

Professional Religion

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We base much of our internecine fighting on our relationship to philosophy. I love chiropractic philosophy. I'm so grateful we have it. It seems that much of the fighting about philosophy is really about expressing concerns over dysfunctional flights into fantasy with wrong use of the philosophy.

To me, chiropractic philosophy is the part of chiropractic that is actually our own special religion. I know we don't generally like to think of it that way, but I do. "Be the best chiropractor you can be. Then you'll care for each patient with personal integrity and ethics. Love your patients. Your innate and the patient's innate will meet to create the healing your patient needs." This dictum of my faith sustains me in a way that all the scientific chiropractic in the world can't do.

We should all be aware by now that the overwhelming majority of medical interventions do not have empirical evidence that will justify them scientifically by double-blind studies. This has been demonstrated scientifically.¹

Robert S. Mendelsohn, MD, in his book, *Confessions of a Medical Heretic*, points out that medical doctors are priests of a religion, which is a pseudo-scientific cult. Chiropractors are not alone. Both medicine and chiropractic deny that we're religions. We're somewhat ashamed of any intimation that what we do could be confused with our images of religion. Instead, we talk about "patient communications" or "the art of medicine/chiropractic." This is fine with me. Let's not bring theology into the discussion.

However, "patient communications" and "art" just don't carry enough weight. If we recognize our similarities to religion, we won't be surprised at the reactions certain things create among us. Let's recognize the similarities our institutions, professional development, and personal practices have with something as full of passion and motivation as religion.

It's good to get together with others of like mind for religious purposes, for spiritual renewal. However, religion is best when it is kept as a private matter, or is something shared in voluntary associations.

A major principle we live by is that religion must be kept in its proper place. This gives freedom to those who are not of the same religion. We can learn to work with each other with more toleration and respect, as various religions try to do. In America, Catholics and Protestants don't kill each other. It has been difficult, but Methodists, Lutherans, Episcopalians, Mormons, Baptists, Evangelicals, Quakers, etc., coexist here successfully.

The glory of American democracy is that we have given up theocracy for something we think is better. We have no state religion. We've agreed that science and rationality shall rule our social relations.

What we're going through as a profession regarding our reactions to the Mercy Guidelines, and also

the current attacks on us in the media, has to do with what I see as a tension we have with science. I don't think we should try to ignore science, to deny it, to discredit it, or to oppose it. Science is what we've agreed to hold up as the standard now. Science has high, ethical principles. What's wrong is that sometimes the way scientific standards are applied are unfair and unethical. We should not have to hold to inappropriately stringent standards of scientific purity. We should not be held to a higher standard than the MDs.

It will be fruitful to engage in a vigorous debate about fair scientific standards and the role of science in healing professions. If we do, we will all be better for it. The standards that we hold ourselves to should be chosen by our own profession. When this is done, what we will see is the diversity of treatment approaches will continue. This has been the case in the many professional approaches in the field of psychology, and also in the development of the Protestant religion in America.

We've just been through a long period of absolute power of medicine over the American health care institutions. Unlike medical doctors, who autocratically oppressed competing religions, we must develop our professional religion in a fair and democratic way.

Let's avoid the unfortunate tendency of human nature, which is so aptly described in Nonsense, How to Overcome It: "Most people want to feel that issues are simple rather than complex, want to have their prejudices confirmed, want to feel that they 'belong' with the implication that others do not, and need to pinpoint an enemy to blame for their frustrations."²

It's up to each of us to control these tendencies in ourselves, and to not go along with people who are not in control of themselves in this way. There should be no place for vitriolic warfare between partisans of a profession. Our profession will grow into a better future in an atmosphere of dignity, toleration and respect.

1. Smith R. Where is the wisdom: The poverty of medical evidence. British Medical Journal (1001) 303:798-799.
2. Brown JAC. Techniques of Persuasion. Penguin Books, Baltimore, 1963. As quoted in Gula, Robert: Nonsense, How to Overcome It. Stein and Day, New York, 1979. p.15.

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