Dynamic Chiropractic

CHIROPRACTIC (GENERAL)

Orthodontists 3, Chiropractors 1

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Why do orthodontists make about three times more than chiropractors? Yes, that's right, they average around \$200 per visit. Most of their patients have little or no insurance coverage. Sound familiar? How does a predominantly cash practice command such a premium per visit? By reshaping the mouth, orthodontists are not affecting something so dynamic and vital as the housing of the central nervous system. They are not relieving or preventing the insidious, degenerative ramifications of lordotic loss, spinal rotational malposition, spinal buckling and deviation from the midline, atlantal-occipital malocclusion, intervertebral disc swelling, bulging and locking, or years of painful, stiff misery.

So, how do orthodontists working less than 40 hours per week average \$350,000 per year? They make corrections! Corrections run approximately \$4,000 per case and take about two years. How do they do it? Pressure over time. Almost all of the correction takes place outside of the office! Think about that for a moment. The average orthodontist makes three times what the average DC makes, and he or she is not even present when most of the correction takes place. What's wrong with that? Nothing! Can we learn something from them? Plenty!

The orthodontist uses a two-pronged approach: the adjustment of braces in the office, which has a sustained, pressure-over-time quality; and the prescription of a home care appliance, which accentuates an additional pressure-over-time component.

Can current chiropractic methodology match this powerful one-two punch? With the developments in Chiropractic Biophysics^(tm) and Biomechanics, the Harrisons and Pettibons have given us a definitive road map. History will show that we can never thank them enough. And now that we know where we are going, it's up to us as practitioners to choose, perfect, develop and implement the most effective modes of transportation - transportation that will drive us to the definitive correction. Whether it's a lateral translation traction device, U-shaped metal frame with pulleys, motorized flexion distraction table, advanced method for atlantal-occipital realignment, or inflatable lordotic recovery machine, methods are improving.

It wasn't long ago that the average orthodontic correction required four years. The price is still about \$4,000, but advancements in technique and home care appliances have cut the time in half. That's effectively a 100 percent increase in payment for the doctor's time, and better for the patient as well. Reliable, predictable spinal corrections can give rise to the same type of pricing power for chiropractors.

Spinal adjustments have a dynamic and often long-term health benefit, but do not exhibit the sustained, pressure-over-time factor that has been employed so effectively by the orthodontist. We can overcome this with corrective, pressure-over-time home care, which is essential in attaining lasting spinal correction. It changes no-change into change, kyphotic into lordotic, misery into relief, failure into success and poverty into wealth. Be realistic; stop beating yourself up when you don't see immediate, significant structural change. Significant change often requires significant pressure applied over significant time. It doesn't all happen immediately in your office. Make your patients accountable for their correction. Never send them home without an "effective corrective"

home care regime. Help your patients get the results they deserve by employing pressure over time, and then claim your just rewards.

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