

We Get Letters

Dr. Amaro's "What Does Acupuncture Treat?"

Dear Editor:

In your September 1, 1989 issue, you ran an article entitled "Last Week" by John A. Amaro, D.C., F.I.A.C.A., in which he asks, "So what does acupuncture treat?" to which he answers, "What doesn't it treat?" What a ridiculous answer! That statement implies that it treats everything unless the reader can prove otherwise. It's not the reader's responsibility to prove anything; rather it's the writer's responsibility to back his claims with substantial evidence. All he offers as proof is a weak form of evidence, the clinical anecdote. If you accept testimonials as evidence you will end up believing just about anything.

Acupuncturists believe disease is caused by disturbances in the body's electromagnetic energy, called "Chi," and that health is restored when its balance is restored. Acupuncture is one method to accomplish this. Beliefs such as this places acupuncture squarely in the realm of the mystico-religious elements and doesn't lead one to an understanding of how nature works.

Numerous controlled studies have shown that the claims for acupuncture have no scientific validity.¹ It is these trials that are systematically ignored by acupuncturists. "Of course, it does not follow that because acupuncture is based on irrational principles, it has no therapeutic value. Placebo effect, itself, is valuable, but then a spade should be called a spade [sic]. As a corollary, it should be stated that neither does it follow that because acupuncture has been used for 5,000 years, there must be something to it. Just think of astrology."²

After investigating acupuncture it became clear to me that it can possibly treat only one malady on a temporary basis: pain, and this can certainly be accomplished without inserting needles into the body. It has been theorized that acupuncture may cause presynaptic inhibition of the nociceptive system, which is one explanation of why the needles can be inserted anywhere, not just the classical Chinese acupuncture points.

It's interesting to note that a paper given out at "Acuspark" seminars about the use of the instrument states, "The Acuspark Instrument is not commercially marketed and no health claims can be made for it." My sentiments exactly.

References

1. Skrabanek, P., Acupuncture and Endorphines, Lancet 1984; 1:220.
2. Skrabanek, P., Acupuncture and the Age of Unreason, Lancet, May 26, 1984; 1169-71

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Dear Editor:

I wish to state my feelings concerning a problem that bothers me very much, and I'm sure irritates other doctors in this profession as well. It seems insecurity in this profession runs rampant. An example of this is the use of the term "DIPLOMATE, NATIONAL BOARD OF CHIROPRACTIC EXAMINERS." This is not a title, and I feel it was never intended to be used as such. Yet, there are numerous doctors who feel this term is part of their credentials and are listing it in brochures, business cards, yellow pages, resumes, etc.

Everyone who has taken the national boards (the great majority of this profession) is a Diplomate of the National Board of Chiropractic Examiners. The usage of this term by certain doctors conveys to me the insecurity and even more so, the lack of academic know-how as to what titles should be used as one's credentials. The only reason the above term is used by this profession is to impress the unknowing and unsuspecting public.

Probably the one that is to be blamed for this situation is the National Board of Chiropractic Examiners themselves, which coined the term, and the specialty boards of this profession, for not putting pressure on the National Board. This misuse of terms is blatantly obvious to us, but more confusing to the public, which knows nothing about titles or credentials.

Do you ever see this in other professions? Diplomate of National Board of Medical, Osteopathic, Dental, Optometric or Podiatric Examiners? I do not believe so.

I call upon the National Board of Chiropractic Examiners to once and for all, get rid of that term, for these people in this profession do not know what they do with this term. A term that can be used is "passed" or just plain nothing. The profession should reserve the title "Diplomate" for the recognized specialties, and only for the physicians who have gone on into post-doctoral education by additional academic hours, written and oral examinations. Use of this term in any other way merely serves to detract from the importance and meaning of our profession's specialties.

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Dear Editor:

I've bitten my tongue for long enough!

I am a student at The Anglo-European College of Chiropractic, in England, and as such would like to point out that "DC" is the major communication that we "Europeans" have with the bulk of the profession in America. It is with this in mind that I make my comment, which is in two parts:

Firstly, it would appear that the vast majority of seminars, advertised in your publication, are directed at how to make vast quantities of money and that the criteria for being a "successful chiropractor" is not patient empathy, diagnostic excellence, or even adjustive technique, but rather profitability and keeping the accountant happy.

Secondly, every time I see "Chiropractically yours" at the end of a letter I cringe! Come on, chaps! Is this professional? Would an oncologist sign "Neoplasmically yours?" or an anesthetist "Unconsciously yours?" (Fortunately, we haven't covered gastro-enterology or genito-urinary medicine).

Incidentally, I have enjoyed some of the more informative aspects of "DC."

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