffice.

A manipulation, on the other hand, is designed to increase the range of motion in a given joint beyond its present capability. It may serve to increase the range of motion toward its physiological maximum or it may attempt to give the joint a greater mobility than it was ever intended to have. Clearly, only the manipulation has the possibility of causing a negative effect in the body. It's fairly obvious that Dr. Winterstein is confusing an adjustment with a manipulation. It is possible that during a manipulation, while increasing the mobility of a joint, an adjustment may be effected. An adjustment may even increase the mobility of a joint. But the two are not synonymous. An increased range of motion may be just one of the results of the correction of a subluxation along with the aforementioned unpredictable positive effect. For the manipulator, it is the sole objective.

Knowledge of proper adjusting technique (the "how") without a well-founded philosophical background (the "why") can only result in the possibility of instances where "... the adjustment might produce a negative effect."

Dr. Morinis' quote was one area of this discourse that all chiropractors should embed in their subconscious -- "Dispossessed of its philosophy, chiropractic is dispossessed of its uniqueness and perhaps its future."

It is unfortunate that Dr. Winterstein has also regurgitated that old, tired rhetoric of attempting to reclassify philosophy with dogma. No one would sensibly rely on dogma as a model for their professional philosophy. Chiropractic philosophy is based on logic and sound reasoning. It is truly the thinking chiropractor's way of establishing professional objectives, regardless of being a straight or a mixer.

Dr. Winterstein believes that if it were not for the changes sparked by National College of Chiropractic and himself, we would continue to be "widely viewed as bunk, heir to the tradition of blood-letting and rattlesnake oil," as was stated in the Time magazine article. It's quite apparent that he has fallen for the AMA propaganda intended to fool the general public. The divergent direction he is taking NCC in seems to appease the AMA more so than to provide what the public needs.

Also, Dr. Winterstein goes on to state that the government and other third parties that chiropractors turn to for reimbursement may consider the release of nerve interference, through the correction of a subluxation, an invalid concept. When did we start relying on the government and third parties as the barometer of our validity? And if reimbursement were an adequate criterion of validity, why does the law enforcement community lock up prostitutes? After all, they get paid.

I also cannot fully agree with Dr. Barge. He states, "The public, at one time, definitely understood that chiropractic was a drugless, bloodless alternative to medical care." This may have been the goal of the mixer, but straight chiropractic has always blazed its own trail in keeping our profession separate and distinct. We are not a replacement or alternative to medical care.

In closing, Dr. Winterstein asks that we "... use the Philosophical Constructs for its intended purpose." But is its intended purpose, as he states, to "... write scholarly papers that can lead the profession to think -- papers which will provide for development of our philosophy and which will provide for the ability of our profession to discard its dogma," or is its purpose to further the philosophical dalliance of Dr. Winterstein and National College and, in doing so, eliminate the heart and soul of straight chiropractic, its philosophy?

Joseph P. Sasso, D.C. Clifton, New Jersey

Dr. Charlton Speaks Out

Early in this century, the great Ludwig Wittgenstein called philosophy a battle against the bewitchment of our intelligence by means of language, but I doubt he had Dr. Barge in mind at the

time. Dr. Barge has included my article¹ in the new journal, Philosophical Constructs for the

Chiropractic Profession in his criticsms,² although he has taken undue license with my views (partly misquoting them, mostly ignoring them), and he has made unsupported allegations about other of my views not canvassed by me in my article (and not, in fact, held by me). Furthermore, he has criticized the National College for publishing a journal of philosophy in chiropractic. The

former might be excusable if I had not expressed those views elsewhere, but I have,^{3,4,5,6,7,8,9,10} and the latter is simply silly.

It seems that the notion of National and its invited contributors having the temerity to enter the discourse on philosophy in chiropractic in a manifestly public and compelling way has gotten up Dr. Barge's nose. He objects to what he sees to be an attempt to hijack this discourse. Is he right?

Those who pursue the discipline of philosophy as a vocation recognize several of its properties as characteristic: It deals with the clarification of concepts or ideas and with the clearer usage of key terms, and it proceeds not by unsupported declarations, or by experimentation (there are no philosophy laboratories), but by reasoning and argument. No matter how important an issue, or how wide its scope, a declaratory statement is not worthy of being called philosophical unless it is defended or attacked by reasoning, not by recourse to authority, intuition or faith. Philosophy, indeed, is process. Ipso facto, I'm not so sure Dr. Barge's stuff should be called philosophy. Certainly, his writing lacks the explanatory power characteristic of real philosophy, and he seems keen to suppress the examination of the profession's rich theoretical heritage, rather than exploring and refining it. Perhaps he should call his stuff Chiropractic Politics and Rhetoric; there would be nothing wrong with this.

If, on the other hand, he wishes to participate persuasively in the great philosophy conversation this remarkable profession, with its splendid theoretical heritage, can uniquely have, I suggest the following: After familiarizing himself with the already considerable peer-reviewed literature on philosophy in chiropractic periodicals (something he has clearly yet to do), and gaining an understanding of the nature of the discipline of philosophy (again, something he has clearly not yet done), Dr. Barge can rise above vilifying others for their sincerely held views and address the issues they raise. He can, as a purveyor of views allegedly at variance with the views of others, avail himself of Dr. Winterstein's suggestion to contribute appropriate scholarly articles to future issues of Philosophical Constructs articulating that variance.

Because I am not so sanguine as Dr. Barge appears to be about the utility of confrontation (I am keen to be constructive), I propose that he begins his better contribution to the great conversation with a test: When we wish to know whether any proposition is true, either of chiropractic or to our purpose as a profession, we must learn whether by conceivable variation of circumstances we can cause it to break down, either by its exclusion of what we think an essence of chiropractic, or its inclusion of what we are resolved to reject as inconsistent with that essence. His participation in the establishment of this aspect of the debate will provide a useful foundation for further dialogue. We will never reach unanimity, but we could aim at least for core consensus. And we could be kinder to one another. Perhaps this would not offend Dr. Barge's sensitivities and would set him well on the way to a really useful contribution to the philosophical debate. Undeniably, Dr. Winterstein and National have provided us with a particularly useful vehicle for this. If Dr. Barge's stuff really is philosophy in the proper sense, the instrument for its disclosure is now at hand. In fact, if his philosophical, as opposed to political or rhetorical, constructs are valuable, why would he deny the chiropractic profession access to a clearly developed, persuasive expression of them?

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Role Reversal

Your story about the chiropractor selling chiropractic manipulation to the medics, and then the chiropractic board coming to the rescue,¹ reminds me of a similar situation here in Nebraska, except the roles are reversed: It is the chiropractic board selling the adjustments and an individual chiropractor attempting to remedy the situation. Briefly, the chiropractic board here told the physical therapy board that the PTs could do spinal adjustments if the chiropractors could continue

using modalities.² When confronted, the chiropractic board claimed that spinal adjustment was already written into the physical therapy law3 which later, after checking, proved to be false. But

now it is in their scope, thanks to the chiropractic board's physiotherapy fettish. And so life goes on.

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Editor's note: This letter from Dr. Chester Wilk is in response to the article, "Unity?" in "Report of My Findings" (December 6, 1991 issue).

What Is Unity?

Unity is when people with diverging views have the maturity or objective realization that they can disagree with each other while remaining under one roof. They agree to disagree. This does not mean that they compromise or surrender their principles but that they can fight for what they believe in, and if at first their views do not prevail within their organization, they keep on trying.

Doing less means quitting. They realize that nothing can be accomplished under separate roofs but confusion of going in separate directions, duplications of costs, and counterproductive results. Does it mean that they must agree with the policies of their national organization? Of course not. But they also realize without cross fertilization, which can only occur under one roof, can they ever present a united front to a highly competitive and sometimes hostile society. They also realize that the costs and waste of multiple headquarters, staffs, officers, employees, duplicate travel, separate lobbying, and resulting confusion because of a variety of conflicting policies, are the adverse results of dichotomy. They realize that intraprofessional dialogue under one roof is the only way to successfully make organized chiropractic conduct itself responsibly and receptively to the majority of the chiropractic profession, while dichotomy divides and weakens the profession and even obstructs healthy competition.

A practical definition for unity: based on the above facts, it is simply to have the professional maturity to agree to disagree, together, and not run away and establish multiple dynasties based on differing views, charismatic leaders, and dogma.

Is unity achievable? Yes indeed, because we have a higher caliber of college students today than ever in our history. These are professional students with significant college backgrounds upon entering chiropractic colleges. It's not like the olden days when we had naive "greenhorn" kids right out of high school which could be molded or led according to the views of some charismatic leaders. Today these same students will simply not be led like sheep and can think for themselves, and when they do, will view dichotomy with disgust. They represent our future. Chester Wilk, D.C., P.C. Chicago, Illinois

JANUARY 1992

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