

PHILOSOPHY

We Get Letters

Lord/Homeopathy Montage

Dear Editor:

As an alleged pseudoscientist who has used homeopathic remedies for over 43 years, it is necessary to correct certain misconceptions regarding homeopathy which Dr. Randall Lord and many others accept.

The element of theory is very small in homeopathy; it can be ignored. Essentially, it is a replicable, observational procedure involving healthy and sick persons. Its judgmental criterion, as that of any procedure or tool, is pragmatic. Is the tool in this case, homeopathic remedies, therapeutically effective, partially effective, or ineffective?

Most doctors who use homeopathic remedies are willing to test the claims concerning the efficacy of this tool by using this down-to-earth criterion. Contrariwise, Dr. Lord's willingness to experiment with a healing tool depends upon whether the tool makes "scientific" sense. He is overly theory-oriented.

Dr. Lord does not realize that if theoretical issues were given overwhelming credence by early chiropractic practitioners, our profession would not exist. Even today, "scientific authority" in the guise of medical advocates are convinced that the chiropractic theory underlying the use of the adjustment procedure is scientifically unproven and hence the adjustment should not be used.

Dr. Lord's judgmental error lies in his refusal to recognize the distinction in science and elsewhere, between tool-use and tool-use explanations. A tool has only one purpose: to solve a specific problem. Why the tool works or is effective is a conjecture, a hypothesis which could be valid or invalid.

Regardless how one conceives the illness state, it is a problem affecting a suffering person. Healing tools are created/discovered to solve that problem. These tools, I contend, are to be evaluated by their capacity to cure an ill person. Thus, I use the chiropractic adjustment as a healing tool because it enables me to heal sick persons. I also use homeopathic remedies because my clinical experience and that of thousands of doctors attest to their efficacy in curing millions of sick persons and sick animals.

Dr. Lord's evaluation of homeopathic remedies might have been different had he been aware that since the beginning of homeopathy, sick domestic and farm animals were healed via these "unscientific" remedies. He appears to be unaware that in France for over 50 years, classes in homeopathic veterinary science were and are being held. This fact is mentioned because it could forestall the contention that these remedies cure because of the placebo/faith factor. Sick animals, infants and senile adults do not have faith in the therapeutic tools being used in the curative endeavor.

Dr. Lord does not mention the fact that great numbers of homeopathic prescribers only use the lower potency remedies, those which contain chemical matter. Indeed, the higher potency

remedies are very rarely used by German homeopaths.

In this day, few persons doubt the ability of relatively attenuated substances to have biological effects. The chemical matter in LSD pesticides, fluorides, vitamins and hormones contain the same amount of matter as do the lower homeopathic potency remedies. Why then is Dr. Lord unwilling to test the efficacy of these remedies? Much noise is made by Dr. Lord regarding the higher potency homeopathic remedies, those which contain none of the starting chemical. He has forgotten his physics. Gravity, the electromagnetic fields, the photon are all non-material existents. They are forms of "massless energy." We accept their reality, that is, we infer their existence because we can observe their effects on mass matter. So too, homeopaths who use the higher potencies infer the existence of a "massless energy" because we can observe the effect it has on healthy and sick persons, as well as on animals.

Dr., Lord uses the term pseudoscience. Is he aware that there is no agreement among scholars of science as to its distinguishing attribute? Even Karl Popper's criterion -- falsifiability -- has been rejected by many scholars of science. When analyzing it, one finds that the epithet pseudoscientist is a semantic device to define a person who doesn't accept a particular version of science (and there are several versions, or a particular conclusion drawn from experimental evidence. Experimental evidence, supporting or disconfirming an hypothesis has no coercive force. Did you know this, Dr. Lord?

Contrary to Dr. Lord, I urge chiropractors to demand that their colleges offer undergraduate courses and relicensing seminars in the use of this powerful non-drug healing tool. Coupled with our use of other non-drug tools, our profession could, in time, be acknowledged as primary health care providers. Any illness treated by a medical doctor in his/her office could be treatable by a profession which chooses to use all available and yet-to-be discovered non-drug tools.

Essentially we are non-drug therapists; we need to stress this aspect of our profession; we need to acknowledge it and then to inform the public.

Ted Ronyon, DC Los Angeles, California

Dear Editor:

I am writing this letter in response to Dr. Randall Lord's letter regarding homeopathy which appeared in the December 1, 1989 issue of Dynamic Chiropractic.

It is astounding to me that this doctor would class the science and art of homeopathy, "after reading a few books and periodicals on the subject," as being rubbish. He quotes the 1988 Index Medicus as classing homeopathy under therapeutic cults. Must Dr. Lord be reminded that it was not so long ago that our profession was so listed?

He points out a lack of scientific research as being indicative of homeopathy's worthlessness. Many critics of our profession have tarred us with this same brush. Homeopathy suffers the same research fund deficit that chiropractic does. It is true that much of homeopathic literature is anecdotal in nature but again so is chiropractic literature. We know that chiropractic works. So does homeopathy. In both cases, there has not been enough research to show why.

Clinical research is particularly difficult with homeopathy due to the requirement that prescriptions be tailored to the individual patient. In several instances where research has been done, researchers running double-blind studies against placebo found significant results for

homeopathic medication.

I refer Dr. Lord to the Lancet 881-886, 1986 regarding treatment of hayfever; "Thrombosis Research" 47, 373-377, 1987 regarding platelet formation and bleeding time; British Journal of Clinical Pharmacology 27, 329-335, 1989 regarding the use of Oscillococcinum in resolution of flu symptoms; and British Medical Journal 299, 365-366, 1989 where Rhus toxicodendron 6C was proved effective in treating fibrositis. Look these up, Dr. Lord! There have been many others, perhaps not enough, but more than enough to warrant investigation. More than enough to protect this time-honored effective system from ignorant claims from an ignorant doctor. Next time do your homework as all "applied scientists" must.

David Keiner, DC Northfield, N.J.

Dear Editor:

Your December 1st issue of Dynamic Chiropractic contained a letter to the editor from Randall Lord, D.C., in which he criticizes homeopathy.

First, I am amazed that such an abusive attack could come from a chiropractor -- a profession which had had it share of abuse from the regular medical establishment. In the light of that, one could say, "who's calling who a quack?"

Second, I am amazed that someone who is looking for the truth about homeopathy would consult the Index Medicus for information. Would you consider it a reliable source for information about chiropractic? If not, why should it be a reliable source for information about anything outside of mainstream medicine?

For those of us involved in homeopathy, Dr. Lord's attack is nothing new. Homeopathy has been around for 180 years, and continues to be a viable, complementary medical system in most of the world. It is unfortunate that he chooses to view the world through conventional blinders.

"We can't explain the mechanism of action," is a line that is often trotted out. Of course Dr. Lord doesn't know any laws of physics or chemistry that could account for such a phenomena. I would suggest that he read the book Quantum Healing, by Deepak Chopra, M.D., for a view into a possible model. What all this means is that the mechanism can't be explained within the current knowledge we have. Why not keep looking? Isn't that what science is about? There are many therapies in use that have a vague mechanism. Just check the Physician's Desk Reference for the common statement, "the mechanism is unclear..."

What is needed is new openness to investigate the therapeutic possibilities of the homeopathy? If you want double-blind studies, then let there be double-blind studies. David Taylor Reilly, M.D., in Glasgow, Scotland, is doing just those kinds of studies. Two of his studies have been published the The Lancet, and other studies have appeared in the British Journal of Pharmacology. The literature about homeopathy is available, if one looks for it. The "Foundation for Homeopathic Education and Research," 5916 Chabot Crest, Oakland, CA 94618, offers an up-to-date summary of the most current research being done in the field.

It was said by Abraham Flexner at the turn of the century that there was "no longer homeopathy and allopathy but only scientific medicine." It is unfortunate that while the medical profession was denouncing the homeopaths as "following a dogma" they were unaware that they, too, are following their "dogma." The microscope, the mechanistic model set down by Claude Bernard, and

the double-blind study are not the only guideposts to understanding the workings of the body -- as any chiropractor would know. Homeopathy has had almost 200 years of clinical experience. It is about time for us to drop our illusions about the way things work and to give it a try, even though the concept of similars might seem strange to some.

The National Center for Homeopathy has been offering courses in postgraduate homeopathic education to the health care profession since 1922. Next summer we will be offering our courses in Beverly, Massachusetts during the last two weeks in June. For further information call (202) 223-6182.

Julian Winston Dean, National Center for Instruction in Homeopathy and Homeotherapeutics Member, Homeopathic Pharmacopeia Convention of the United States

Today I would like to thank you again for sending we chiropractors around the world your semimonthly, Dynamic Chiropractic, free of charge and with so many, many wonderful articles so useful to the profession.

A number of months past you began to publish articles by Dr. Kurt Donsbach. I found this chiropractor really made sense when he wrote about prostrate problems and cramps. When he spoke about hydrogen peroxide, that was new language to me as I only knew this product through a woman who purchased it from the local Woolworth supermarket for cleaning wounds and gums. Then I forgot about Dr. Donsbach who had been totally known to me until then, in spite of the fact that I have been a chiropractor for over 29 years.

When I suddenly fell ill within the space of three days in October 1989 and local doctors of medicine, naturopathy or chiropractic could not help me the least in my hometown of Cairns in North Queensland, Australia, I contacted Dr. Donsbach's Hospital Santa Monica and left home by air for Los Angeles and San Diego.

I want to thank you, Mr. Petersen, for allowing Dr. Donsbach to write in your journal, because without you, I would still be totally unaware of this wonderful and marvelous place where day by day I witness patients who obtain remarkable, outstanding improvement in their health -- particularly cancer cases who previously became worse after chemotherapy, radiation or surgery.

The "alternative medications" used at Hospital Santa Monica for such a variety of conditions and too often not obtainable in the USA, Canada, Australia, or United Kingdom, prove to be a tremendous help. Here I have seen during the past few weeks patients from all over the USA, Canada, even Sweden and Great Britain. This place is like a home; there is a tremendous feeling of compassion, gentleness and kindness permeating through the doctors and the Mexican staff. We are happy to be here.

I have seen two chiropractors from Pennsylvania as patients and one DC from Alaska brought his wife for a check-up. I really think Hospital Santa Monica deserves to be better known throughout the chiropractic profession. So many serious cases deserve to be referred here by chiropractors. Such is my personal feeling, and out of gratitude, I would appreciate Mr. Petersen, if you would be so kind as to publish this letter in your wonderful journal.

Herrik de Charette, DC Cairns, North Queensland Australia

Editor's note: You may dial Hospital Santa Monica in Mexico direct by dialing 011-526-661-33333.

"Videofluoroscopy Policy Adopted"

Dear Editor:

After having read the article entitled, "Videofluoroscopy Policy Adopted," November 15, 1989, Vol. 7, Dynamic Chiropractic, page 8, I was impelled to send in this rebuttal. Had you researched this material before publication? It may have been to your advantage not to publish before referencing out all of the facts. Although your paper has a disclaimer on its contents, this type of information might be considered misleading by those who read it. Let me explain.

The article states that according to the Academy of Chiropractic Radiology (ACR), "the academy has concluded that videofluoroscopy (VF), has progressed beyond the experimental stage," and has based this upon reviewing the available literature and interviews with chiropractors who utilize videofluoroscopy. Apparently, the "Academy" deems this as enough evidence to conclude that VF has progressed beyond the experimental stage.

In a position statement on VF by the executive directors of both the Council on Diagnostic Imaging (CDI) and the American College of Chiropractic Radiology (ACCR), of the ACA, both have adopted position statements in direct opposition to the "Academy," stating that videofluoroscopy (VF) is still considered investigational. In the ACCR position statement, it is also stated, "at present the use of VF in the study of spinal joint motion is considered to be investigational," and that "observational studies have indicated the need for further investigation of VF and the establishment of standardized protocol in the study of spinal joint motion." Also it stated, "research programs need to be developed and conducted under the auspices of accredited chiropractic colleges or by others who follow protocols of scientific investigation." Does the "Academy" have standardized protocol for their study of spinal motion? Have they defined what a normal spine is? Apparently they have, otherwise, how could they state that VF is now considered beyond investigational? When did this standardization occur; where and through what accredited chiropractic college did the "Academy" utilize their research? If they did not utilize an accredited chiropractic college, did they follow protocols of scientific investigation instead? Apparently the ACCR and the CDI still have considerable doubt as to the actual benefits that VF can produce, and justifiably so.

If we take a look at the American Chiropractic Board of Radiology (ACBR), they give the Diplomate certification test and Diplomate status to those doctors of chiropractic who have completed the required hours and residency in radiology at an accredited chiropractic college and those who have passed the radiology board. The ACBR is under the auspices of the American College of Chiropractic Radiology (ACCR), which oversees the ACBR. The ACCR is a sub-division of the Council on Diagnostic Imaging (CDI), which is under the American Chiropractic Association (ACA). You can see some of the dilemma that doctors of chiropractic have when it comes to finding out which group is which.

EX: ACA < CDI < ACCR < ACBR

One can now see the considerable criteria that a radiological Diplomate must go through in order to be a Diplomate.

Now, let's take a look at the Academy of Chiropractic Radiology (ACR). I have heard it said that some or all of the founders of the "Academy" either failed, or chose not to take, the radiological board certification test for Diplomate status. If this is true, then it seems as if they created their Diplomate status by grandfathering themselves as Diplomates and manufacturing the "Academy." In my opinion, this has the same effect as those candidates who have failed or never sat for any

state chiropractic board, and then started their own state board. Have any of these doctors of chiropractic been tested by anyone to determine their level of knowledge? If not, how then can they give policy statements on VF, or for that matter, anything related to radiology? As a doctor of chiropractic, I could give the same opinion based upon the same concepts on VF as the "Academy" does, and it would still be an opinion. The "Academy's" policy statement on VF is viewed by this doctor as highly questionable and without substantial basis.

The next question to the "Academy" is, what criteria was or is given for VF not to be experimental or investigational? Could it possibly be financial? Where are the referenced journal articles stating that this is no longer experimental? And how can the "Academy" be able to come up with this policy statement of "beyond experimental," when the rest of the nationally recognized radiological organizations state the opposite?

I also would like to request that the "Academy" provide a copy of your list of those doctors of chiropractic in the state of California who perform VF for spinal motion study and reimbursement for such? Apparently the State Department of Health, Radiologic Health Branch, would be more than interested in reviewing the credentials and facilities of those doctors performing these examinations. Before doctors of chiropractic refer patients for VF in California, it would be advisable to make sure that the doctor performing this type of procedure has or is about to have "Radiography and Fluoroscopy" stated on his radiation license. If there are questions regarding this, then please contact the California State Department of Health, Radiological Health Branch.

I, for one, will utilize the nationally recognized Diplomates of the American Chiropractic Board of Radiology (DACBR's) of the ACA, not only for qualified interpretation of x-rays but especially the guidelines for diagnostic imaging. These recognized Diplomates have proven themselves time and time again by passing a rigorous testing procedure, and have continued to lead this profession in diagnostic imaging reporting and radiologic policies for our profession. Utilize your strengths without chiropractic -- use a board certified Diplomate.

Philip D. Rake, DC, FACO Los Angeles, California

Geraldo Donahue and Pero/Flesia Controversy

Dear Editor:

I would like to compliment you on RHT's column, specifically the one entitled, "The Geraldo Donahue Jr., Show" from the December 15, 1989 issue of Dynamic Chiropractic. I only wish that the point being satirically made would be judged worthy of a front page feature. Perhaps our profession would then sit up and take notice, but it would more likely wrongly criticize you for being negative.

There is only one point with which I would take exception in your column, and that is wherein you say "---but unfortunately it could happen." It is happening and it has been happening for as much of the life of our profession as I can recall. It is just as ridiculous as you portray it, and your article is a literal (not just a figurative) rendition of what the public sees of our profession. Any educated person -- unless they have gradually been brainwashed to accept this type of behavior -- must view our profession as you have shown.

I'm not sure if you have noticed in print recently an exception being taken to one or more contentions being made relative to the subject of research, by Drs. Brennan and Triano of National

College. Dr. Brennan, for example, has referred to certain so-called "research" statements as "jabberwocky" (from Alice in Wonderland). Reading these challenges by National College research personnel has made me wonder if we have finally reached a point where empty, metaphysical and stupid statements made by uneducated or inadequately educated people will finally be challenged in print. It would be nice to believe that Drs. Triano and Brennan, and faculty members like them throughout the profession, and others such as yourself will now be prepared to issue a challenge every time such statements are made.

I hope you continue to raise this issue from time to time.

Jerome F. McAndrews, DC Lombard, Illinois

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