

## The History of PT Modalities and the Application of Chiropractic Treatment

The information contained within this article was originally submitted to the California PT Association for publication in their journal. Unfortunately the PTs declined my article and I was told: "The PTs probably would not believe the facts in your article." I replied that any of them were welcome to disagree with me, "Just present the facts." The PT profession and chiropractic profession have obviously made an uncomfortable issue out of the use of heat, water, light, and electricity. Therefore I must tell the truth: The Colleges of Chiropractic have included PT modalities in their curriculum since 1912.<sup>1</sup>

This began with the National College of Chiropractic, and other DC colleges followed. During these times, no other schools existed that taught the theory and application of heat, light, water, and electricity, yet the medical profession cried "quackery" and disclaimed any therapeutic benefit whatsoever.<sup>2</sup>

In 1918, on-the-job training for PTs began at the Walter Reed Army Hospital.<sup>3</sup> In 1990 physical therapy colleges teach 105 hours of instruction in the use of PT modalities and for many years the California Board of Chiropractic of Examiners has required that chiropractors have a minimum of 120 hours instruction in this area amongst a core curriculum that is generally five academic years of 5,200 hours. A minimum of two years of undergraduate study with the same science requirements to enter medical school is required before entering a chiropractic school.<sup>4</sup>

In 1990 many PT colleges have upgraded their standards by requiring a four year degree to enter PT school, which consists of four semesters of 9-15 units per semester (1400 hours). The DC curriculum is divided between physiology, anatomy, pathology, nutrition, radiology diagnosis, physical diagnosis, and chiropractic methodology as the core curriculum.<sup>5</sup> Since 1910 chiropractic colleges have used x-ray diagnosis and invented upright radiograph and full spine radiograph.<sup>6,7</sup> X-ray assessment of the spine permits observation of a joint's malposition, direction and angle, as well as a screen for disease pathology. Chiropractic methodology courses involve 1200 hours of instruction and observation in the use of chiropractic short lever manipulation and its instruments, while the entire 1400 hour PT school consists of fundamental anatomy, physiology, and exercise therapeutics.<sup>8</sup>

D.D. Palmer was the first to declare that body temperature was controlled by the nervous system and that spinal stress affected the nervous system's control of organ function in 1903 and 1895.<sup>9,10</sup>

D.D. Palmer credited "bonesetters" with having existed for thousands of years but laid claim this method of bone manipulation: short lever. That is, using the spinous, transverse processes of other prominences as levers to locally reposition a vertebra's articulations while preventing the rest of the

spine from unnecessary movement.<sup>11</sup> The ancient history of bonesetting includes the osteopathic profession who was the first group to advance and license "long lever" manipulation: holding the head, torso or extremity (not the local segment to be moved) and with a wrench or thrust non-specifically moving all the articulations of that region without focusing on any specific articulation or displacement.<sup>12</sup>

Therefore, chiropractic is a natural healing art that relies upon comprehensive examination and chiropractic short lever manipulation as the primary mode of treatment. Adjunctively, the use of "physiotherapy" (this term is a contraction of "physiological therapeutic" which was coined by the National College of Chiropractic in 1912) and nutrition are used when necessary to aid the healing process.<sup>13</sup> In 1990 more than 100 U.S. hospitals utilize chiropractors in rendering chiropractic short lever manipulation. X-rays, MRIs, vascular assessment and physiotherapy would then be administered by separate professionals of those areas. Chiropractic is a distinct and viable addition to hospital in and out-patient facilities; past and future studies validating chiropractic care will prevail. Doctors of chiropractic and physical therapists need to cast aside resentments since the value of each profession has already been shown to be unquestionable.

I ask all DCs that have read my brief article to photocopy and distribute this information to your local hospital administrator and PT department in order to establish a healthful dialogue. This will protect the consumer from unlicensed and untrained bone manipulators and contribute to the benefit of the world population.

### *References*

1. Beideman, Ronald, Dean of Records of the National College of Chiropractic, Lombard, Illinois, 1989
2. Ransom, James, Chiropractic History, Vol. 4, 1984, p. 49
3. Vogel, E., Physical Therapy, 56,1, 1976, p. 15
4. Mt. St. Mary's College: Physical Therapy Curriculum, 1990, Los Angeles, CA.
5. Rules and Regulations: California Board of Chiropractic Examiners. Palmer College of Chiropractic, 1989-90 Bulletin, Davenport, IA.
6. The Chiropractic Journal, July 1938, p.18
7. Loban, Joy M., ed: "The Erect Spinograph," Universal Chiropractic College Bulletin, August 1924
8. Palmer College of Chiropractic, 1989-90 Bulletin, Davenport, IA.
9. Palmer, D.D., The Science of Chiropractic, 1906, p.58
10. Palmer, D.D., The Science of Philosophy and Art of Chiropractic, 1910, p. 11
11. Still, A.T., Osteopathy Research and Practice, Kirksville, MO.
12. Beidemen, Ronald, Dean of Records of the National College of Chiropractic, Lombard, IL., 1989

NOVEMBER 1990