

The Bastardization of Chiropractic

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Chiropractic has been getting some impressive support from government studies, independent research groups, and workers' compensation findings. Suddenly it is becoming public knowledge that what we do is therapeutically superior, has more science to support it than medicine, and is safer and more cost effective. The medics conducted a study only to find out to their chagrin that chiropractic patient satisfaction is three times higher than for their medical patients. We seem to have it all and they know it.

And if that isn't enough, one of our chiropractic colleges, without the benefit of the tens of billions in research grants that go the medical schools each year, was touted by John McMillan Mennell, MD, as having the finest anatomy department that he had seen in his 40 years in medicine.

All of these things happening will no doubt motivate the physical therapists to aggressively go to legislators and work hard to manipulate spines. Meanwhile, many medics will also see the great potential of getting in on the new public trend and will take week- end courses on spinal manipulation. And then we have this new so-called organization that holds itself out as being the "scientific" manipulators who probably have a membership in the double digits but somehow manages to get a lot more public exposure that its small size deserves. These are the kind of developments that will drag spinal manipulation into the gutter.

The New Zealand report found that the amount of spinal manipulation training that physical therapists receive in school simply does not warrant their being able to function as efficiently as chiropractors. As for the MDs, it was clearly established in our trial against the AMA by Dr. John McMillan Mennell that the average medical resident has zero hours of training on spinal manipulation, and from zero to four classroom hours on the dynamics of the musculoskeletal system.

As for that so called "scientifically" oriented organization, they are actually anti-scientific, closing their minds to good studies and embracing more politics than science. One of the unfortunate parts of this entire scenario is that if they injure someone they will publish it as patients being injured from a "chiropractic" adjustment. They will somehow leave out the fact that it was done by a nonchiropractor and, of course, we get the negative heat.

The issue is not that chiropractors feel that they should have an exclusive on spinal adjusting, but that any ill-trained imitators will simply set back the quality of spinal adjusting. Let these people go back to school and get training equivalent to a chiropractor and then use it. But getting in through the back door without the same training will bastardize this entire approach to health care. We need to follow the lead of some states which have made it unlawful for others than chiropractors or osteopaths to manipulate the spine. And then I have some misgivings about whether osteopaths are qualified. As late as 1992 the osteopathic journal announced that spinal manipulation was a dead art within osteopathy. That kind of talk doesn't exactly breed confidence in them.

Chiropractors need to initiate legislation in every state that demands only chiropractors or professionals with training equivalent to chiropractors be allowed to adjust the spine. It stands to reason that allowing an MD with zero to four hours training in the dynamics of the musculoskeletal system to start adjusting the spine will cause the manipulative art to take a step backward at a time when everyone should be taking steps to improve and advance their professions. It will be a travesty if chiropractors sit back and allow this to happen. And you can bet your eye tooth that if and when they injure someone and it's published in a medical journal, it will be called a "chiropractic adjustment." There will be no mention that it was done by an MD. They haven't clarified it in the past and probably won't clarify it in the future.

Dr. Andreis Kleynhans, the former head of RMIT College of Chiropractic in Australia, went through all of the medical journals for a period of 31 years, and found 10 cases of death following a cervical adjustment. It is important to note that only one of those cases came from an actual chiropractic adjustment. Unfortunately, the medical journals and press do not seem to make this distinction. In another instance, five million history records were evaluated at the National College of Chiropractic in which neck adjustments were done, and there was not one single isolated instance of a stroke or of a death. Yet the same medical authors will indicate that non steroid anti-inflammatory drugs, which they pronounce to be reasonably safe, have 400 times greater chance of serious complications than a neck adjustment. They seem to take delight in exaggerating the so-called dangers of spinal adjustments. The hypocrisy and dishonesty of reporting these facts is obscene.

The longer that I am in chiropractic the more I know we are right, and the more outrageous and hypocritical are the attacks against chiropractic. Again, this takes me back to my last article in Dynamic Chiropractic (March 11, 1996 issue) which insists we need to become better trained to spread the truth within the media. We have the facts on our side but they will do little good if we don't do something with them. We need to organize speaker bureaus in every state as soon as possible so we can get the truth out. Truth is our greatest weapon: let's use it.

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