

Looking Back: 1988

Editorial Staff

As we celebrate our 25th anniversary as the definitive news and information source for the chiropractic profession, we look back at the important events as reported in DC since 1983, while also looking forward to the future. Throughout 2008, we will feature a review of the top headlines in chiropractic for a given year, along with an article on the future of chiropractic authored by an influential member of the profession.

Feb. 1, 1988: ACA Signs *Reader's Digest* Contract

It's on. It's official. The April 1988 issue of *Reader's Digest* magazine will carry a special eight-page insert on chiropractic into the homes of more than 53 million Americans. Close to 5,000 doctors of chiropractic sent in their \$200 to become partners with *Reader's Digest* in this first-ever national chiropractic marketing program.

Dr. Louis Sportelli, district governor of the American Chiropractic Association, is the man truly responsible for the success of the *Reader's Digest* program. He was singled out for his tremendous sacrifices in bringing all segments of the profession together to make it happen in the Dec. 15, 1987 issue of *Dynamic Chiropractic*, when he was named 1987 "MAN OF THE YEAR."

There were four special donations of \$10,000 - one each from the Association Group Agency and the National Chiropractic Mutual Insurance Company, Inc. of Iowa, the Foundation for Chiropractic Education & Research from Virginia and the Dr. William Harris Practice Consultants organization from Georgia. Colleges and college students contributed, like the \$1,000 from the Los Angeles College of Chiropractic student body and \$700 from the April 1987 graduating class of National College.

State associations not only gave their money, but most also published stories and donated free advertising space. There was money from a few chiropractic suppliers and non-DCs like attorney George McAndrews donating in the name of his deceased DC father and himself. Dr. James Parker played the videotape of the *Reader's Digest* program to everyone attending several gatherings of the Parker Chiropractic Research Foundation.

Thanks to Dr. Louis Sportelli, the importance of the *Reader's Digest* program got through, by word of mouth, stories and ads in most of the chiropractic publications and by the videotape being played where DCs were meeting in all parts of the U.S. Now, there is absolutely no risk for anyone that was holding back thinking there might not be enough money to ensure the program's success. There is still time for DCs who didn't get around to signing up to become a partner in the *Reader's Digest* program in their area, all for a mere \$200.

The ACA officers and board of governors, who must be commended for their wisdom and courage to back such a program, wisely voted recently that every dollar they collect over the previously

announced fixed cost of the *Reader's Digest* program will NOT go into the ACA bank account, but instead will be set aside in a special fund for *Reader's Digest* II or a similar national chiropractic marketing program in some other publication.

Feb. 1, 1988: AMA Prints Injunction in Its Journal

Rather than be found in contempt of federal court, the AMA, after exhausting every legal possibility, complied with the federal order by printing in its entirety Federal Judge Susan Getzendanner's injunction against the AMA and its members.

Physician's Weekly, a widely read Chicago based tabloid newspaper to the medical profession, carried an interesting story on the front page of its Jan. 4, 1988 issue. The headline read, "Injunction in *JAMA* called a 'Major Victory' for AMA." Howard Wolinsky, who wrote the article, led off with, "It wasn't a pretty sight for the AMA. There in the pages of *JAMA* (*Journal of the American Medical Association*), published by order of the U.S. Court of Appeals here, ran the text of an injunction ordering the AMA to end its boycott of chiropractic."

Kirk Johnson, the AMA general counsel, said it could have been worse and claimed the AMA really won a "major victory." No doubt he was referring to the fact that the AMA did win a reprieve from two other stipulations set forth in the federal judge's order. The U.S. Court of Appeals did order a stay of mailing copies of the injunction to 285,000 AMA members and 1,000 employees, and a rewrite of AMA Judicial Council opinions to reflect the decision.

Kirk Johnson went on to say, "We got 90 percent." He stated that publishing the injunction in *JAMA* was the least damaging of the three requirements. No doubt the reason for this comment was the fact that the editor of *JAMA* cleverly spent an entire page immediately following the two pages of the judge's injunction trying to take AMA members focus away from the injunction and all that led up to it.

Mr. Johnson stated that the most damaging to the AMA would have been the mailing of the complete injunction to all AMA members. Attorney George McAndrews, when told of Mr. Johnson's remarks, stated, "A letter gets thrown away, but *JAMA* is permanent." AMA Executive Vice President James Sammons must have felt the same way when he pleaded to the Court of Appeals for a stay. He told the court that the adverse effects on the AMA's relationship with its members from publication in *JAMA* will be the same as mailing the injunction. He went on to say that damage to *JAMA*'s stature cannot be repaired by any future reversal.

Feb. 15, 1988: Joint Merger Statement by ACA and ICA Presidents

Jan. 23, 1988 was to many a historic day of the chiropractic profession. On that day there was a consensus to place in motion the proposal for merger of the ICA and the ACA into a new association, with the proposed name being the American International Chiropractic Association. Both the ACA Board of Governors and the ICA Board of Directors voted to adopt the proposed charter and bylaws and send it to the ICA's membership and ACA's House of Delegates for consideration.

When ultimately ratified the merger or consolidation will become official and the new chiropractic association will become a long-awaited reality! The timetable recommended is as follows: The charter and bylaws of the new association are to be presented to the ACA's House of Delegates at its annual

meeting in Philadelphia the fourth week of June and to the ICA membership in Monterey, Calif. on July 16 at the annual convention. If considered and ratified, the goal is to create the new association by September 1988 and to be fully operational by December 1988.

The ACA and ICA have been discussing merger for at least the past seven and a half years. For the past two-plus years, attempts to resolve the differences that have divided our profession and association intensified. There have been a total of 18 meetings.

Our committees have drafted merger documents. Draft number eight is, in the opinion of our committees, our best effort to date. While we do not claim it to be the last word in a document, we do believe it is our best effort and is the product of our committees with input and recommendations from many sources. Many compromises have been made on both sides, but neither has compromised their principles. We have learned to respect each other and come to realize that many of our perceived difference were incorrect and that we have much in common. We recommended that the boards of ICA and ACA give serious consideration to these documents and adopt them so they can be taken to the proper bodies for consideration and hopefully, ratification. On Jan. 23, 1988 the boards did just that.

As the current committees began our meetings some two years ago, we unanimously agreed that the profession would be better served if we could find a FAIR way to form one association. We all agreed to work toward that end. With that beginning, we set out to do what many believed to be impossible!

What is fair to one person may not seem fair to another. The challenges before us were formidable and many. How do you overcome years of fear and mistrust? This certainly was not the first time efforts had been made to merge, but it has most definitely been the most in depth effort. How do you create an organizational structure that is fair to one group that has a membership that is over three times larger than the other in such a manner that the larger group does not feel like it is giving up more than its equal share, while at the same time designing it so the smaller group does not feel like it is the "lamb being eaten by the lion?"

The first step was to agree on the overall goals and objectives of the new association. The proposed association is to be a totally new entity designed to lead chiropractic into the second century of public service. It is the intent that this association will serve as the BULWARK against any and all effort to interfere with the profession's dedication to serve humankind. We established four SUPERORDINATE GOALS for the new association to deal with immediately:

1. PR campaign to increase the chiropractic patient population from 15 million to 50 million by 1995.
2. Intensified research programs to investigate the full impact of chiropractic principles in promoting and maintaining optimum health.
3. Using scientific methods and evidence attempts to secure the position of the chiropractic profession as pre-eminent in nonsurgical spinal and neuromusculoskeletal care.
4. Help other countries expand chiropractic licensure from seven to 50 by 1995.

The new association recognizes the importance to health of a normally functioning neuromusculoskeletal system and the special importance of the neuron-spinal relationship to the rest of the body. This then was the foundation and the reason for attempting to create a new association, and this was agreed by all committee members.

Our next task was to draft an ORGANIZATIONAL STRUCTURE that had built into it CHECKS AND

BALANCES to protect both the minority and majority, and to create a workable structure that would not hamstring the new association from functioning in an efficient manner. Before going into those checks and balances, there are few points that must be taken into consideration. Our associations are not opposing armies. We are not enemies! We all are chiropractors working for what we believe is best for the profession, even though there are differences of opinions. Merging these two associations is not like attempting to merge the U.S. with Russia, even though some seem to think in those terms.

The profession has two common enemies: the AMA - It has attempted to destroy the entire profession and will continue to do all it can to hold us back, and in fact has used and encouraged our division to hinder our progress. As you will recall, the AMA, in one of its confidential documents, outlined four major points it felt important to obtainment of its goal to "contain and eliminate" our profession. One of these goals was to do all it could to keep us divided and fighting internally. The AMA stated that in its opinion, if we ever united we would be a much more powerful and effective force.

While they have not succeeded in destroying our profession, they have certainly hindered our progress. One MUST WONDER just what kinds of advances the profession could have made if we had merged back in the 1960s? Perhaps even more importantly - how many people, due to this conspiracy, have suffered needlessly because they have been kept from knowing the benefits of chiropractic?

The second enemy is ignorance. The public, insurance companies, legislators, news media, and educators were fed false information about our profession. A major public relations campaign must to be undertaken in order to correct the injury caused our profession by the AMA. The *Reader's Digest* program is a step in that direction. We are pleased to report to you that the ICA board of directors voted to endorse that program. The ACA is to be commended for starting and assuring this program will succeed.

If those who are opposed to merger are opposed because the new organization has not adopted a position of "hands-only spinal adjusting" as the scope of practice, then they may not want to support this association, and in fact would be hard pressed to truly support the current ICA or ACA. Realistically it is not possible to have a merger on such a narrow scope, and it will never happen, but we must make room in the democracy for ALL who wish to join and ALL who wish to participate.

On the other hand, if your concern is not with dictating to others how they must practice, but rather with making certain that the principles of chiropractic are protected and the central focus of the association revolves around the neuron-spinal relationship, you can support this document and the proposed merger, because this is well-protected. This document protects such important issues as the subluxations complex and its components, the right to practice as your state law permits, the profession's identity, and acknowledgement that chiropractic care does not include the use of drugs or surgery.

The philosophical direction the profession takes is influenced in a major way by the colleges and to a much lesser degree by the national associations. Hopefully, as more research is done many of the historical philosophical arguments will be resolved. The new association is committed to research. We have committed 25 percent of the budget for research.

The threats and challenges that face our profession mandate the most efficient, resourceful use of our resources. That requires merger. PPOs, HMOs, insurance equality, hospital rights, and increases competition from MDs, PTs, etc., are vital issues our membership wants effectively addressed. One unified association gives us a much better opportunity to successfully address those challenges.

Checks and Balances

Perhaps the most difficult task was how to fairly handle the transition of power between two organizations with such a difference in size and other perceived differences. The larger group, the ACA, felt that the presentation should be based on membership size ratio. The smaller group, the ICA, felt that in order to preserve what it felt was important to it, and perhaps not to the ACA, it needed equal representation. There were also two other major hurdles. 1) How to elect the president and VP initially and after the transition period. The ACE elects its president and vice president by a majority vote of delegates, while the ICA elects its leaders by mail ballot of the membership. 2) In the ACA, in order to change its charter, the association directs its delegates, who ultimately make the change. In the ICA, the membership changes the constitution by a majority-vote mail ballot of the membership. The officials in both associations like the systems they have because they have served each association well.

These problems were resolved as follows: The charter/constitution contains the items over which both associations have expressed great concern and fear. The minority will be protected because a two-thirds vote of the Congress or membership is required to change it. If the membership becomes unhappy with the direction, they have a safety valve in that they can change the charter/constitution by a mail ballot. However, since this is to be only a safety valve, it should not be changed easily. Any proposed change requires a petition signed by 10 percent of the members to bring it before the membership. To prevent only a small number of the membership from changing it, it requires that at least 30 percent of the entire membership vote, and then it will pass only with a two-thirds majority.

The first four years is a transition period. The first president shall be from the ICA. The first chairman of the board shall be from the ACA. The vice president shall be from the ACA and become the second president. The second chairman of the board shall be from the ICA. The second vice president shall be elected from the association. The president shall fill the vacant position of past president when their term expires. There shall be a bill review committee for the first four years and it shall have equal representation from the former ICA and ACA. There shall be 10 members and they will be elected by the Congress.

Since we were unable to agree whether future presidents and vice presidents should be elected by mail ballot of the membership, or the Congress of Representatives, it was agreed that the membership will determine by mail ballot how they wish to elect their future presents and VPs. The Congress of Representatives is the supreme policy-making body and the Board of Governors and president act under the specific authority of the Congress. Thus, it is more important for the ICA to have a stronger voice in the Congress than on the board. Since in the ICA it is the Board of Directors who sets policy, it is difficult for ICA to think in those terms, but it must in order to understand the checks and balances.

The ACA has a larger numerical advantage in the initial Board of Governors; however, having worked together and getting to know each other, most committee members, if not all, learned and agreed that there is very little difference between us. It is important for everyone to start thinking in terms that we are going to be on the same team. In the past, we have been on different teams.

The Congress of Representatives is the supreme policy-making body, however there is a provision which allows the membership the right to change the charter. It is in the Congress that initially the ICA is guaranteed the same number of representatives as the ACA. Each state will have one ICA

representative and one ACA representative. Combined, they shall represent up to 250 members in each state. There will be approximately 31 states that have a membership of 250 or less members; thus, in those states there will be equal representation.

In those states where there are more than 250 members, there will be additional representatives depending on the new association's membership in the state. Additional representatives shall be elected from the membership, giving any member an equal opportunity to run for the office. As stated before, the differences that divide us are not as great as some perceive. The key to winning elections in the new association shall be individuals actively working to serve their profession and the association. Doctors will be elected on their merit and ability to communicate with their colleagues, rather than on the former association membership.

The present committees, after 19 meetings and eight drafts of the documents, agree that they have done the best that they can, and that they have compromised as much as either side felt they could without compromising its principles. The question is: Will the profession be better served with the merger of our associations? The boards of ICA and ACA believe so and recommend the consideration and eventual ratification of the new charter and bylaws.

Delaying the decision to a later date is not the answer. The things which divide us, if in fact they ever did, are not likely to change. If we can't do it now, we see no reason to believe that we will be able to at a later date. Sometime else is always in the future. Our respective memberships want us to merge - at the very least they want to have the opportunity to decide this issue that represents THEIR future. They are going to have that opportunity for consideration and ratification through the method outlined earlier in this report.

This profession has an exciting future. It now has the opportunity to join forces and become one team working to better serve patients and our members. Let's meet the goal of creating a new, powerful association in 1988! A dream many have had, a goal many said was impossible - now only a breath away. Together, we can breathe life into a dream and make it a reality.

Michael D. Pedigo, DC
President, ICA
February 3, 1988

Ken Luedtke, DC
President, ACA
February 3, 1988

April 1, 1988: California Medics & Physical Therapists Declare WAR on Chiropractic

There's an old saying that if you don't learn from history, you'll be doomed to repeat it. This reminds me of the year 1941. While I was young at the time, I still remember well that Japanese envoys were in Washington, D.C., smilingly pretending they were interested in keeping peace while at the same time their planes were in the air about to drop bombs on the U.S. Naval Forces at Pearl Harbor.

Forty-seven years later, an "envoy" called the president of the California Medical Association was sitting stuffing himself at a California Chiropractic Association luncheon while the lawyers for his profession were planning their trip to the courthouse to introduce litigation that would, if successful,

emasculate and render impotent the chiropractic profession in California. Armed with all manner of distilled legal poison from interpretations gained through the indifference of a passive chiropractic profession, the attorneys representing the medical people and the physical therapists launched an attack to take away everything from the use of all physical therapy modalities to soft-tissue manipulation. By the time they were through, California would make Michigan seem like a Utopian journey into liberalism.

One thing that seems to be forgotten by most of us in the chiropractic profession is that just about every DC loves what he or she does and wants it to be protected to grow. Most of our problems come from individual and organized views as to just what constitutes what we do and the best way to obtain the protection and growth we seek. Because of the differences and consequent rhetoric, it appears sometimes that there is more that divides us than holds us together. Indeed, there are those who would rather see chiropractic destroyed than do anything other than the way they think it should be done. Fortunately those voices, while thundering, come from small bodies.

For some time, we at *Dynamic Chiropractic* have undoubtedly appeared to concentrate on the activities in the state of California. This has been done for a special reason. There are more doctors of chiropractic in California than in any other area of the world. With 7,078 practitioners and 2,836 students, just about one in five chiropractors in the United States hold a California license. That represents more than 15 percent of the DCs around the world. While other countries and other states may have one or two chiropractic schools, California alone has five. Clearly, what happens in California can and usually does have a profound effect upon the character of the entire profession.

California consequently mirrors, more than any other area in the world, the many diverse philosophies of practice indigenous to our profession. This reflects both our strengths and our weaknesses. It's important, therefore, that we accentuate only our strengths through progressive legislative activities that will ensure not only our survival but also our continued growth. The recent medical/PT attack has only served to pour steel into the collective spines of the California DCs and the organizations that represent them, and for one of the few times in our history we stand united.

Leading us in the coming conflict is the brilliant attorney of the California State Board of Chiropractic Examination, Michael J. Schroeder of Case, Schroeder, Knowlson, Mobley and Burnett in Newport Beach, Calif. Recently, Mr. Schroeder was kind enough to come to our offices to discuss the forthcoming litigation and in so doing, impressed us with his aggressive perception of what must be done to keep what we already have and to grow with the important legislation he has authored on our behalf.

Mr. Schroeder's association with chiropractic was easily manifested due in great part to his family background. With middle European ancestral roots, he was raised by parents who believed that "bone setting" and proper natural foods were the "normal" way to keep healthy. Allopathic drugs, knives and needles were only a last resort. This, along with his inordinate distaste for the corruption of greed and power, makes him a perfect champion of chiropractic. We are therefore quite proud to announce that Mr. Schroeder will be contributing monthly reports from the war zone. We hope that this will benefit the entire profession by building legal muscle on our already sturdy structure of natural health care.

In 1941 the rallying cry was "Remember Pearl Harbor" - in 1988, it's "Remember the CCA Luncheon". We won the Second World War and while this war may last even longer, the outcome will be the same - VICTORY.

May 1, 1988: The People Lose a Great Friend

While it is true that chiropractic lost a great friend with the untimely death of Dr. Robert S. Mendelsohn, it is all suffering people of this world who are the losers. Robert S. Mendelsohn, MD, was a medical heretic. He was also the chairman of the Medical Licensing Committee for the state of Illinois, associate professor of preventative medicine of the University of Illinois and the recipient of numerous awards for excellence in medicine and medical instruction.

Dr. Mendelsohn, age 61, who died in his home in Evanston, Ill., on Tuesday April 5, 1988, served as the first national director of medical consultation for the federal Head Start program. Before taking the national post, he had served as the director of Head Start in Cook County (Chicago).

In his Head Start posts, Dr. Mendelsohn championed government efforts to prevent lead poisoning in children, especially inner-city children. He argued that strong family support was far more important in rearing children than sophisticated psychological theories about child rearing.

Many Chicago-area mothers now have their children at home. Thanks in large measure to Dr. Mendelsohn, Chicago is one of the few cities where there is a corps of physicians doing home births. He raised questions about the "epidemic" of Caesarean sections in the U.S., and doctors and insurers are finally taking steps to stop unnecessary operations.

In 1969, Dr. Mendelsohn was asked to resign his national post with Head Start after he testified to a congressional committee that he thought many of the good things Head Start had achieved for youngsters were being defeated once the children reached the intellectually "deadening" public school system. Dr. Mendelsohn told that congressional committee that "sending a child to Head Start to prepare him for the public schools is like preparing a soldier for war by sending him to the French Riviera."

It was after his Head Start experience that Dr. Mendelsohn became more critical in public of medical practice, writing a newsletter and a syndicated column called, *"The People's Doctor"* and his 1979 best-seller, *Confessions of a Medical Heretic*. Here are just a few of his comments: "Annual physical examinations are a health risk," "Hospitals are dangerous places for the sick," "Most operations do little good and may do harm" and "Many drugs cause more problems than they cure." His opposition to vaccinations because of the side effects they can cause made Dr. Mendelsohn especially unpopular, alienating many colleagues who had agreed with other criticisms he'd made of medical practice. MDs tried to bring him up on charges before the local medical society for his heretical ideas. MDs elsewhere organized committees to put on pressure from all sides to remove his syndicated column from newspapers in their communities - and they succeeded in most of the big cities.

In 1984, Dr. Mendelsohn's New Medical Foundation and Columbia College sponsored a conference on dissent in medicine that brought together several well-known MDs that rocked organized medicine. *"Dissent in Medicine: Nine Doctors Speak Out"* is the first publication of "The New Foundation," of which Dr. Mendelsohn was president. Nine prestigious doctors explain how much quackery exists in modern medicine.

Dr. Gregory White, a family physician in Franklin Park, Ill., said, "Dr. Mendelsohn was a very pleasant

and kind man who became a critic because he wanted doctors to be all that they should and could be. He was an idealist; not an impractical idealist, but one who wanted doctors to live up to the highest ideals of medicine."

Dr. Quentin Young, president of the Health and Medicine Policy Research Group, said that despite Dr. Mendelsohn's controversial views, he always retained a lively sense of humor. "He was a man of great humor who could disarm his opponents and win over audiences when he engaged in public debate," said Young. "No matter how strongly he held his views, his presentation was thoughtful and smiling."

Yet Dr. Mendelsohn was an outcast in polite medical circles. Mainstream medical practitioners didn't like the way he would take their own studies to point up dangers in medical practices. They didn't like the fact that he testified against them in malpractice cases.

A eulogy delivered by his son-in-law, Rabbi Martin Lockshin of Toronto, Ontario, Canada, said, in part: "There was no group anywhere where he belonged, but he connected and cooperated with so many disparate groups with whom he shared some values without ever relinquishing his unique identity.

"He wasn't really a macrobiotic. He wasn't really a devotee of chiropractic. He wasn't really a vegetarian. But he could cooperate with and work with all these groups for common goals and be honored, respected and trusted by all these groups even though he never claimed to be one of them.

"Dad wasn't really a Hasid, but he cooperated and worked together with Hasidim on many projects. Dad wasn't a fundamentalist Christian, but when there was a confluence of interest, he'd work closely with them for some common goal - 'Don't reject out of hand any man, but don't join yourself onto a group of fools or wicked ones, a group whose values aren't yours, a group whose values will yet compromise your values.'

"Dad was a great healer, a great doctor, who refused to toe the medical establishment line. Dad was a brilliant scientist who delighted in pointing out just how unscientific science is. And dad was a pious religious Jew. Religious Judaism was one of the few groups that he never criticized, but still, dad never entirely 'fit in' as a typical member of any group or subgroup of Judaism.

"Dad was the most original and creative thinker I knew, and yet he was no *luftmensch*, no ivory tower academic. To the contrary, he spent hours and hours helping people and solving other people's problems, not just those of a medical nature. Hundreds of people knew that Dr. Mendelsohn was the one who would think of some solution to their personal problems, and very rarely would it be a solution that they had already thought of."

Dr. Mendelsohn is survived by his wife, Rita; his two daughters, Ruth Lockshin and Sally Mendelsohn; his mother Rosamond; six grandchildren and two brothers.

Yes, chiropractic and the suffering people of this world have lost a great friend; however, Dr. Mendelsohn's work will live on in his books, newsletters, and the courage and confidence he established in a great many MDs who share his beliefs. Words alone cannot begin to express the sympathy everyone extends to his wife and family - nor appreciation for what he accomplished for us all during his time on earth. Thank you, Dr. Mendelsohn, for everything. One thing is for certain: You will NOT be forgotten.

Donald Petersen Sr.

Aug. 1, 1988: Merger Is Dead

Only about half of the purported 4,000 members of the ICA (International Chiropractors Association) decided to cast their ballots for president and vice president of the ICA - and only 56 percent of those voting voted to merge the ICA with the ACA. The ICA bylaws call for a two-thirds vote on an issue such as merger and since the "anti-merger" slate won the office of president and vice president, for all practical purposes - MERGER IS DEAD.

Credit for the victory, both against merger and the new president and vice president, must go to Dr. Sid Williams, founder and president of Life Colleges and for the past three years, chairman of the ICA board of directors. Dr. Williams slate to replace him as president of the ICA was defeated as Dr. Michael Pedigo and Dr. Virgil Strange won the offices of president and vice president, and began the process of thinking, meeting, planning, writing and speaking of the wisdom of uniting the chiropractic profession.

Dr. Williams evened the score for being rebuffed in the ICA election three years ago, and particularly in the debate on merger at the joint ACA-ICA Convention in Las Vegas, Nev. in 1987. Grinning from ear to ear, Dr. Williams cornered just about everyone at the annual ICA Convention in Monterey, Calif., July 14-17, 1988, showing the exact vote count for president and vice president and how his efforts and his followers came through not only to elect their slate, but also to defeat merger. Dr. Williams brought his winning election results to this writer not once but several times, with the statement, "You tried to get us, but we beat you."

There has never been any question but that *DC* supported the unification of the profession. The top of our masthead on page four for the past five years has stated that "MPI is committed to unify without uniformity" - and that commitment will continue. On page three of the May 1, 1988 issue, this writer stated that "Short of a miracle there will NOT be a merger of the ACA and ICA in 1988" even as we devoted massive sections of our editorial space to the debate over merger and proposed constitution and bylaws.

While neither the ACA nor the ICA has been interested in the results, *DC* spent considerable effort in completing a detailed survey of the 41,000 doctors of chiropractic in the U.S. and received a fantastic 6 percent response. Those responding identified themselves as members of the ACA, ICA, FSCO as well as not being a member of none of the three organizations. More than 86 percent of those responding were in favor of merging the ACA and the ICA to have one strong chiropractic association in the U.S.

Dr. Williams and his followers concentrated so heavily on winning the president and vice president positions and stopping the merger, they forgot to bring a large number of people to Monterey to vote for vacant positions on the ICA Board of Directors, which is done at the convention. It has been reported that the new ICA Board of Directors is made up of LESS of Dr Williams' people, and more of those who are NOT committed to what Dr. Williams and his followers want.

There is one slight glimmer of hope for merger and that lies with the ICA Board of Directors. If they vote to send draft #10 of the new association's constitution and bylaws to all ICA members for a vote, perhaps the other half of the ICA members would vote this time - and they just might vote in sufficient numbers to bring about a merger. Unless that is done, no one will ever know how all the ICA members

really stand on the issue.

But for now, MERGER IS DEAD, and those gathered in Monterey attended the wake.

Donald Petersen Sr.

Nov. 15, 1988: A Very Long Moment of Silence for Donald Maxwell Petersen, DC

Dr. Donald M. Petersen is dead. He went for a walk with his wife, Mavis, in the morning, came home and died of heart failure. It was quick and relatively painless. His son Don called with the news and asked me to write something - so here I am sitting at the word processor, fumbling with the keys with tears in my eyes and feeling totally inadequate to the task.

How do I begin to express to the profession my love and admiration for someone so special to chiropractic? As with any individual with integrity, Dr. Donald Petersen had those who hated what he stood for, but I knew that they respected his courage in expressing his beliefs. He also had those who loved him for the same reasons. Whatever those who knew him felt, they could not forget him.

After God, country and family - it was chiropractic. It was chiropractic which gave Dr. Petersen life and it was chiropractic that took it. He had been warned constantly to slow down and take care of his faulty health, but there was always that jealous mistress of his soul - chiropractic. He believed that it was God's will to help others and his way of doing that was to give our profession a universal voice. The "voice" became *Dynamic Chiropractic*, which rings with all shadings of expression to form a tapestry of words that at once excites, angers and pleases. But love or hate it, *DC* belongs to us and will continue to go on because he built it that way.

Our love and deepest sympathy goes to Mavis and his children and grandchildren. My sorrow is not for Dr. Petersen, however, for we all must die. Instead, it is for all of us who are now denied this physical presence and must wait to enjoy the pleasure of his company in another dimension. So goodbye, DMP, my dear friend. I thank God that I happened to be standing on the same path when you walked by. No one will ever be able to fill your shoes - only follow in the prints they leave.

Richard Tyler

MARCH 2008