

HEALTH & WELLNESS / LIFESTYLE

We Get Letters & E-Mail

A Call for Higher Standards

Dear Editor:

As chiropractors know, we lack respect and trust as a profession. Only about 10 percent of the public uses our services. Why? In November, *USA Today* ran a lengthy article about chiropractors in California allowing prostitutes to work in their clinics. On the national news that month, a chiropractor in Florida was arrested by police for teaching patients how to fake whiplash injuries and sue insurance companies. In the city I live in, a chiropractor is making claims based on philosophy rather than scientific or clinical research. And in a recent poll, you asked how many chiropractors we would send our family members to. (*Editor's note*: The complete ChiroPoll archives are available online: www.chiroweb.com/poll.)

The American Chiropractic Association and Mr. McAndrews are asking for donations to fight legal battles, and asking chiropractors to join professional associations. In Georgia, a chiropractic school lost CCE accreditation in the process of developing the best sports teams in the chiropractic profession. My brother-in-law attended that school, but transferred to New York Chiropractic College because he considered the former a "diploma mill." Chiropractic schools have students with the lowest GPAs entering chiropractic school; no standard entrance exam; the lowest GPA requirement for admission; and the lowest percentage of candidates entering with a four-year degree, compared to schools of medicine, dentistry, podiatry, optometry or osteopathy. Public respect and trust in chiropractic is low.

Considering the above facts, it should be obvious to our college presidents, the CCE, the ACA and Mr. McAndrews why the profession is faced with so many problems. We must increase our admission standards now and seek out students of higher quality, both intellectually and ethically. Selection of students from first-generation colleges, without four-year degrees, and with "nonprofessional" family backgrounds can only produce what I have mentioned above.

If we expect professional behavior and responsibility to our profession by joining and giving to our organizations, we must first select professional and intelligent students for our schools. Our colleges have not done this; in fact, they are involved in some way in most of our professional scandals. I urge all of you and the CCE to increase requirements for admissions into our schools. It's your responsibility. Stop embarrassing the rest of us.

John W. O'Neal, MS, DC Terre Haute, Indiana

(*Editor's note*: The following three letters to the editor comment on "What Is Our Profession REALLY Thinking," from the Jan. 1 issue of DC (www.chiroweb.com/archives/21/01/18.html).

"Become full-scope, my dear chiropractic profession"

Dear Editor:

It's funny you ask that question, because I have been pondering the same thing. This year is my 20th in practice. I have a good practice, make an above-average income, and have acquired professional skills that I am proud of and that serve my patients well. Still, when I reflect on our profession, I am in many ways disappointed and wonder about the future of chiropractic.

We can be so much more than what we have become. We have a public-relations problem, and in the eyes of most, we are nothing more than some type of back doctor. We fight over philosophy, and often define ourselves by what we can't or shouldn't do, rather than what we could or should do in the best interests of the public and our patients.

We get an incredible basic science education, but limit ourselves in what we should know or do in the clinical years of education. We give our students a less-than-adequate experience in the clinics, and send many out there with little chance for success. We want to be the alternative physician for the public, but we actually confuse the public with who we are and what we really do. In many ways, and in many states, chiropractic physicians are nothing more than spinal therapists who are given the scraps off which to make a living. Percentage-wise, we are seeing the same amount of patients in the general population, and our standard of care varies from doctor to doctor so much that you do not see many internal referrals between doctors of chiropractic or consultations like you see in other professions. How often does a diplomate in anything in chiropractic get a referral from a DC? We are all islands among ourselves, with no unity or common sense of purpose. We argue over such petty things; patients don't care if you are a "straight" or "mixer," or whatever. They do care and expect to have their health care in the hands of a competent physician - one who can help them with their health problems and guide them toward the best way to solve their conditions.

We worry over other professions; whether they should be able to adjust, manipulate or treat like DCs. Who cares? Let the marketplace decide who is the best at what they do. We should focus our energies in expanding who we are, what we can do and how we can be a better alternative to anything that is out there in the health care field. That is what the public wants to know about us. We could be the gatekeepers for natural medicine and the integrated primary health care system of the future.

Why not have it all? Let's not limit ourselves anymore. Let's put our education to the test and take on more responsibility with our patients. Let's take care of more than just neck and back pain. Let's learn to integrate ourselves into the national and public health care system of care for people form cradle to grave, with a true and more effective alternative. Some say chiropractic physicians should never get involved with prescription medications or be given training in that area. How narrow-minded that train of thought is; how irresponsible for our profession!

Let's face the facts: Drugs are effective and have their place in health care. However, we should take responsibility and use them only when needed, and get our patients off them in a safe and responsible manner as indicated. In 20 years of practice, I can't tell you how many times a patient has asked, "Why can't you help me get off of these drugs, or onto the right prescription, or a combination of natural medicine, chiropractic and lifestyle changes?" While I do integrate chiropractic care with nutrition and lifestyle changes, it is difficult to find an MD or DO to work with you when it comes to prescription medications. I believe a new breed of patients (and flocks of them) would run to our offices if they knew we were primary care physicians who would take care of their complete health care needs - emphasizing chiropractic and natural medicine first - and integrating medications or other more traditional methods as needed.

Some fear we would lose chiropractic in the process; I beg to differ. We could become a complete health care profession, with all types of DC specialists trained to help our patients. The straights would have nothing to fear. If all you want to do is straight adjusting, so be it. Be the best at what you want to do and are trained to do. We could learn how to refer to each other. Look at the osteopathic profession. I know of many DOs who really know how to adjust and hold on to their philosophical roots, but they can do it all, and in the health care system, they don't suffer for it.

Why are our chiropractic schools suffering right now? Look at what's happened to Life University. I graduated from there and saw problems 20 years ago, and nothing changed. Why would a student want to go through a basic science education that is near equivalent to a DO or MD and with a limited clinical experience, only to find out in the field that he or she has 50 states with 50 different practice acts where they will be outside looking in, in a health care system that in many ways does not know (or care that) you even exist.

Check the foreign medical school forums; you may be shocked to find that droves of DCs and students have had it with a profession that doesn't care or listen, and they are off to medical schools to complete their training. Even the U.S. medical schools are finding out what great and mature candidates our DCs and students make. Naturopathic medical schools and acupuncture schools are getting DCs in greater numbers. Why is this happening and why doesn't our profession grow up, become unified and become all we should and could be?

In the state of Florida, where I practice, I see a naturopractic profession that is getting ready to reopen its board with a full practice act. The acupuncture physicians here in Florida can do all and more than DCs now. Patients understand that those professions treat the whole body. We are missing the boat, and don't forget the MDs or DOs who are now jumping on board the "alternative medicine" bandwagon in droves. We could be left with the scraps again, and it is our fault.

I know most DCs think in much the same way, but they ask, "What is the point? Our leadership is not listening, and they are too busy trying to make a living on scraps." Many have lost hope, and do the best with what they have and have learned to do.

Become full-scope, my dear chiropractic profession, and you will see vision born again with full schools and excited students, and a public so thankful for the alternative you have given it in health care.

Manuel Faria, DC, Dipl.Ac (IAMA), FAAIM, NMD Altamonte Springs, Florida drfaria@cfl.rr.com

A Free Alternative

Dear Editor:

Congratulations! I agree with your article. I belong to both the ACA and my state organization. Unity is key. We are all here to serve God by helping the human body heal naturally through chiropractic.

Here's a thought: If, in fact, doctors of chiropractic cannot afford dues, maybe one of the national associations could develop a free membership following (obviously membership privileges would differ from paid membership) to unite us, 60,000 strong. This may be a way to communicate to all members via telephone, fax, e-mail, etc. when political actions need immediate attention.

What do you think?

H. John Goebel, DC Fort Wayne, Indiana

A Reduced Alternative

Dear Editor:

I really enjoyed your editorial article, and agree wholeheartedly. I was an ACA member for many years, but decided to discontinue for financial reasons. I am currently a part-time associate doctor and simply cannot afford the full fee. I have explained this to the ACA, and suggested they consider a reduced fee for myself and others in my situation, but have gotten absolutely no feedback. Maybe if you pass along my recommendation, membership will exceed the 10,000 mark.

Dr. Marybeth Kretz Chatham, New Jersey

(*Editor's note*: The following two letters to the editor comment on Wal-Mart's recent decision to eliminate chiropractic care from employee coverage. For more information, read "Largest Private U.S. Employer Axes Chiropractic," Nov. 30, 2002, DC, www.chiroweb.com/archives/20/25/20.html.)

"Will Wal-Mart Care? Probably Not"

Dear Editor:

I read with great chagrin about the decision of Wal-Mart to deny coverage of its associates for chiropractic care after 2002. I find it quite ironic that a store chainThe Emotion-Cancer Connection: A Medical *Qigong* PerspectiveThe Emotion-Cancer Connection: A Medical *Qigong* Perspective founded by Sam Walton, who emphasized the need to offer affordable prices and personal service to the common working man, exceeding the level of service in other similar stores, would give the axe to the only health care system in the U.S. that excels in providing just those services. Ideologically and demographically, it would seem that Wal-Mart is to the merchandise consumer what chiropractic is to the health care consumer.

My family and I have bought a great deal of items from Wal-Mart over the years. I certainly feel that all DCs should fax Wal-Mart a letter, expressing not only their clear dissatisfaction with this myopic decision, but also letting them know that since many DCs are regular customers, its decisions may adversely affect the income of chiropractic doctors, which will directly affect the amount of money Wal-Mart receives from those doctors.

But, realistically, will Wal-Mart care? Probably not, since it is the most frequently sued nongovernmental entity in the USA. Apparently lots of people are not happy with Wal-Mart. See the following Web site: www.wal-martlitigation.com/front.htm.

But, without a doubt, this announcement really is more important to doctors than they realize, and in many ways, is more important than the minutiae of the latest HIPAA guidelines. "Why?" you may ask.

It's simple. The terse, limited language Wal-Mart's representative used to explain its decision really said: "Your profession is not considered essential medical or health care. We are saving our monies to be spent on health care services which our subscribers cannot do without."

Now, what would "essential medical services" be? Well, things like the ability to set a broken bone; sew up a deep laceration; write prescriptions for antibiotics when indicated; resolve a virulent infection; etc. Can we do those things? No. Should we have that available to us? Yes.

As professionals, I am speaking to my peers "straight-up" in the vernacular of the day. We are seen as a small, relatively impoverished, politically impotent profession with a thousand voices arguing with one another. We are seen as a safe target for PBS or anyone else to defecate on with impunity. I know many of you right now are raising your righteous indignation at that statement, and saying things like, "I am well-respected in my community, and I drive a BMW." You may have a hundred diplomate degrees after your DC, but guess what people call you? A chiropractor. If you have to go to court, the opposing side will drive that point home like a dagger into the chest of a vampire!

Make no mistake. There are forces out there, both overt and covert, who are working to make the practice of chiropractic illegal. One only has to look at Italy and the move by the MDs there, to see a sign of what could, and just might, happen here.

An interesting study found that if you double the number of MDs practicing in a geographic area, you double the number of patient visits. In short, patient visits rise to meet the number of available providers of allopathic care! This is not the case with chiropractic! How many MDs do you see doing health care screenings in malls, or putting their ads on the back of grocery receipts? How many neurosurgeons have telemarketers calling you to solicit business? And do you think for one second that MDs would sit idly by in Texas and let the state take away their right to legally call themselves "physicians?" Well, it happened to us here in Texas (pursuant to the efforts of an MD anesthetist and some PTs), and we still have not regained that right/privilege! We still practice at the pleasure of the separate state governments. All it takes in any state is to have our scope of practice stripped and given to PTs or PAs to start the chain reaction!

To use Wal-Mart's language, do we provide care that treats "catastrophic illness?" I don't know what most DCs think, but it is obvious that the largest private business in America has decided in a resounding voice: No!

I have been a DC since 1989. I have watched the RAND study, *Wilk v. AMA*, and now this. I desperately desire that our profession prosper and be highly prized and respected. I want all my brothers and sisters to have big bank accounts and see lots of patients who will appreciate the level of care we offer.

But many doctors are leaving the profession because they cannot make it financially, and many more will follow in the next five years. If we really want our profession to survive and thrive, we must be like ants, not piranha.

John Raymond Baker, DC Austin, Texas

Wal-Mart: "Clear Disrespect and Apparent Contempt"?

(*Editor's note*: The following is a letter to H. Lee Scott, president and CEO of Wal-Mart Stores, Incorporated.)

Dear Mr. Scott,

In response to your letter, a copy of which is enclosed, I wish to make a number of observations and objections.

The disrespect that your company has shown me by calling me by my first name is not appreciated. As a chiropractic physician, I am entitled to the title, "Doctor." Referring to me by my first name shows clear disrespect and apparent contempt for the profession of chiropractic.

I also note the statement "Wal-Mart's group health plan is experiencing unprecedented cost growth," and also, as a result, "We are no longer covering claims for chiropractic service through the Wal-Mart Associate Medical Plan after December 31, 2002."

If Wal-Mart is experiencing "unprecedented cost growth," I would think that it would prefer chiropractic treatment of its associates in order to actually reduce and limit your health care expenditures. The decision to eliminate chiropractic treatment is obviously capricious and arbitrary, and makes no logical sense from both a financial and medical standpoint.

It is a very well-established fact; employees who receive chiropractic care not only recover more rapidly from musculoskeletal injuries as compared to those counterparts under medical care, but also miss less time from work. Therefore, there is significantly less financial loss to those companies using chiropractic care for their employees.

It has always been my impression that the management of Wal-Mart was always concerned first and foremost with the welfare of its associates, as well as providing reasonably priced merchandise to the public.

I feel that denying Wal-Mart associates chiropractic treatment will, in the short term, deny them a very effective, well-established form of treatment. In the long term, it is likely to produce increased costs to Wal-Mart related to increased costs for medical services, and increased time lost from work.

I would certainly ask that you reconsider this decision, as I feel it is in the best interest to both the Wal-Mart management and its staff.

Also, I must demand that in the future you provide the respect due the chiropractic profession by addressing chiropractic physicians with the title, "Doctor."

Daniel Serpentelli, DC Tampa, Florida

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