

PHILOSOPHY

Viewpoints from Involvement -- 20/20 -- Do We Have a Visual Problem?

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Do you think that "20/20" gave an inappropriate vision of the chiropractic profession? Perhaps it was our problem. Too bad our vision wasn't 20/20 a number of years ago when a goodly portion of our chiropractic hierarchy insisted on calling our chiropractic art of adjustment, manipulation. We did this because manipulation was accepted and, oh, how some of us wanted to be accepted by the so-called "scientific community." Worse yet, this same group of chiropractic leaders added the final insult, they called our adjustment "SMT," spinal manipulative therapy; now our care became therapy. Never mind that the founder bewailed such terminology, as to manipulation he stated:

"Chiropractors do not manipulate; they do not use the process of manipulating; they adjust."

And as to therapy:

"A chiropractor is not a therapeutist; he is not interested in discovering nor in applying remedies. To be versed in therapeutics would be to be skilled in the use and application of remedies. Chiropractors do not use remedies."

To defend this change in terminology many said the terms manipulation and adjustment were synonymous. "Manipulation is accepted so let's use it as a foot in the door strategy." But, as I have often said before, "foot in the door means stuck foot." How can we extricate ourselves from this mess?

The "20/20" program on February 21, 1992 is a perfect example of what quagmire we have out foot stuck in. The moderator simply stated that medical people would be trained to supply manipulation. The entire program basically said, oh, chiropractors are okay, for manipulation of certain types of muscular backaches, but anything with a nerve involvement was verboten. The chiropractor in the program even said she referred out all asthma cases. The medical doctor said medical assessment should come first to rule out any neurological problems, and when bed rest and drugs failed, a referral to a DC might be in order.

The manipulation shown was just that. The chiropractor delivered the million dollar role, such specificity. This old osteopathic long-lever move hopes to adjust. At least there was some truth to the dialogue as this truly was a manipulation. Then finally, upon a question of how the public should choose a chiropractor, the moderator said certainly do not go to one who claims to help anything other than backaches. Horrors, the final insult, but yet, that's what a goodly number of the manipulators in this profession mainly want to see. They summarily refer out asthma, otitis media, heart arrhythmias, epilepsy, hemorrhoids, chronic reoccurring infections, etc., all without chiropractic subluxation analysis and adjustment to allow the recuperative survival values of the body a chance to function in an improved manner after the release of neuroforaminal encroachment. Have we taken our 30 pieces of silver in exchange for medical acceptance? Will it lead to subscription? Watch for legislation to do just that. As B.J. Palmer so succinctly stated:

"To accept anything medical in legislation is to accept something short of full freedom, which is

part slavery."

But the real poignant lesson that we should learn from "20/20" is that our reference to our own singular term adjustment as manipulation has taken from us the only claim to a singular approach to subluxation correction. The adjustment by prior rights is/was ours; manipulation has been practiced for centuries and is common domain to medicine. Thanks to our own tactical blunder the medical profession has found a solution. Let me quote directly from the actual transcript of the "20/20" program to explain what I mean.

Moderator, Hugh Downs: "Hmm. Tim, are we talking here about chiropractic or about manipulation generally?"

Answer, Dr. Timothy Johnson: "Really about manipulation. The RAND report was about manipulation, not about chiropractors. Now, it happens in this country that 90 percent of manipulations are done by chiropractors, so we are also talking about them. But I think other professions can learn to do manipulations. Osteopaths do them, physical therapists certainly do very similar things. And I think we will be training doctors to do manipulations. So that's what we're really talking about."

Wake up chiropractors. Any distinct discipline has its own unique vernacular. Let's reinstate our claim to the adjustment, by prior rights it is singularly ours. Perhaps the first change should come from FCER. Their annual conference on spinal manipulation should be changed to adjustment.

Why not tell them so.

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Next time Dr. Barge speaks on Diagnosis.

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