

Professionalism

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It really doesn't take much effort, and it certainly doesn't take much money. It's the type of thing that gains the respect of both the public and other professions. Because of it, a profession can expand to new heights or be relegated to the scrap heap of mediocrity and public disdain. Yet, while it won't cost anything in the way of money or time, we have a hard core of members of our profession who apparently feel that the profession of chiropractic can get by with just about anything, just because we're right.

Unfortunately, being right doesn't always mean short-term gains. Sure -- maybe after you and I are dead, the flower of recognition will come into spectacular bloom, but I'm interested in the present and the results the next 24 hours will bring.

The thorns on the rose bush of success are those people who either refuse or are too stupid to act like professionals.

Let's admit it -- we have within us a streak of lunacy that bubbles to the surface, much to the dismay of what I feel is the great majority of the profession.

One of my pet peeves has always been the clothes we wear at the office. The most common mistake is being too casual. In one office, the staff all wear very professional attire -- white jackets and all -- while the doctor wears the most casual clothes, complete with tennis shoes. This is okay if you plan to be a masseur and give massages but not if you're a doctor, giving specific corrections to the spine.

Clothes, of course, aren't the only way we fail to show a professional image. A few weeks ago I went to a seminar that was a mixture of everything from the presentation of interesting nutritional concepts to a religious revival and embarrassing ignorance.

Apparently, this particular chiropractic entrepreneur travels around the country prescribing all kinds of nutritional aids to the patients of the doctors who bring them for their "healing." He starts off by giving his audience a quick run down on how to test for the needs of the patient by placing the front or the back of your hand over different parts of the patient's body while muscle testing the arm. When the arm significantly weakens -- that's the bum organ. And all this time I thought it took more to find this out. All the lay public in the audience must have thought it pretty stupid for someone to waste all those years studying anatomy, physiology, and diagnosis when all that was needed was a quick scan with your hand over the body.

Giving this individual the benefit of a doubt -- that he's sincere in wanting to bring health to more people -- he sure has parlayed this sincere desire into a sincere and formidable way to make sincere money.

For the sake of argument, we'll say that there is some validity in his work. Many, including myself,

have used muscle testing as a diagnostic tool. The difference is that it should be only a small part of a diagnostic workup that includes physical examination, laboratory analysis, and x-ray procedures when needed. To mislead the naive and gullible into "diagnosing" major physical problems on the basis of muscle testing alone is stupid and potentially quite dangerous.

While giving his tireless performance, I got the impression that the instructor decided what organs were "sick" before he got to them and emphasized, maybe without realizing it, both in voice and test exertion, where the problem was.

One of the most outrageous "diagnoses" was made when he scanned the spines of the patients to decide exactly which vertebrae had osteoporosis. The crashing sounds you might hear are all the chiropractors around the country throwing out their x-ray machines. Gee -- and I didn't know that's all I had to do, and golly -- osteoporosis only affects one spot at a time?

Then there's the book with all the nostrums recommended on the basis of touching various parts of the body. All this, we are told, was "researched and developed over a period of 25 years." It would be interesting to see what the author considered "research."

At another seminar several years ago there was this other fellow who would place nutrients on the patient's abdomen and the right or wrong supplement was determined by the angle of the feet. After a couple of hours of that nonsense I left before I became too embarrassed.

Look -- I think I'm as open-minded as the next person. Maybe there's some validity to all this. Things I've thought were wacko in the past have turned out to have some value. My biggest problem is that too much of what we do is presented not only to the profession but to the public as "truth" without anymore genuine proof of validity than one individual's conviction and desire for money.

The danger is that those going to such seminars almost charge through the doors after the seminar is over, filled with the desire to implement what they've learned. Diagnosis is difficult enough without all those esoteric shortcuts. Imagine all the possible problems caused by such a narrowly structured examination.

By all means we should listen to the many "voices" of the body. Perform muscle testing and use iris analysis and all the other less than "orthodox" diagnostic approaches, but don't present them to the public as absolute truths, and never without some form of correlating analysis.

The body speaks to us all the time; it never lies. The trick is interpreting what it says. For the sake of our patients and our profession, let's stop putting words in its mouth for the sake of hearing what we want to hear.

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