

## We Get Letters & E-Mail

Where Has the Brotherhood Gone?

Dear Editor:

I have a story to tell. I know that many readers will find it petty, but there is a principle here; if nothing else, this tale is provocative. I have developed (through overuse) bilateral lateral epicondylitis. On both arms, the symptoms are limited to the epicondyles and perhaps the proximal radioulnar joint (agreed upon by numerous DCs). At a scientific meeting, a colleague adjusted the proximal radioulnar joint of one elbow and there was instantaneous, though temporary, relief. I figured I'd come home and get someone to adjust it a few times, and it would be OK.

I made an appointment with a local DC. She asked if I had insurance. I said yes, and with this answer, understood that she was planning on charging me. This was new to me. You see, since entering chiropractic school in 1984, I have never paid a colleague for treatment, nor charged them. And I have traveled and lived in enough places to support the conclusion that this professional courtesy seems universal. Indeed, I always found it comforting that we stuck together, at least on this point.

Back to the story, I did not go to that appointment. Instead, I made an appointment with second and third DCs. (I live and work in different states.) I asked the receptionist at the second office, beforehand, about their policy when treating other DCs, and she said that he traded, but did not know in this instance what he would want to do. I decided to take the chance. He in fact charged me. The truth is that I felt a bit violated. The next day (since my elbow had not improved in the least), I made my appointment with the third DC, who charged me as well. Now frustrated, I called around to some friends, and to a couple of other local DCs I know. They said, to my comfort, that they have never charged a colleague, and were somewhat aghast that I had been charged. I then went to a fourth DC after asking him point blank about this, and he also thought it against the "rules" to charge a colleague.

Perhaps in this age of higher competition and more difficult collection processes, things have changed. I guess it is best to ask beforehand, even if it is a bit uncomfortable. As for me, I would never charge a fellow chiropractor. Indeed, I am going back into part-time practice next month, and you are all welcome - especially if you know how to fix elbows.

*Geoffrey Bove, DC, PhD*  
*Boston, Massachusetts*

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[Editor's note: The following three letters to the editor address "I Dare You to Place This Letter on the Front Page!" from the July 29, 2004 issue.]

Unity Concerns

Dear Editor:

I was interested in the article by Dr. Williams, of Tampa, Florida, concerning unity. Since the early days of chiropractic, we have had cries for "unity." In the 45 years since I began my chiropractic journey, we have had several more of these attempts - always with the loud cry that this is finally it. This includes state associations as well.

The big tragedy is not that we have two or three national associations - but that less than 25 percent of the profession belongs to any of the associations.

Are two national associations so wrong that we should only have one association? Absolutely not. In Christendom, there are both Catholic and Protestant expressions and viewpoints on the life and purpose of Jesus Christ. The problem is not so much that there are two church branches, but that there are so few people who enjoy the full life Jesus wants people to have.

So it is in chiropractic - very different expressions that just won't go together. Recently, I talked with one of my wife's relatives. He told me that he had gone to a chiropractor twice. The first time, he had a cursory exam and was told to come back with a stool sample. The next time, he brought the sample, and the doctor wrapped the stool sample and put it on the man's chest to try to make a diagnosis. This chiropractic practice and viewpoint are a long distance from spinal subluxation-based chiropractic, and cannot be solved by having one "unity" with so great an opposite view.

Therefore, anyone who benefits from the practice and profession of chiropractic should join at least one of the national associations, and bring the membership voices combined to at least 50 percent.

*Frederick Vlietstra, DC  
Middletown, New York*

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The Real Fight

Dear Editor:

Bravo to Dr. Christopher Williams! We must unite all chiropractors into one organization. That organization needs to form alliances with all other professional organizations (MD, RN, PT, etc.), because the real fight is All Health Professionals vs. Insurance Companies. They have "stolen" all the money that used to go directly to doctors and are keeping it, forcing doctors out of business. Every dollar paid to CEOs, insurance adjusters, stockholders, and to build more giant buildings is a dollar not in our pockets. If we cannot unite behind philosophy, let's unite behind money and professional survival!

*Steven Eggleston, DC  
Huntington Beach, California*

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Kudos to Dr. Williams

Dear Editor:

Kudos to Dr. Christopher Williams for his short and poignant assessment of our profession. He is totally correct. Isn't it about time we all realize what we have in common, rather than our differences, and unite for some real meaningful reforms? One association is power. Now, we are divided and weak.

Having been in practice over 20 years, I think it is a shame what has happened to the greatest healing art. We are so mired in bickering and our differences that we never seem to get anywhere! Dr. Williams' opinion is probably shared by the majority of the practicing DCs in the country, and certainly the largest segment: those not affiliated with either the ICA or ACA, because of the continued moaning and complaining.

*Marc J. Kerschner, DC*  
*Albany, New York*

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Ontario Drops Chiropractic?

Dear Editor:

I am saddened and angry at the decision by the Ontario government to drop chiropractic care from its health plan. I feel sorry for those patients who will not be able to access the care they need. I'm angry at the citizens of Ontario who have allowed socialized medicine to creep into their health care system and, with one swipe of its monopolistic hand, to effect so many lives.

American citizens must be vigilant that we don't let our politicians sell us a bill of goods about how wonderful the benefits of a single-payer system would be. Learn from our northern neighbor's mistakes and talk to your patients about your local politicians who support our current system.

*Brian J. Gray, DC*  
*St. Louis, Missouri*

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"You're Right, That's Not Chiropractic..."

[*Editor's note:* This letter is in response to Dr. Ashley Cleveland's article, "But That's Not Chiropractic," published in the Aug. 16, 2004 issue.]

Dear Editor:

Dr. Carl S. Cleveland Sr. once stated, "Chiropractors recognize that bad food, bad air, bad water, etc., make the innate intelligence inside our body spend more energy in making intellectual adaptations, thus lowering vital resistance. Good food, good air, good water that meets pre and post advice of the innate intelligence inside means better health." I do not think anyone doubts that good nutrition and a healthy lifestyle are needed in order to achieve optimum health. However, lifestyle counseling is not the focus of chiropractic; the focus is the subluxation. Period. Philosophically, there is nothing wrong with a chiropractor who counsels patients concerning lifestyle habits. However, the intent behind the counseling must be in line with chiropractic philosophy.

Let me give you a hint, Dr. A. Cleveland: If the focus of the counseling is not the subluxation, and not innate intelligence, then the counseling is not chiropractic. Let me illustrate my point. When a patient is reminded to wear a helmet when riding a bicycle, is it because the helmet may prevent a concussion (medicine) or prevent a subluxation (chiropractic)? Is good nutrition discussed to prevent disease (medicine) or to enhance the innate healing potential of the body (chiropractic)? Do you tell patients that excess alcohol can cause addiction (medicine) or that a subluxation can disrupt the "Brain Reward Cascade" resulting in "Reward Deficiency Syndrome" (chiropractic)?

Dr. A. Cleveland stated, "I teach my students that the focus isn't the subluxation." Then you are not teaching your students chiropractic. It really saddens me to read that you would write such a thing. A patient can go to just about any health care provider and get counseled about their lifestyle habits. They cannot go anywhere to get their subluxations corrected. The greatest crime chiropractic can commit on the public's health is to stop focusing on subluxation. If we do not focus on subluxation, no one else will. Then all your lifestyle counseling will not mean a damn thing.

*Bryson Langel, DC*  
*Olympia, Washington*

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