

CHIROPRACTIC (GENERAL)

Divided We Fall

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A Letter to the Profession:

Chiropractic's battle to establish parity with the major health care professions is still raging. As a result of improvements in research and education, chiropractic now enjoys a much higher level of respect and cooperation within the health care community. Increased public acceptance, third-party reimbursement, and most recently, hospital privileges are all evidence of the expanding role of chiropractic services.

As chiropractic clinical and academic pioneers struggled toward this acceptance, political medicine fought with equal tenacity to eliminate chiropractic. Despite the behind-the-scenes campaign by the AMA to undermine most academic, scientific, and political progress within our profession, chiropractic survived.

Ironically, political medicine's greatest ally in discrediting chiropractic has risen from within the chiropractic profession itself. This group of dogmatic "super-straights" represents only a small, though vocal, segment of chiropractic. Their extremist and inflexible views serve only to retard the natural evolution of chiropractic towards mainstream acceptance. The two most serious threats posed by the super-straights are: division within the profession, and sabotage of fundamental academic and scientific achievements. The following are but two examples of long-term damage carried out by the super-straights upon the chiropractic profession.

The first example relates to one of the greatest accomplishments within chiropractic education: the recognition of the Council on Chiropractic Education (CCE) by the office of education of the Department of Health, Education and Welfare (DHEW) in the early 1970s. Qualified chiropractic colleges fulfilled the academic requirements for CCE, thereby maintaining excellence in chiropractic education. Some colleges, however, failed to measure up to the CCE requirements. Rather than close their doors, these few colleges lobbied instead to establish their own accrediting agency with more lenient standards. This led to the establishment of the Straight Chiropractic Academic Standards Association (SCASA). The game plan was clear: If it is too difficult to score a goal, simply widen the goal posts. The establishment of SCASA not only undermined the efforts of CCE, it jeopardized the legitimacy of chiropractic accreditation and cast doubt on the quality of all chiropractic education.

The second example relates to educational standards for radiologists within the chiropractic profession. The American Chiropractic Board of Radiology (ACBR) has been chiropractic's radiology specialty certification board since the first diplomate exam in 1958. DACBRs presently staff the radiology departments of most CCE accredited schools and administer the duties of clinical radiology, the teaching of undergraduate and postgraduate radiology courses, and the direction of full-time radiology residency programs. Radiology residents in such programs study long hours, teach radiology courses, and do rotations in various hospital and independent radiology departments. Many books and scientific papers are submitted for publication from these radiology departments and from DACBRs in private practice, thereby contributing to the progress of the chiropractic profession. Residents and DACBRs meet regularly for educational seminars and

workshops featuring the greatest minds in medical and chiropractic radiology. DACBRs consult with chiropractic doctors in clinical practice concerning x-ray interpretation -- an important service. The ACBR is a tightly regulated organization that upholds high academic standards which ensure that the chiropractic radiologist is equally competent compared to medical skeletal radiologists.

A fledgling x-ray organization calling itself the Academy of Chiropractic Radiology (hereafter referred to as the Academy) circumvents the high academic standards established by the ACBR. The Academy was founded under a different name in the early 1980s, predominantly by DCs who failed the ACBR diplomate examination. There are no DACBRs in the Academy. The Academy has "widened the goal posts" of educational standards for the chiropractic radiology specialty. The Academy was born in dubious circumstances and has no comparable educational commitment for its organization. The Academy of Chiropractic Radiology forms the same acronym (ACR) as the national medical radiology organization, the American College of Radiology (ACR) which, if not illegal, is at least an embarrassment to the chiropractic profession. Since members of the Academy call themselves diplomates, this acronym (DACR) can be easily confused with the ACBR trademark (DACBR), a situation which, intentional or not, creates confusion among chiropractors. Just as SCASA jeopardizes the legitimacy of accreditation, the existence of the Academy undermines chiropractic's established procedure assuring consistent quality in chiropractic radiology.

To further complicate matters and deepen division within the profession, the International Chiropractors Association (ICA) has recently adopted the Academy as its own radiology specialty organization. This development shouted a clear political message that provincialism prevails.

A profession seeking mainstream recognition and benefits should be supported by a unified academic and scientific infrastructure which aspires to excellence. SCASA and the Academy are an affront to important educational standards and jeopardize professional credibility.

Several steps can be taken by every chiropractor to prevent further deterioration of chiropractic standards and to further establish chiropractic unity.

- 1. DCs should unite within one association to strengthen political action. Join the ACA and contribute your hard earned money only to ACA sanctioned organizations. The ACA may not be perfect, but it is the voice of the majority, and the voice that leads to mainstream acceptance.
- 2. Contribute money only to CCE accredited chiropractic schools.
- 3. Support the elimination of SCASA.
- 4. Support any motions for a chiropractic counterpart to the American Board of Medical Specialties, an independent organization committed to rigid standards that will prevent the unchecked proliferation of dubious specialty groups.

Chiropractors are only as credible as their academic training. The title Doctor of Chiropractic must be synonymous with only the highest ethical and academic standards. Political medicine need not attack chiropractic. They need only watch jubilantly as chiropractic embraces division and weakness, rendering itself unable to offer competition on any significant scale. A strong, unified chiropractic profession is not something the AMA or the super-straights want to confront.

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