

We Get Letters & E-Mail

The Art, Science and Philosophy of Chiropractic

Dear Editor:

In the Jan. 29, 2004 issue, a negative statement concerning maintenance/wellness care appears in Dr. G. Douglas Anderson's "Improving our Public Relations" article (www.chiroweb.com/archives/22/03/02.html). After stating that wellness/maintenance care is B.S., he goes on to infer that to be a successful chiropractor, one must limit their practice objective to the reduction of pain. Later in the article, the author gives his opinion as to what skills a DC should perform: "A good DC with a combination of manipulative, soft tissue, modality, exercise, rehabilitation and nutritional knowledge can get results rapidly. Results may be defined as pain relief without drugs or surgery, diagnosing the true cause of a problem, and giving advice on issues concerning exercise, rehabilitation, nutrition, specialist referral or diagnostic testing." It seems that Dr. Anderson has no knowledge of the foundational principles that support the science of chiropractic or is biased against these principles. The specific chiropractic adjustment is effective at not only relieving musculoskeletal pain, but also allows for improved function of the nervous system, which aids in maintaining homeostasis.

Chiropractic is understood through its science, art and philosophy. The science is that osseous displacements affect the surrounding soft tissues, including nerve tissue. The art is the knowledgeable and specific introduction of a mechanical force to replace the offending osseous structure, thus removing the stress to the surrounding soft tissues, including nerve tissue. The philosophy is supported by 33 principles, many of which are accepted as valid tenants of other sciences; for example, principle #32, "coordination is the principle of harmonious action of all the parts of an organism, in fulfilling their offices and purposes," is analogous to the law of homeostasis from the science of biology. Whether discussing laws, principles or theories, it is necessary to use sound reasoning.

The cause-and-effect relationship is utilized when exploring soundness of principles such as thermodynamics, inflammation and other principles that support the science of chiropractic. That the inflammatory process alters soft tissue, including nerve tissue, is an accepted principle; by applying cause-and-effect reasoning, we see that the change in structure (nerve tissue) would lead to a modulation in the function (transmission of neural impulse), thus affecting coordination and the regulatory functions of the central nervous system (CNS). Normal CNS activity allows for proper communication between organ systems, thus maintaining homeostasis in the organism. Modulation of neural activity causes a deviation from homeostasis or dis-ease. A chiropractic vertebral subluxation is the science (osseous displacement and neuronal modulation) and the philosophy (interference to normal flow of neural information); the application of this knowledge is known as the art (chiropractic adjustment). Vertebral subluxation diagnosis is accomplished with the aid of CNS regulatory function analysis, instrumentation and other unique chiropractic procedures. The wellness/maintenance practice objective encompassed in traditional chiropractic is a philosophical tenant that is supported by many known principles which direct our understanding of the many phenomena that surround us.

To infer that the specific chiropractic adjustment is effective at relieving pain only is a half-truth. The coordination and regulation of metabolism, body chemistry and physiology is dependent on efficient transmission of instructive information through neural tissue (normal nerve activity). The successful subluxation-based chiropractor uses knowledge common to all sciences and applies it in a unique way, known as the art and philosophy of chiropractic. This practice of vertebral subluxation detection and correction allows for not only pain relief, but also health maintenance and prevention of dis-ease.

Parker Todd Zarbuck, DC
Urbana, Illinois

"A Nobel Prize May Be on the Horizon"

Dear Editor:

This letter is in response to the letter to the editor written by Steve Agocs, DC, in the March 11 issue. Dr. Agocs was responding to a commentary written by Douglas Andersen, DC, titled "Food for Thought 2004: Improving Our Public Relations."

What amazes me so much about Dr. Agocs commentary is the complete lack of understanding of the current feeling about chiropractic, not only by other health care practitioners, but more importantly, the general public. In today's hectic and overscheduled world, no matter what we as chiropractors want to believe, people do not want to keep returning to the office for care, especially if they are asymptomatic. I certainly cannot see visiting a dentist once a month for wellness or preventative care. The whole point is to get the patients well (however one defines it) as soon as possible and at the lowest cost. Isn't that what has distinguished our profession in the past?!

Dr. Agocs continues by saying that he has "a feeling a national PR campaign will be difficult to achieve when, in this day and age, we still have chiropractors with attitudes similar to Dr. Andersen's, willing to ostracize colleagues over the simple matter of differences in philosophy and intent." Well, duh, hasn't that been the core issue of our inability to define chiropractic and then unite under a single banner? Unless we as chiropractors are willing to speak out and challenge our colleagues, who does Dr. Agocs feel will do this? The medical societies? They really could care less about us! The insurance companies? If they have their say, they would severely limit what we do. No, we have to challenge our outdated philosophy and thus, ourselves, to change and become better chiropractors in order to better serve our patients!

Dr. Agocs tries to suggest that "clearly, there is ample research opportunity in the field of preventative health care related to chiropractic" (I must admit I am not really sure what this sentence actually means), yet no references are given to support his supposition. He goes on to suggest that "chiropractic care can affect constipation," and his only basis on which to make this claim is that "many of my patients manage their symptoms/conditions with chiropractic care effectively." That's great, but the scientific and health care world needs a bit more evidence than that.

I strongly challenge Dr. Agocs to publish, in a mainstream, peer-reviewed journal, a case study on a patient like this. If what he is suggesting is actually occurring, then a Nobel Prize may be on the horizon for him.

Daniel Volkening, DC
Berwyn, Illinois

Difficulties With State Legislators - and Authors

Dear Editor:

I was shocked to read Dr. Fuhr's article regarding chiropractors having difficulties with state legislators (April 22, 2004 DC: www.chiroweb.com/22/09/10.html). Dr. Fuhr states in his article that in 1905, chiropractors managed to get a licensing bill through both houses of the Minnesota legislature, only to have it vetoed by the governor at the request of D.D. Palmer. Dr. Fuhr states that it was a classic example of working at cross-purposes. It is amazing how history repeats itself. Recently, United Healthcare introduced in Arizona a bill (SB 1094) to allow them to review every chiropractic claim after the first 12 visits for all out-of-network policies, in order to determine the need for care. This right to review only was to apply to chiropractic claims and no other health care providers.

The Arizona Chiropractic Association, represented by Barry Aarons, testified in opposition to the bill, and Debra Brimhall, representing independent chiropractic physicians, also opposed the bill. However, the illustrious Dr. Fuhr sent the general counsel of Activator Methods, International to testify in support of the bill. Thanks to Dr. Fuhr, the bill passed. Now, we are the only health care profession in Arizona that is being scrutinized - yet Dr. Fuhr has the audacity to tell the world that he fights for the right of chiropractic. With friends like Dr. Fuhr, who needs enemies?

Daniel Glassman, DC
Phoenix, Arizona

Life-Threatening Advice?

Dear Editor:

While reading the March 11, 2004 issue of *Dynamic Chiropractic* [Southeast and California forums], I came across a disturbing article titled "Chiropractic and Heart Attacks." The author, Hal Miller, DC, implies that chiropractors have a secret set of emergency procedures that are unknown to the rest of the EMS community. In my opinion, this is dangerous ground upon which doctors of chiropractic should not be treading.

The emergent treatment of myocardial infarction and basic life-support protocols are difficult enough to perform without muddying the waters with alternative treatments such as acupressure or "chiropractic first aid." Performing such procedures would not be consistent with the relevant evidence base, and in my opinion, would represent a breach in the standard of care. Emergency medicine is not the place to experiment with different theories or alternative approaches; CPR and first aid protocols need to be followed with strict adherence, period.

The article states:

"What is surprising is that neither the JACA nor the *Examiner* (both chiropractic publications) give any advice beyond referral, even though the chiropractic literature over the years has given various examples of life-saving techniques DCs have used to help cardiac patients."

The doctor of chiropractic does not have the training, knowledge or expertise to handle a life-threatening cardiac event. The illusion that chiropractors can easily treat such episodes without medical intervention is dangerous and irresponsible.

Jeff Hebert, DC, EMT
Park City, Utah

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