

Chiropractic Philosophy: The Solution to the Health Care Crisis

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Philosophy is underrated, if not neglected these days. Many have forgotten what an important role it plays in shaping people's values and future. Our philosophy is the foundation for our intentions, which in turn govern our actions. Over time, the consistency of our actions leads us to our destiny.

Such is the case with the health care crisis here in the U.S. The medical philosophy of drugs first, [surgery](#) next has led this country to a point that we have one of the most expensive, least effective health care systems in the world. As a nation, we spend more, but our health is worse.

Recent research is beginning to unveil the importance of having the right health philosophy. It is beginning to strip health providers down to their health philosophy based upon what they do and the subsequent results their actions have on the patient population they serve.

From a [poster presentation](#) at an American Heart Association conference comes an interesting observation regarding how medical doctors act in their practices.¹ Guidelines for patients with high blood pressure dictate recommending lifestyle interventions, either with or without pharmacologic treatment. These lifestyle recommendations included a healthy diet, limiting salt intake, limiting alcohol intake, maintaining a healthy weight and physical activity.

Not surprisingly, "those (MDs) who exercised at least once per week or did not actively smoke were approximately twice as likely to recommend these (lifestyle) interventions." This inverts the old adage of, "Do as I say, not as I do." In the case of these medical providers: if they don't do it, they are a lot less likely to say (recommend) it. In other words, doctors who are not living a healthy lifestyle are more likely to rely on drugs (and probably surgery) over lifestyle changes to address health issues.

A [paper](#) just released in *Spine* emphasizes this point as it applies to chiropractic and surgery.² The study looked at "early predictors of lumbar spine surgery within 3 years after occupational back injury." The investigators examined the surgical rates depending on whether the patient saw a doctor of chiropractic first or a surgeon first. Again, not surprisingly, "42.7% of workers who first saw a surgeon had surgery, in contrast to only 1.5% of those who saw a chiropractor." [These results](#) caused the investigators to conclude that "there was a very strong association between surgery and first provider seen for the injury, even after adjustment for other important variables."

Clearly, the health philosophy of the two provider types dictated their recommendations to their patients and the subsequent cost to the health care system at large. And while these conclusions were quite predictable, they are now entered into the scientific literature in the form of results. The *Spine* study will likely be the impetus for many discussions among politicians looking for health care policy solutions.

Our current crisis brings chiropractic philosophy to an interesting place in the minds of policy-makers. Medicine, Big Pharma and the insurance companies all benefit as health care grows more expensive. Chiropractic's wellness philosophy is the opposite. We begin with the least invasive and cheapest form of care. This makes our wellness philosophy ever more appealing; not because it is the best way to health, but because it is the *least expensive* way.

This point should be driven home to every politician in the country. It should also be shared with every person with whom you come in contact. Your patients may not be state or federal legislators, but they can create a general consensus that will eventually penetrate the halls of Capitol buildings.

Remind your patients that chiropractic is not only the best way to health and wellness, but also reduces overall health care costs. Unlike the other players in the health care arena, the broad implementation of chiropractic (and the chiropractic philosophy) can have a major impact in reducing our nation's annual health care bill.

References

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2. Keeney BJ, Fulton-Kehoe D, Turner JA, Wickizer TM, Chan KC, Franklin GM. Early predictors of lumbar spine surgery after occupational back injury: results from a prospective study of workers in Washington state. *Spine*, 2012 Dec. 12 (epub ahead of print).

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