Dynamic Chiropractic

CHIROPRACTIC (GENERAL)

We Get Letters & E-Mail

Editor's note: We received the following letter to the editor in response to Dr. Louis Sportelli's Jan. 29, 2005 column, "Professional Advertising: What Have We Wrought?" (www.chiroweb.com/archives/23/02/17.html). That letter is printed in its entirety below, followed by a response from Dr. Sportelli.

"I Challenge You to Drop the Act and Join the Real Fight"

Dear Dr. Sportelli:

Thank you for the years of dedication and service you have delivered faithfully to your patients and the chiropractic profession in general. My name is Tom Baader. I have been blessed to serve the families of beautiful southwest Virginia as a chiropractor for the past 12 years. You may also know me as the chiropractor who stands on street corners in his Speedos, soliciting new patients. You made reference to one of my external marketing campaigns in your editorial for *Dynamic Chiropractic* on January 29, 2005.

Being a human being, my first response to your article was of course defensive. I immediately generated a mental diatribe of inflammatory responses, such as:

- 1. That self-righteous pontificator has no idea what it is like for the modern-day chiropractor.
- 2. He has never lost family time standing in the middle of a busy mall on the weekend, "spinal screening" the masses after a long week of patient care and practice management.
- 3. My ad was probably sent in by some scared child sitting in an empty office wearing an oversized white lab jacket. You know the guy Mr. I Wish I Were a Real Doctor.
- 4. How dare they insult a program that has changed hundreds of lives and generated thousands of dollars for the American Red Cross Disaster Relief Fund?

I was suddenly struck by a terrible realization. This has all been done before. Many times before. The end is always the same. Chiropractic loses. Our patients lose. Dr. Sportelli, you said it yourself in your article,

"I have to chuckle however that things aren't really changing at all that much," in reference to the state of our profession. You see the writing on the wall for this profession. And yet you have fallen into the same quagmire of judgment and ridicule my initial thoughts toward your column provoked in me. Dr. Sportelli, you and I and the reader have become nothing more than pathetic role players in a way-off-Broadway show, playing to an empty theater house.

White coats and stethoscopes. This is not what chiropractic is. Low back pain and cervical strain. This is not what chiropractic is. Chiropractic must become something bigger and better. The public

demands it. [In your article,] you recognized the cause of the fall of Winn Dixie. Lack of identity. But some in this profession strive to don the tired garb of the failed medical doctor, replacing "pills" with pain-reducing manipulations. Take a lesson from the osteopath before you continue down that slippery slope.

History teaches us that if your enemy cannot beat you with lies and propaganda, they will attempt to dilute your army with their own "seed." Before you "straights" start cheering, I have something to say to you. If chiropractic does not evolve into something more than the "almighty adjustment," we will become known as "the idiots with the keys to the gates of paradise."

Wake up, chiropractor. Your people are burdened with the crushing medical bills because we are not leading them to the truth. This is the day of the \$5,000 deductible, the \$40 co-payment, and HSAs. Wake, chiropractor, your patients need you. Educate yourselves in the ways of proactive nutrition and supplementation, correct their spines, establish well-conditioned, stable bodies through cutting-edge rehabilitation. The public wants what you have. They will pay for your guidance if you produce those lasting results.

Dr. Sportelli, I challenge you to drop the act and join the real fight. Mixers and Straights - I challenge you, too. As for me, well, my Speedos just came out of the dryer.

Dr. Thomas McLeod Baader Roanoke, Virginia

Dear Dr. Baader:

Thank you for your sense of humor and professional manner in which you have taken issue with my column. I am glad your Speedos are warm and dry, because this is one of those issues upon which we will have to agree to disagree.

You make some huge assumptions in your remarks, e.g.:

- 1. White coats and stethoscopes are not chiropractic.
- 2. Low back pain and cervical strain are not chiropractic.
- 3. Chiropractic must be something bigger, because the public demands it.

There were a few more, but suffice it to say that chiropractic is a white coat and stethoscope, if you are referring to the "diagnostic responsibilities" that are inherent and required as part of the responsibility of being a "doctor." Additionally, low back pain and cervical strain are also what chiropractic is, because we have the most evidence for low back efficacy. Hopefully, after the international symposium on the cervical spine, the chiropractic profession will have additional data to support the claims of efficacy for the cervical spine as well.

I am curious as to how you concluded that the public has demanded chiropractic be more. More than what? The market share has plummeted, the enrollment in our colleges has been reduced by 35%-40%, the "identity" of the profession is a quagmire of confusion - and you're suggesting that "the public" wants doctors of chiropractic to be more? Again I ask, more than what?

Every single public survey has concluded the same thing: The public has a very narrow focus as to what they will allow, agree to, believe and accept as a role for a doctor of chiropractic. They will not come to a DC for brain surgery, tooth decay, eye exams or other conditions which have not been supported by evidence. The public, and, by the way, the social research, have concluded (whether we like it or not) that chiropractors are associated with musculoskeletal pain, back pain, neck pain, headaches. Just look at the most recent J.C. Penny ad dealing with fashion models and the lineup of men who are at the office of a chiropractor for some "neck" disorder.

I made comment about Speedos simply because it represents a form of advertising that can and does get att-ention, but does it do the profession any collective good for our image? Personally, I think not.

I believe our first job is to get a stronger message that is congruent with what the public already believes and at least increase our market share with the millions of individuals afflicted with back pain, neck pain and headaches. When these individuals come to the doctor of chiropractic, they can then be educated to other possibilities ... "one patient at a time." Until then, I think we all have a responsibility to help make every single practitioner, as well as the thousands of students who will graduate as a DC, successful. We can only do that if we have a message that resonates with the public, and one which they can believe in.

In conclusion, you can continue doing what you are doing - it is your prerogative; but if you look at the Gallup polls for the health care professions, chiropractors are not very high on the list. I want to help increase our climb to the top.

Louis Sportelli, DC Palmerton, Pennsylvania

"Marketing and Advertising Only Work When"

Dear Editor:

Kudos to Dr. Garth Aamodt's pointed yet accurate account of the state of our profession, found in the September 1, 2005 issue of *DC* [www.chiroweb.com/archives/23/18/17.html]. Whether coincidental or not, in the same issue, Anthony Rosner, PhD, reports from the WFC conference in Sidney, Australia and details the work done by the WFC and Life University to adopt numerous "identity statements." The six identity statements that were adopted sound like the basis for a strong, united profession. Unfortunately, the first five serve only to validate the "subluxation" by linking it with legitimate identifiers. As Dr. Aamodt states, the subluxation specialists mix a little truth with a lot of error. I spend so much of my day trying to defend myself and our profession, not from medical bias or other outside forces, as much as from patients referred to me who have had negative experiences with chiropractors - namely those described by Dr. Aamodt.

The Foundation for Chiropractic Progress and all those involved in this project should be lauded for their efforts. However, if the identity of our profession has not yet been specifically defined and nobody is willing to call the charlatans on what they really are, let's not spend any time on an expensive mass-marketing campaign. I would gladly transfer a reasonable sum of my own money each month to support the foundation once we agree about the experience that a patient should have when they respond to the campaign and call a chiropractic office (hopefully mine) to schedule their first appointment. As a chiropractor/small-business owner, I have learned through failure (i.e., lost time and

money) that marketing and advertising only work when the clinical experiences those patients have are effective, valuable and consistent.

Again, thank you to all those in and around the chiropractic profession working toward improving ourstature and place in the health care delivery system.

Richard Bobinski, DC Costa Mesa, California

A Twofold Approach to Educating the Public

Dear Editor:

I am a third-generation chiropractor. Both of my maternal grandparents graduated from the Keck School of Chiropractic in 1905. My mother and father received their diplomas in 1926 from Minnesota College. I am a Northwestern College of Chiropractic graduate of the class of 1950. Our family was close and I am familiar with the ups and downs of our great profession as it has plodded forward against a number of obstreperous forces:

- 1. Persecution of the early DCs (grandpa spent time in jail).
- 2. The AMA's organized effort to eliminate chiropractic.
- 3. Lack of unity because of the personal ideological tenets of the leaders who put their point of view above the profession.
- 4. Ignorance on the part of the general public as to the great benefits available through chiropractic health care.

I could mention lots of other minor situations where the members of the profession have "shot themselves in the foot."

As the profession has matured and more DCs have educated the public on an individual basis, persecution has gradually been overcome, but there is a limit to the number of people one person can educate. It still exists to the extent that our percentage of the health care market share has not grown. The Wilk lawsuit pretty much took care of the second point, with the AMA's efforts to eliminate our profession. Point number three still exists, although recently, both Pennsylvania and New Jersey have been able to unite all DCs behind one organization through the efforts of Gene Veno. We still have the problem of lack of knowledge on the part of the majority of the American people about the efficaciousness of chiropractic care.

The purpose of this letter is twofold: First, the recent formation of the Foundation for Chiropractic Progress, under the leadership of Gene Veno, is going to be a powerful voice to attempt to bring the chiropractic story to the general public; however, the plans call for a media blitz with the chiropractic story being told on TV, radio and in various magazines.

This is going to take a huge amount of money. There have been a number of individuals, organizations and suppliers of products used by chiropractors who have pledged funds to support this grandiose effort, but in my opinion, the major support should be coming from those who will benefit the most:

the members of our profession. I have written a book and have pledged 25 percent of the profit to go to the foundation. Every doctor of chiropractic should be able to contribute the value of a least one adjustment per month to the cause. If you can afford more, authorize the foundation to do an automatic withdrawal from your business account. It is tax-deductible.

I stated that this letter has a twofold objective. My grandparents and parents, and myself, in the early years of my practice, took care of a cross-section of health care problems. The subject matter of my book is 30 true stories of patients who recovered from a health problem that is not usually considered to have any relationship to the back and neck. Such things as bedwetting, nail fungus, pain in the eyeball, congestive heart failure, motion sickness, hiccups, forestalling a third heart attack, prenatal care, dislocated shoulder, bladder and bowel incontinence, spontaneous miscarriages at the end of the first trimester, sinus, diarrhea, high triglycerides, double vision, longevity, chronic fatigue, hay fever, calcium deposits in the bursa, failed back surgery, herpes, feeling of water in the ear, and sunburn. Chiropractic research has been directed at "evidence-based" documentation. This has scientifically established that spinal adjustments are the best method to take care of a back problem; however, it has not alerted the general public to this fact. Another factor enters the scene with the idea of competing for the back care dollar, by new spinal surgical procedures that get heralded by the media. Also, even Wal-Mart is getting into the act. Just go to www.America'sback.com [and www.chiroweb.com/archives/22/19/28.html] and see what they are promoting.

So, my second point is that chiropractic has to start educating the public as to the extensive scope of ailments that respond favorably to spinal adjustments. The majority of the problems listed above are the effect of chiropractic on the autonomic nervous system. Many of the patients consulted the chiropractor as a last resort. Do our young doctors have the philosophical background to tackle a case that medicine has failed, or will they just refer that problem to another MD? It would be very difficult to show "evidence-based" results in such cases, although chiropractic correction of the cause of the problem is far superior to the use of artificial pharmaceuticals.

I will get off my soapbox now. Thanks for listening.

Dr. Kennon Rude Boulder, Colorado

NOVEMBER 2005

©2024 Dynanamic Chiropractic™ All Rights Reserved