

## We Get Letters & E-Mail

Taking the Profession Where It Needs to Go

Dear Editor:

I read Dr. Sportelli's recent column, "[Is Chiropractic Considered a Subprime Profession?](#)" [June 3 DC]. Perhaps it's time we do a little "blame storming." We have a very vocal minority that wants to cling to the past, and I for one don't believe we can drag them kicking and screaming into what could be a very bright future. To the unscientific among us, the rallying cry is, "If your spine's in line you'll feel fine."

The public is our greatest asset, and while we treat a minority, we are a minority, and only a few of us are what I would call "subprime." We need to get the message out to the local, county, state and national associations that the profession wants to practice and promote evidence-based medicine, but I can tell you from 20-plus years of experience that it's hard to do.

The various associations desperately need members, so the membership tent is made large enough to accommodate all the various philosophies that should be relegated to our history book. We need to move on. Here in Ohio, we now have HIO practitioners in executive positions in associations touting atlanto-axial adjustments for everything from colicky babies to sciatica. Sadly, we are afraid to speak out and speak up; we let the dogma rule the day.

I am currently developing a department of chiropractic medicine at an inner-city hospital in Cleveland for the express purpose of taking wellness and prevention services where they are needed most. This best-practices program will focus on all issues of public health, hygiene, nutrition and infectious disease prevention. While spinal manipulation procedures will be provided, they are not the centerpiece; integration is.

As the late Dr. Joseph J. Janse so wisely stated, we are "portal of entry" providers into the health care system. We see patients with a wide variety of complaints; it is our duty as chiropractic physicians to differential diagnose and either provide appropriate evidence-based care or refer the patient to a specialist or subspecialist able to provide the appropriate treatment. This is our duty. Explaining it to the public would go a long way in assuring them and the payer community that we are part of the nation's health care solution.

It is far more than "hit 'em high, hit 'em low, take their dough and let them go." The misfits need to be retrained or let go to create a new profession of spinal technicians. They should not be called doctors, as it only confuses the public.

If properly mobilized, the chiropractic profession is strategically positioned to offer the citizens of this nation low-cost, high-quality health care, from intake examination to differential diagnosis, and many of us have the training and experience to provide wellness and preventive education services as part of our care. The administrative limitations to the diagnosis, treatment and reduction of subluxations must be eliminated as part of the change. This concept is outdated and antiquated, and unless it is better described, it only serves only to perpetuate the myth - yes, the myth.

I have seen the enemy and more often than not, it is us. If we disavow treating the spinal unicorns, we will be in a position to ask all plans (including Medicare) to allow for full direct access for our nation's citizens to see the health care provider of their choice, and that access to the tens of thousands of chiropractic physicians be unencumbered. Every patient should have the right to choose and be reimbursed for all health care services from chiropractic physicians with full scope-of-practice privileges and without the barriers and limitations that currently unfairly restrict their freedom of choice.

We need to petition the Obama administration to stop the restraint of trade that is currently in place in Medicare. There should never be a medical doctor referral requirement for patients to obtain access to chiropractic physicians for care. We should have direct access to provide evidence-based services that are sound and scientific. There is great value in the manual form of conservative care provided by our nation's chiropractic physicians. There are solid scientific studies showing that our patient satisfaction levels are quite high; higher in fact, than all other provider types when it comes to spine care.

A change in national health care policy is no small undertaking, and access to quality care needs to be more available and cost-effective. I suggest to you that unless we change, more of the same will just be more of the same. Change must start in the colleges, the ACA and COCSA, including the 50 state and hundreds of county organizations. As well, the change starts with each of us.

We know the citizens of the country are overmedicated, undernourished and brainwashed into believing their is a pain medication or surgery to fix everything. Many of us are equally brainwashed into believing "we need to save our subluxations." Let's let it go; my recommendation is put the term into our history books.

Expanding the acceptance of quality chiropractic medical care includes treating the spine and the extremities when indicated, making a differential diagnosis, referring out when indicated, as well as educating patients about what it takes to get well and stay well. That should be our mission. If we do this, we will never be subprime, and we can compete and grow.

David Radford, DC  
Solon, Ohio

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We Deserve Every Opportunity

Dear Editor:

Regarding your ads and articles relating to [advanced nurse practitioner degrees](#) for chiropractors - this opportunity is great! I read a commentary response from a DC downing the offer and basically questioning how we could possibly stoop so low. Give me a break. I disagree completely.

Chiropractors should have an opportunity, through more advanced study, to be able to offer their patients more services and broaden our scope of chiropractic in the health care setting. To believe otherwise is a narrow-minded thought process and the reason why our profession has been held back in the "dark ages" for so long. What percent of society uses a chiropractor? Last I heard, only 8-10 percent!

This narrow-minded approach is damaging the profession as a whole and has hindered our acceptance into general health care and society. It's a no wonder why we are being targeted to be axed from national health care and stripped of our "doctor" title. How long do we sit back and accept treating only 10 percent (if that) of the population? Wake up and smell the coffee. There is

more to life and health than the beloved subluxation.

Anthony Oliverio, DC  
Crystal River, Fla.

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*Note: For background information on the nurse practitioner program referenced in the above letter, read "Advanced Nursing Degrees for DCs: How Would It Impact Your Practice and the Profession" (Dec. 2, 2008 DC) and the letters to the editor section of the [Jan. 29](#) and [Feb. 26](#) issues.*

AUGUST 2009

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