

"The Bad Example"

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A terrible tragedy is brewing within the chiropractic profession. As usual, it's really not the doing of the pompous and blustering American Medical Association (AMA). We know where they stand and they're so drunk with ego that they believe they can slander an entire profession with lies and get away with it. As the courts have shown, they can be defeated by the dedication of a few, if we are willing to back the fight with money and determination.

No -- our greatest enemy has always been ourselves with the historic confrontation being the mixers against the straights. Right now, however, a more insidious one seems to be growing at an alarming rate. It has nothing to do with straights and mixers for it crosses party lines more often every day.

This enemy comes from within each and every DC, along with his desire to play the numbers game. More and more we seem obsessed with the numbers on the checks, the numbers of patients seen at a given time, and the number of times patient visits can be wrung from the insurance companies.

Since numbers are the success game and so many practice improvement schemes cater to this concept, it has become the national pastime of chiropractic. This results in less and less time being spent with the patient. Often the chiropractic assistant (CA) will take case histories and the vital signs, if at all, with the doctor giving a few punches in the back and then moving on to the next stranger. More and more we are relegating ourselves to the status of technicians and glorified masseurs; but then who cares as long as the numbers go up.

Well I care. Years wer'nt spent in chiropractic college to become a technician. For what it's worth, I really felt that all those classes in diagnosis and conservative health care were for the purpose of creating a physician out of the rough intellectual clay the school was given to mold.

More and more often I get the following conversation from a patient:

Patient: What are you doing?

RHT: Taking your blood pressure.

P: Why?

RHT: I beg your pardon.

P: Why are you taking my blood pressure?

RHT: I want to find out if it's within the average parameters.

P: Come on. You're a chiropractor. You don't need all that.

RHT: Why do you say that?

P: Well, if I wanted all this I'd go to my regular doctor. I've been to a lot of chiropractors and none of them ever did anything like this before.

RHT: It's too bad you feel that way. Chiropractors have been well trained in the performance of sound diagnostic procedures. In fact, our examinations have the added dimension of a neuromusculoskeletal evaluation.

P: Right, now just give me an adjustment so I can get out of here.

RHT: Since I'm a primary health care provider it's important that I make sure that my therapeutic approach will help or if you should be referred. Suppose you had something like cancer, don't you think it would be wise if I tried to find out if such a pathological process might be the cause of your pain?

P: You know, in all the time it's taken you to tell me this, I could have been in and out of my doctor's office three times over. I remember one back cracker I went to had all these people working for him. I'd go in a room, he would come in and be out by the time the buzzer went off. I figured it went off just about every three minutes. Now that's what I call real efficiency.

RHT: How did you feel when you left?

P: Sometimes not too good -- but there was always the next time.

RHT: Didn't you feel like they might not be interested in you the way they should?

P: Who cares? If I want anything from a real doctor I'll go to my MD. And while I'm at it, please don't tell anyone I've been here. If my real doctor ever heard I came to one of you guys he'd get mad and probably not see me again.

RHT: You might not understand this but I'm a well-trained physician.

P: Oh -- you're an MD?

RHT: No, I'm a chiropractor.

P: But you said you were a physician.

RHT: That's right -- a chiropractic physician.

P: Only MDs are physicians.

RHT: That's not what it says on my license. You see "physician" applies to anyone engaged in the practice of treating people who are sick and infirmed. That's why there are those known as homeopathic physicians, osteopathic physicians, and naturopathic physicians. I happen to be a physician who practices chiropractic as a specialty. There is no desire on my part to emulate an MD for I feel I'm better trained for what I do and offer an important alternative to the often inappropriate use of dangerous drugs and surgery.

P: Right, but I think I'll go somewhere else and be given a quick crack so I can be on my way.

And so goes an increasing number of visits. No matter how cursory an examination might be, there seems to be more and more patients who have been treated like a piece of meat by the DCs they've been to. Rack and crack 'em -- in and out, and give me your money.

Sure -- have an efficient office that sees a lot of patients and makes a lot of money. But can't more take pride in all that was so laboriously taught them by pausing just for a moment to find out who they're treating and what that patient's specific needs are? You might not make quite as much money, but you'll be richer in another sense and both you and the patient will benefit. Try it sometime. You might discover you're a "real doctor" and like the feeling.

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