

Advancing Chiropractic in the '90s

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Many doctors of chiropractic do not realize the full scope and extent of FCER's program to help the chiropractic profession achieve its rightful place within the health care system. While making awards and grants for research is an important part of FCER's activities, our program is not simply limited to this pursuit, it also includes:

- doctor education via instructional videos (all members receive two per year); the International Conference on Spinal Manipulation (ICSM); published economic studies comparing the cost-effectiveness of chiropractic case management to medical case management, such as the recently published Virginia studies; data base searches, listing many difficult to find articles on a variety of chiropractic and conservative care subjects complete with author abstracts; FCER News Alert; and Spinal Manipulation, FCER's quarterly review of pertinent scientific literature.
- patient education via the Staying Well practice newsletter, Staying Well and Awareness series pamphlets, and a new series of videos.
- public education via FCER's communications efforts with major media and such booklets as Chiropractic: A Review of Current Research and Chiropractic: A Primary Care Gatekeeper.

All of these services are made possible by membership dues and contributions. FCER is proud of the fact that it has used these monies as prudently as possible, spending most of its income on program services. If we look at FCER's 1993 audited financial statements, the following picture emerges: FCER's total expenditures for the year amounted to \$2,323,275. Of that amount, \$1,874,719 (or 80.7 percent) of total expenditures went for program services, including \$333,614 for unrestricted grants to support research and \$258,243 in one restricted grant to the Practice Consultants Clinical Research Center at National College of Chiropractic, made possible by Dr. William Harris. It also includes \$180,557 to the RAND Corporation for studies of chiropractic appropriateness and utilization, and \$50,805 for various postgraduate fellowships. More than \$500,000 was expended for patient and public education, and another \$140,350 for professional education.

Through judicious use of dues and contributions, FCER held administrative costs to \$448,556, or just 19.3 percent of total expenditures. This is an extremely good ratio of program to administrative costs. Many nonprofit organizations of comparable size have administrative costs that exceed 30 percent.

It is important to emphasize that FCER's grants are made to a wide variety of chiropractic colleges and independent researchers throughout the world. The only bias that FCER has concerns the quality of the research proposed. To receive funding, studies proposed to FCER must be of the highest quality and receive high grades from two panels of reviewers: one panel consisting of clinicians, the other of scientists. This insures that funded research is of clinical significance and scientifically well designed.

At FCER's recent board of trustees meeting, Dr. Akio Sato of the Tokyo Metropolitan Institute of Gerontology in Japan, and Dr. Charles Lantz of Life Chiropractic College-West were awarded grants for research. A wide variety of chiropractic colleges and individuals have received grants from FCER over the years. There has never been any favoritism shown to any college or research institute based on national, political, or philosophical considerations.

FCER has taken the position that chiropractic is a primary care gatekeeper and that chiropractors can help address the shortage of primary care providers in the United States. This necessitates a somewhat different set of research priorities than FCER had in the past. Greater emphasis is now being placed on cost-effectiveness studies and studies that evaluate chiropractic treatment of internal conditions such as dysmenorrhea, infantile colic, migraine headache, and other somatovisceral and neurogenic problems. FCER must also gather information from many sources to make the case for chiropractic being a primary care profession. This necessitates funding of studies by independent researchers which compare chiropractic to other primary care providers such as medicine and osteopathy. It also requires that studies be undertaken to evaluate chiropractic's role in rural health care where there is considerable anecdotal evidence that chiropractors currently provide primary care to many patients.

This does not mean that FCER is abandoning back pain research or research on musculoskeletal conditions. These are still areas of considerable interest. For instance, a carpal tunnel syndrome project was recently funded at Northwestern College of Chiropractic. FCER recognizes that musculoskeletal conditions account for the largest number of pathologies treated by most chiropractors.

FCER is aggressively increasing its involvement with chiropractic associations in other countries. In May of 1994, FCER will co-sponsor and plan the academic program of the European Chiropractic Union Convention in Brussels. This is the first of a series of international meetings in which FCER will play a prominent role. FCER has also provided \$100,000 to the World Chiropractic Federation for the publication by the World Health Organization of a manual on occupational health edited by Dr. John Triano. Because this publication will be largely written by chiropractors, it will almost certainly have the effect of helping many international chiropractic associations to win licensure in their countries.

FCER believes that chiropractic's time has come. True, it faces many challenges in the form of health care reform and managed care. However, the public is tiring of symptom relief medicine and there is increasing demand for conservative care and preventive measures through life style changes. Renowned trend analyst, Gerald Celente, of the Trends' Research Institute, has described the health care practitioners of the future: "Practitioners who take a holistic approach will be in demand. They will use herbal remedies -- and know a lot more about nutrition."

In an article published in the January 28, 1993, issue of the New England Journal of Medicine, Dr. David Eisenberg, et. al., documented the public's strong desire for alternative medicine by citing the following statistics: "In 1990, Americans made an estimated 425 million visits to providers of unconventional therapy. This number exceeds the number of visits to all U.S. primary care physicians (388 million)."

The Clinton administration is committed to provider choice in its health reform program. In fact, in a letter to Stanley Heard, DC, of Hot Springs, Arkansas, Hillary Rodham Clinton said: "Let me assure you that the president's plan will protect choice of provider."

Choice of provider is as American as apple pie and is virtually certain to be included in national health care reform. This presents a golden opportunity for chiropractic as more and more efficacy data becomes available through research. After all, it is chiropractic that has emphasized preventive, holistic, and conservative care for the last 100 years.

To continue its important work, FCER needs the support of every doctor in the profession. For more information about the FCER, please contact Diana Stevens or Sharon Davin:

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