

The NICR in the 21st Century

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The past year has been a momentous one for the profession: important breakthroughs with the Veterans Administration and the National Health Service; changes and announced changes in the academic leadership of several schools; and various legal initiatives. This is also the 35th year of Activator Methods International, Ltd. (AMI), and the 15th anniversary of the nonprofit foundation I founded and am honored to serve: the National Institute of Chiropractic Research (NICR). As ever, I feel compelled to emphasize that AMI and NICR are distinct entities. The AMI is privately held, proprietary, and my source of livelihood. On the other hand, the NICR is decidedly philanthropic, controlled by an uncompensated board of directors, and functions "for the good of the order."

Both organizations insist upon maintaining the autonomy of their operations and work to avoid conflicts of interest. Nevertheless, there are many overlapping areas of interest and activity, most especially in the field of clinical research. Activator practitioners have been a significant source of funding for the NICR (God bless 'em), and several Activator-proficiency-rated clinicians serve on our board. Other board members have included chiropractic college administrators and faculty researchers, attorneys, businessmen and philanthropists, and a medical physician. We take pride in the range of people and talents we have been able to bring together in common purpose. (See chart below).

In our 15 years of operations, the NICR has financially supported or contributed to no less than 237 scholarly works, including 110 papers published in scholarly journals (as shown on the chart on page 21) 110 presentations at scholarly conferences, and 17 book chapters and books. (A comprehensive list of these works is available from our corporate secretary at jckeating@aol.com.) Our pride in these contributions to the knowledge base in the profession is bolstered by the recognition that we have operated as a "shoestring" organization. As well, many of the projects that we have contributed to have been conducted "in-house," that is, by NICR board and staff members. "Maximum bang for the buck" has been something of a motto for us.

The projects we've supported cover a wide range of concerns to the chiropractic profession. The NICR's output has included:

- clinical investigations;
- clinical analog research;
- biomechanics projects;
- spinal and neurophysiological studies;
- technology development;
- clinical research methodology;
- chiropractic history; and
- philosophical evaluations and reviews.

At year's end, the sum of all extramural grants made by NICR is slightly less than \$700,000; we delight in collaborating with matching grants for worthy projects, and whenever possible donate

"in-kind" contributions. Recipients of NICR small grants and in-kind support for historical and archival projects (1988-2002) include:

Archives of Cleveland Chiropractic College of Kansas
City Association for the History of Chiropractic
Canadian Memorial Chiropractic College
Bart N. Green, DC, MS Ed.
Claire D. Johnson, DC, MS Ed.
Joseph C. Keating Jr., PhD.
Logan College of Chiropractic
Los Angeles College of Chiropractic
Palmer College of Chiropractic West
William S. Rehm, DC
Lawrence Siordia, MD, DC
Brian Smith, DC
David Walden, MA
Western States Chiropractic College

<i>American Journal of Chiropractic Medicine</i>	<i>Journal of Manipulative & Physiological Therapeutics</i>
<i>Chiropractic</i>	<i>Journal of Spinal Disorders</i>
<i>Chiropractic History</i>	<i>Journal of the American Geriatric Society</i>
<i>Chiropractic Journal of Australia</i>	<i>Journal of the Canadian Chiropractic Association</i>
<i>Chiropractic Sports Medicine</i>	<i>Philosophical Constructs for the Chiropractic Profession (renamed Journal of Chiropractic Humanities)</i>
<i>Journal of Chiropractic Humanities</i>	
<i>Chiropractic Technique</i>	<i>Psychophysiology</i>
<i>D.C. Tracts</i>	<i>Skeptical Inquirer</i>
<i>European Journal of Chiropractic</i>	<i>Spine</i>
<i>Journal of Biomechanics</i>	<i>Topics in Clinical Chiropractic</i>

It may come as a surprise, but although historical investigations have been one of the smallest areas of investment for us financially (estimated at less than 2 percent of all funds collected), this area of philanthropy has yielded the largest percentage of scholarly products in the NICR track record (for example, 47 percent of all NICR-supported papers published in scholarly journals). We have been pleased to provide modest financial assistance for the scholarly work of several historians and for archival preservation, and continue to offer a prize of \$500 each year for the best student history paper presented at the Association for the History of Chiropractic's annual

Conference on Chiropractic History. In the next few years, look for contributions to our historical understanding of licensure, malpractice insurance, clinical technique and the sagas of several chiropractic colleges. We believe strongly that understanding where we've come from aids in planning for the future.

Indeed, we are not content to rest on our laurels, and (with 15 years behind us) have begun to reflect on where the NICR has been and in what directions the foundation should aim in years to come. The NICR's scientific research programs have sought to capitalize on opportunities, and we have often been inclined to fund projects that seemed likely to make worthy contributions at relatively little cost, somewhat irrespective of the direction of that research. We have been receptive to almost any worthy and affordable research proposal. The downside to this orientation has been a lack of sharp focus/direction, a point underscored in recent critical papers.

In the area of scientific investigation, we intend to concentrate on two specific targets. One of these will be efforts to understand the hypothetical construct upon which chiropractors have for so long based their practice: "subluxation-syndrome." To this end, we envision both laboratory studies (We hope to tease out neurological from biomechanical characteristics of the potential lesion, and just now we are engaged in final negotiations with an Australian university for this work.) and small-scale clinical trials wherein suspected mediators (i.e., presumed subluxation-indicators) as well as clinical outcomes are monitored repeatedly. Incredible as it may seem, almost no work has been done to attempt to relate the documented benefits of manipulation to the correction of spinal dysfunctions!¹ By monitoring lesion indicators and outcomes in treatment studies, we hope to shed some light on "subluxation-syndrome." The size of these adjustive trials will be limited only by our ability to raise adequate funds to support chiropractic investigators in this work.

A second direction for us in scientific studies will be efforts to determine differences in the effects of manually assisted instrument adjusting vs. more traditional adjusting (using the doctor's hands to impart the thrust). Here again, outcome trials that also involve monitoring subluxation indicators are envisioned. These will obviously and necessarily involve comparisons of the two general modes of adjusting, and will build upon studies already in print.²⁻⁴

I'd like to take this opportunity to express my thanks to the many folks (board members, staff, consultants, researchers, financial benefactors) who have contributed to the NICR's work over the years. My critics, too, some of whom have become my good friends, merit thanks for keeping me on my toes and pointing me in more accurate directions. It has been quite a ride, and I look for even better things in the years to come.

How far we've come! How far we have to go!

References

1. Keating JC. To hunt the subluxation: clinical research considerations. *Journal of Manipulative & Physiological Therapeutics* Nov/Dec 1996;19(9):613-9.
2. Gemmell HA, Jacobson BH. The immediate effect of Activator vs. MERIC adjustment on acute low back pain: a randomized controlled trial. *Journal of Manipulative & Physiological Therapeutics* Sept 1995; 18(7):453-6.
3. Wood TG, Colloca CJ, Matthews R. A pilot randomized clinical trial on the relative effect of instrumental versus manual thrust manipulation in the treatment of cervical spine dysfunction. *Journal of Manipulative & Physiological Therapeutics* May 2001;24(4):260-71.
4. Yurkiw D, Mior S. Comparison of two chiropractic techniques on pain and lateral flexion in

neck pain patients: a pilot study. *Chiropractic Technique* Nov 1996; 8(4):155-62.

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