

We Get Letters & E-Mail

Koren Responds to First Article in DC

Editor's note: The following is in response to "Koren Specific Technique Not Chiropractic?" (Jan. 29 DC). To read our follow-up article, see "[Chiropractic Profession in Europe Asks DCs to 'Say No to Koren.'](#)"

Dear Editor:

I think the issues you raise are very important and I am glad to have an opportunity to comment on them. Your story might have been more complete if you had contacted me before you wrote it, but I understand how the pressure of deadlines and other journalistic demands to make a living can eat up your time. As I send this to you I am posting it on my Web sites and sending it to my mailing lists. I thank you for this opportunity to have a full-blown public discourse on these matters because they touch on the very essence of our profession and its future.

First, your article suggests contradictions between my Web site and my letter to the Berlin school telling them not to misrepresent or misuse my teaching or accompanying materials as contributing to their students' chiropractor credentials. There are no contradictions. Both are very clear that KST is a protocol and that knowing it does not qualify anyone to be or claim to be a chiropractor or have chiropractor knowledge. You quote the following statements from the letter to the Berlin school:

- Taking a KST seminar does not give a person the right to say they are chiropractors or to say they practice chiropractic.
- As I have written numerous times KST is an analysis protocol similar to AK and may be applied to many different health care professions.
- KST can even be used on oneself and can be used by lay people (as AK is taught to lay people, as demonstrated in the book *Touch for Health*, and *BodyTalk* is taught to lay people). Surely I am not the only chiropractor to teach methods for public or lay use.

You then say these statements seem confusing compared to statements on my Web site (www.teddkorenseminars.com):

- KST is a health care protocol that any provider can use to improve their results and expand their ability to help others.
- KST grew out of my experience with two marvelous chiropractic techniques: Directional Non-Force Technique (DNFT) developed by Richard Van Rump, DC and Spinal Column Stressology developed by Lowell Ward, DC
- In addition to its chiropractic application, KST's more universal applications have permitted it to be used by healers of all kinds, even lay people to access information.
- As a chiropractor, I initially saw KST as a way to improve chiropractic care. I realized that I had "something" when doctors and patients would repeatedly say, "That was the best adjustment I ever had in my life!"

Both of these sets of statements make the same point. That point is that knowing KST does not qualify anyone to be a chiropractor or say that they are a chiropractor. Since these points were in a

letter to the Berlin school it is also clear that the people I teach are on notice that this is the case. This position is significantly reinforced by the additional statement on my Web site, which for some reason you left out of your report even though it appears between the last two points from my site that you quote: "The application of correction procedures is of course dependent upon and limited to the individual's knowledge, and legal permission (licenses, etc.) to work on others"

Second, (and this is very important) chiropractors who attack German *heilpraktikers* (HPs) put American-trained chiropractors working in Germany at risk. Currently, German law allows American-trained chiropractors to take the HP exam and practice, advertising themselves as American-trained chiropractors. MDs in Germany appear to be attempting to close down this opportunity by confining the right to do chiropractic techniques to MDs. If they are successful, then American-trained chiropractors will no longer be able to practice in Germany. The attacks by the WFC on HPs in Germany assist the MDs in their objective. The many American chiropractors practicing in Germany under HP licenses do not support WFC's attacks on HPs. Here is what one of them says (they prefer to remain anonymous because of the ubiquitous WFC intimidations tactics:

"[I] already have friends who are HPs who I also call colleagues ... so I am no stranger to the idea that HPs can and do adjust patients and can also do a good job. We should just be careful with the terminology that is being used to describe these freshman chiros. I would personally like to see some guidelines and also like to know who the gatekeepers are to who decides on these issues which could potentially change the face of chiropractic in Europe ... But all in all, I am open to the idea of finding some kind of middle ground to allow for progress in the profession."

*Tedd Koren, DC
Hatfield, PA.*

Kudos for Article on Dr. Harris

Dear Editor:

We have just returned to the office after the Christmas holidays and found the 12/16 issue with the article on Dr. Harris. It is truly a wonderful tribute to him, and we all are very grateful to you for how well it was reported. During his last weeks, I tried to get in touch with the many, many people with whom he was friendly, but imagine that I missed quite a few. Your article has served as a "message" to all of those who did not realize that he had passed away, and I thank you for it.

You may be interested to know that many of Dr. Harris' mementos and items from his past will be going to Life University here in Atlanta, to be used in an informal "museum" setting. Dr. Harris had requested that this be done and also that his ashes be interred on the Life campus. One of his last honors was to be selected to be a member of the Board of Trustees of Life University, where he served for two years prior to his death.

Thank you again for the handling of the article. Dr. Harris would have loved it!

*Jane Goodwin
Board of Directors
William M. Harris Family Foundation*

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