Dynamic Chiropractic

PHILOSOPHY

We Get Letters

A New Approach Is Needed

Dear Editor:

I could not help but be struck with the wisdom of the editorial by Al Neuharth, founder of USA Today, in his January 10, 1992 editorial, on the "National Organization of Women (Now)."

He states, "You don't climb the stairway to success with the same tactics you use to break the doors down. You substitute smarts for screams, finesse for fists."

Perhaps that is a lesson chiropractic can and should learn from the recent victory with the AMA. It will be 15 years since the initial litigation was initiated against the AMA, and almost 30 years since the Committee on Quackery was formed in 1963. Yet, today in the mail I received a newspaper article about a chiropractor in Randolph, New Jersey who is suing his hospital for privileges.

His case is going to be difficult, in case his attorney did not tell him. He alleges that he has suffered "economic harm." To state that is one thing, to prove it is another. He also alleges injury to his career, which again is going to be difficult to prove unless the hospital did something as they did in Chinnici. Even if Dr. Petrocco gets hospital staff privileges by demanding them, what good will they do without the total cooperation of the staff? How will he have endeared himself to the medical staff, the board of trustees, and the hospital nursing and ancillary staff? He will have won an empty victory if he wins, and it will have cost him plenty in the process.

Maybe it is time we look at the position we take in litigation and confrontation and determine that there is a better way in this decade. Maybe Mr. Neuharth's editorial about NOW is applicable to chiropractic. There is no doubt that many in this profession think that every problem can be resolved with litigation, but if the facts be known, we have lost more ground via the courts than we have gained.

Perhaps it is time to do some "brainstorming" and recognize that the more visible we become as a profession, the more there will be opportunities for those who oppose chiropractic to begin to take "pot shots." Whether these pot shots come in the way of a television comment as was recently the case on "Health Alert," or in the way of NCAHF talking about chiropractic, the fact remains we are now getting into the mainstream, and we (the profession) are going to have to learn how to take the critical comments. Perhaps this is the only arena in which we can learn from the attorneys. No profession is maligned more than attorneys, no profession is viewed with more disdain and distrust, and yet they are a respected and learned profession whose views are sought on every major social and political issue of our time.

All in all, the battles will be there, but the methods of battle will have to be changed. I believe it is essential that the chiropractic profession begin to understand that the old name calling and old dredging up of the Committee on Quackery, and the AMA lawsuit, will soon have to be given a proper burial. We now need to fight on the battleground of scientific research and outcomes. We can win the new battle if we are prepared properly.

Hopefully many DCs will also decide that confrontation is no longer a viable option (save for those rare cases), and cooperation is the new method of operation for the 90s.

Louis Sportelli, D.C. Palmerton, Pennsylvania

A Breach of Fiduciary Duty

Dear Editor:

I read "Michigan -- the Rest of the Story" by Dr. Thomas Klapp, president of the Michigan Chiropractic Council, with more than casual interest, and, I must admit, mounting impatience. Dr. Klapp's defense of the "two party system" in Michigan (and similarly afflicted states) rings hollow in light of the successful outcome of the 1989 merger of the two chiropractic associations here in Colorado.

As the former executive director of the smaller of the two organizations, I heard Dr. Klapp's comments in many forms, over and over again. "We are more aggressive, our lobbyists are better, we are the true defenders of chiropractic, we are more effective, etc. Up until the date of the merger and even beyond, there were those on both sides who continued to insist that they "...would never associate with those kinds of chiropractors."

Thankfully, for the profession here in Colorado, cooler heads with a long range of vision prevailed. While I won't deny that disagreement on various issues continues to exist, at least we are speaking with one, strong, consolidated voice to the outside world. For many years, legislators told us, "Go home and figure out what you want and who you are, and then come back and we'll talk."

Now, we don't just talk about proactive PR in wistful, wishful tones, we have the membership support and the funding base to actually do it, including adding a full time PR professional to our association staff. Now, our newsletters contain actual news -- insurance, legislative, national issues, etc., as opposed to propaganda designed to increase membership in one organization at the expense of the others. Now, we pay one staff, one rent, one set of expenses.

In light of the economy in general and the effects of the changing health care delivery system on the chiropractic profession, I submit that from an economic standpoint alone, it is a breach of fiduciary duty for a chiropractic board of directors to allow this type of waste to continue. If you consider that a board is charged with managing all of its resources to the best possible outcome, it is inconceivable that those differences that appear to be so significant cannot be channeled and put to use for the advancement of the profession and its patients. (For, lest we forget, in the end it is the patient's interest which must remain uppermost.) If the egos and personal agendas involved in maintaining two or more state chiropractic associations cannot subjugate themselves to the best interests of those they ultimately serve -- the patients -- I would hope that their respective memberships take a hard look at their leadership and do what is necessary to ensure the strongest possible representation through the most efficient and effective use of resources. To do less is to accept second best.

(The opinions expressed herein are not necessarily those of the Colorado Chiropractic Association, its board of directors, its staff, or membership.)

Darcy McKinstry
Executive Administrator

The "Old Time Religion of Chiropractic"

Dear Editor:

I just finished reading your January 17, 1992 issue of Dynamic Chiropractic, and I would like to thank Dr. Dennis W. Hertenstein for his excellent article, "I'm Angry." He said it all and summed up beautifully what my husband has felt about chiropractic since beginning his practice three years ago.

My husband, Dr. Donald Cox, graduated in 1988 from Palmer College, something that he had dreamed of for almost 10 years after being healed by Dr. Gordon Bliss of Newport, Washington. Dr. Bliss is one of the "old timers" whom Dr. Hertenstein wrote about in his article.

Never once, since beginning his practice, has my husband been tempted by all the practice management "hoopla" and get rich practice fixes. Sure, the first few years were tight, but his excellent and ethical treatment of patients is paying off, even in the economically depressed area that we live in.

I would like to tell Dr. Hertenstein to rest assured there are new chiropractors out in the field who are attempting to keep chiropractic well and who believe in the "old time religion of chiropractic." I would also like to thank him and his esteemed colleagues who are committed to saving this wonderful profession.

Laura Cox Libby, Montana

No Safety Net

Dear Editor:

I have just read the January 17, 1992 issue of Dynamic Chiropractic and would like to make comments concerning the HEAL program and the issue of censorship.

Regarding the HEAL programs, when a chiropractor "goes into the world," there is no safety net to catch him. A medical student has a large, very well-developed network to leap into. After his residency or internship, he can build his practice by working the local hospital ER room, among other possibilities. By contrast, there were only three ways a chiropractor could get into a hospital: be admitted, visit or volunteer. Either way we were worse than odd man out. We have no established network to assure our economic safety. Most chiropractic associateships are a form of modified indentured servitude, which is why so many fail. There is no other safety net.

Meanwhile, the various government loan programs were seeing a large number of defaults attributed to chiropractors. I don't remember seeing any dollar amounts being named. But I do know that on a recent TV program, some MDs were being sued for failure to pay back loans. In a recent lancet, an American doctor had a bill of \$93,000. She reneged on her loan repayments agreement, and with penalties she owed \$719,000. (She tied to escape by filing for bankruptcy but

it wasn't allowed.) I'm sure the dollar value of these loans far exceed whatever the individual chiropractors defaulted on. I wonder if that story is unusual regarding the amount which is mentioned (\$93,000). As a chiropractic student, I could never get more than \$1,500 each year. How's that for "equality." Much the same argument can be used to defend the podiatrist's arguments. Incidentally, the government negotiated an end to the stand-off. She will work for the Bureau of Prisons for four years. When is the last time chiropractors had a similar option. Again, we are the odd man out.

Reading between the lines of Dr. Clum's report, the Bush administration continues to get health and welfare policy from the AMA. Ask this additional question: What was the total value of chiropractic student loan defaults and the total value of medical student loan defaults? Now add the penalties and tell me who is the bigger offender. Remember who has the safety net as well.

Regarding your comments about censorship: Bravo! I have not requested having my name taken off the "other" newspaper because I have low blood pressure. The best cure for it is not medication or salty snacks but a reading of a back issue of that tabloid. That will raise my blood pressure in about five minutes, but with side effects: How can anyone be so racist about his profession? It is a pity that any vehicle for genuine expression has been turned into an opportunity for the selfish interest of a few would-be spoilers.

I was brought up to believe that newspapers had an obligation to examine issues, not to generate them. When a newspaper generates an issue as the "other" newspaper did, it becomes an organ of propaganda. In this case the "other" newspaper isn't even very good propaganda.

Roland Toth, D.C. Dayton, Ohio

Setting the Record Straight

Dear Editor:

This is in reply to a letter you published in the January 30, 1992 issue of Dynamic Chiropractic, from John F. Hart, D.C., Blair, Nebraska. Once again Dr. Hart, a super straight chiropractor, twists the truth to try and embarrass the mainstream chiropractors of Nebraska. Regarding his issue of physical therapists and chiropractors using modalities, the following sequence is correct:

1. Our law allows the use of chiropractic physiotherapy.

Someone from the physical therapy board challenged an individual chiropractor that had written in his yellow page ad -- chiropractic "physical therapy." During a combined hearing with the members of the board of examiners of both bodies, it was agreed that chiropractors would not advertise "physical therapy" and physical therapists would not perform "spinal adjustments."

Instead of the chiropractic board condoning spinal adjustments by physical therapists, they reached an agreement with their board that no physical therapists in Nebraska would ever legally perform a spinal adjustment.

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