

PHILOSOPHY

Chiropractic Philosophy

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What is your paradigm? What I am asking, and what I want you to ask yourself is, what is the prevailing framework of theories and concepts in which you work? But to bring it closer to our subject of philosophy, I want to ask you how you see the world of chiropractic? Not visually, but in terms of perceiving, understanding, and interpreting. I do not mean the political or socioeconomic aspect of it, but the essence of the art and science of chiropractic.

This is a very important question, because it affects how you practice, how much you enjoy your practice, how much good you do for your patients, how you relate to the rest of your chiropractic colleagues, and how you relate to other professionals.

We did not all leave our chiropractic colleges with the same perception, understanding, and interpretation of the essence of the art and science of chiropractic. That in itself is not bad. We do not want our professional education to produce uniform clones that cannot think for themselves. Nor do we want graduates who leave their institutions with such insecurity that all they can do for survival is cloister themselves in the safety and security of a particular philosophical sect, without ever examining it to see if it can stand up to the scrutiny of honest investigation.

Chiropractic, the art of science, will survive no matter what comes along. Chiropractic, the profession, may not.

We are a family split into so many different camps that an outside observer would wonder if we are related at all.

From the chiropractic descending to medicine's paradigm, to the moderate who sees chiropractic as the best approach to natural healing, to the religionist who would make chiropractic a physical/psychic/spiritual phenomena that answers to every malady that attacks the mind and body of man, we have somehow found ourselves in the land of Oz. The problem is that there doesn't seem to be any yellow brick road to lead us to the wizard so we can find our way back home. So we better be like Dorothy and wake up to where we really are.

Is there room for diversity in chiropractic philosophy? I believe so. Is there room for extremism in chiropractic philosophy? I do not believe there is. Before you read on I want to try an experiment with you. What do you see when you look at these drawings?

drawing 1 and 2 here

Most see a profile of a young woman's face and head. Now turn to page xx and look at that drawing. What do you see? What was different? What you were exposed to influenced your perception. No answer is wrong. Yet you can see the same picture differently depending on your frame of reference. This is what has been happening in our profession for years. But instead of understanding and collegial tolerance, we have had schism, strife, and stumbling blocks to our progress.

Some have attributed these problems to philosophy or the lack of it. I do not see philosophy as the

cause of our divisiveness. I see inflated egos, political ambition, avarice, and a form of religious bigotry as the primary causes. But I do not want to address that problem. I just wanted to expand your thinking so you confront these issues intelligently and with a degree of objectivity. How wonderful it would be if this present generation of doctors of chiropractic would provide the solutions rather than contribute further to the problems that divide the chiropractic family.

Now, to my primary subject. I want to share with you how I view the philosophical dimension of our profession. Before I do, I want you to keep in mind the concept of diversity. D.D. Palmer promulgated a philosophy of chiropractic that was changed within one generation of his students. Willard Carver, B.J. Palmer, A.L. Forster, and J.S. Riley all went in somewhat different directions as they became teachers of chiropractic. One thing is certain, correct principles do not change; only our degree of comprehension of these principles and our ways of applying them change.

To me, chiropractic is a whole. As in geometry, the whole must equal the sum of its parts. If any of them are absent, the wholeness is lacking. It is science, art, philosophy, way of life, profession, and natural healing.

Not only must you maintain its wholeness to maintain its integrity, but you must maintain balance. Too many of the internal problems of our profession have arisen because one aspect of chiropractic has been emphasized at the expense of another.

Because of chiropractic's wholeness, the doctor of chiropractic will of necessity give attention to hygiene, diet, and exercise. But because of chiropractic's uniqueness the doctor of chiropractic must particularly focus on the vertebral subluxation complex and all of its components.

We are the only profession that has given attention to this vital dimension of the body's expression of "dis-ease".

There are other health disciplines and lay people who attempt some form of manipulation that is a bastardized imitation or a complete departure from the specific chiropractic adjustment. Their focus is primarily on mechanical dysfunction without a proper consideration of the neurological, visceral, muscular, biochemical, hormonal, and psychological inter-relationships that can be affected by the vertebral subluxation complex.

What concerns me is that there are too many chiropractors who are symptom oriented in their treatment approach, and it is almost exclusively a musculoskeletal one. I have no quarrel with attention to symptoms; they are what originally bring patients into our offices, and the patient rightfully expects alleviation or elimination of his symptoms as a result of the application of our health care discipline. Recitation of symptoms by the patient also gives some clues as to what structural dysfunction may be precipitating them. But we must not let the symptoms govern our approach to the patient's problem. The patient is not sick because he has pneumonia. He has pneumonia because he is sick. As I said before, his symptoms may give you a clue to the structural component of his health problem. However, I should be able to have a patient that is deaf and dumb come into my office and receive the proper care for his health problems as a result of my physical examination and spinal analysis.

Our hands, ears, and eyes are still the most valuable diagnostic tools we have. I am not minimizing the value of some of the diagnostic technology available to us. But I am afraid that we are becoming more and more high tech, and less and less high touch. In the process, we are in jeopardy of losing some of the strongest arguments for chiropractic in the health care marketplace: that it is cost effective and it gets better results without the adverse side effects of drugs and surgery.

With this paradigm, we should be able to position ourselves as the primary health care profession. The public would eventually be educated to consult the chiropractic physician first, except in life and death crisis situations and injuries requiring surgical intervention. That would also place upon us the responsibility to be able to diagnose what is going on in the patient's body so we could make a reasonable determination of what dysfunction can best be chiropractically treated and what requires another discipline or a multidisciplinary approach. That is the role I seek to fulfill as a chiropractic physician.

We chiropractors are extremely fortunate, for our problems lie only with ourselves and not with our science. The case for chiropractic is superlatively attractive, if we make it adequately. Our understanding of it, if deep enough, and our explanation of it, if skillful enough, can attract and influence millions of people to chiropractic care and better health.

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