

Opening the Doors of Understanding

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The method by which the world of health care begins to understand and accept the benefits of chiropractic is not a simple, one-study process. And while each new study adds to the available evidence, the results are only effective when people know about them.

The way to chiropractic enlightenment can be likened to a parade going down the street. If the street is in a rural area and the band is playing softly, most people will never even know the parade took place.

The results of a given study are similar to the band playing in the parade - the louder those results address how care should be administered (and which type of care should be used), the greater the impact those results will have on the people who read them.

Which journal a chiropractic study is published in is akin to the choice of roads the parade goes down - the more people read that journal and see that study, the more their opinions will be influenced.

If the study has significant conclusions and the journal is prestigious enough, the consumer media will also carry information about the results. And while the reporting of study results is not always accurate in this day and age, the popular media does reach millions, rather than thousands.

In the case of the "manual therapy" study published recently in the *Annals of Internal Medicine*, we have a prestigious "medical" journal publishing a study demonstrating that the addition of "manual therapy" to regular medical care is superior to medical care alone for managing shoulder problems. (Please see "Study Finds 'Manual Therapy' Effective for Shoulder Dysfunction/Pain" beginning on the front page of this issue.) The importance of this study should not be overlooked:

- "Manual therapy" is a term that includes the chiropractic form of manipulation - specific manipulations (low-amplitude, high-velocity thrust techniques) and specific mobilizations (high-amplitude, low-velocity thrust techniques). This is what doctors of chiropractic do, even though a DC didn't deliver the care in this particular study.
- The ailments addressed were located in the shoulder. This is the first such study and opens the door for more studies regarding pain in the extremities. Chiropractic researchers should consider performing additional studies to bolster our position as the primary care providers for musculoskeletal health.
- The shoulder pain was treated "at single or multiple segmental levels in the cervical spine and upper thoracic spine and adjacent ribs." Manipulations to the spine showed results in reducing shoulder pain and increasing shoulder function. Not a novel concept for chiropractic, but potentially groundbreaking for the rest of the world.

This study is a giant step toward demonstrating that the chiropractic adjustment/manipulation can be effective for ailments involving the extremities and other parts of the body as well as the spine. This study introduces the concept that the spine impacts health in the rest of the body. This is the platform upon which chiropractic asserts that the adjustment will impact total health.

But there is one issue we will have to consider:

Can we include ourselves in this type of research?

If a non-chiropractor uses specific low-amplitude, high-velocity spinal manipulative thrust techniques, is that the same as a chiropractic adjustment/manipulation?

Before you answer, consider the fact that there is potentially much more research that will be conducted on manual therapy. As with the current study, this future research has the capability to open doors of understanding and appreciation for the chiropractic adjustment.

In short, if we don't include chiropractic in manual therapy, we can't honestly enjoy the benefits of the results of the *Annals* study until we duplicate the study with doctors of chiropractic. Even then, we would have to ensure that the study would be published in a similar journal in order to enjoy the same respect.

Make no mistake about it: Chiropractic is a unique form of care. The doctor of chiropractic provides a philosophy and therapeutic approach that is not available via medical manipulators. But is a low-amplitude, high-velocity spinal manipulative thrust different depending on whose hands deliver it?

This is the kind of question that science is beginning to answer - with or without our input. Our decision is primarily philosophical and political. Our approach should be well-thought-out, as it will have significant impact on what we can claim based upon the existing research.

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NOVEMBER 2004