

Divided We Stand

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The presence of a persistent and troublesome lack of professional unity is one of the very few things all chiropractors are in complete agreement on. While some try to put a positive spin on the issue by calling it diversity, the fact is we are deeply divided. If chiropractic survives as a stand alone profession, it will not be a profession which embraces both ends of the philosophy spectrum. Whether purposeful or co-incidental, the juxtaposition of commentaries by Drs. Ford and Morgan in the September, '05 issue of JCCA nicely describes this polarization. Both contributors make recommendations for our survival. Essentially these commentaries beg the question: should chiropractic abandon the original theories of D.D. Palmer in favour of an evidence based approach, or should adherence to

DD's philosophies be mandatory for entitlement to claim that one is a chiropractor?

Dr. Morgan makes two recommendations to increase the profile of chiropractic in the health care picture. First, he advises that we cut our ties with CAM. He clearly demonstrates the difficulties we have caused for our profession by jumping on the CAM bandwagon. I remember how excited many of us were 6 years ago when a U.S. study revealed that Americans made 363 million visits annually to their medical doctors, but more than 600 million visits were made to CAM practitioners. Through the use of some rather creative logic, this was proof that chiropractic had arrived. Some believed this to be a confirmation that people had finally tired of the allopathic approach to health care and were demanding better access to chiropractic. We ignored that chiropractic was not the recipient of the bulk of this attention, but merely a bit player. As Dr. Morgan points out, during this boom in the use of CAM, the use of chiropractic actually decreased relatively. Also ignored is that while people may well have become frustrated with the medical system and while they were now willing to experiment with aroma therapy, herbal medicine and spiritual healing, they did not abandon standard medical care. In fact, if we look at the situation in Ontario, hospital emergency departments are swamped and there is a reported under supply of family doctors. Whether this shortage of GP's is real or imagined is fodder for another article. What is abundantly clear is that people are not forsaking their family doctors and running in hordes to chiropractic clinics. As Dr. Morgan concludes, chiropractic has not derived any benefit through an association with CAM. If the issue is one of identity, aligning ourselves with CAM only made the picture less clear. Often chiropractic is not asked to participate in CAM seminars and conferences because we are considered mainstream. One exception that I can report is a hearing held in 1999 by then Reform health critic Dr. Grant Hill. The ruling Liberals were strongly considering legislation which would severely restrict access to nutritional supplements and other natural health products. We were asked to participate in the debate. I attended this hearing as president of the Canadian Chiropractic Association. Although we were there by invitation, it was clear from the beginning that this was not a venue

to further the cause of chiropractic. In fact, a number of the participants, including manufacturers of various supplements and one MP, asked why a chiropractor would want to participate in a debate on CAM. On the flip side, you can be certain that our self imposed alignment with CAM has not furthered efforts to raise the profile of chiropractic as part of the mainstream health care team. Dr. Morgan's second recommendation is far more pertinent. He states that for chiropractic to flourish, we must give up the rule of the nerve. We must abandon the notion that subluxations disrupt the nervous system and hamper the flow of innate.

In contrast, Dr. Ford suggests that we should embrace this rule, that the true essence of chiropractic is to "assist internal regulatory mechanisms via the autonomic nervous system." Referring to the Oxford medical dictionary, he paraphrases that the essence of chiropractic is "manipulation of the vertebral column with intent to improve health via the nervous system." Without a doubt, this is our history. This rule of the nerve was the basic principle which inspired D.D. Palmer and launched the profession. Dr. Ford decries the role of chiropractors as NMS specialists as it "detracts from our training as doctors of manual medicine." He supposes that "relief of musculoskeletal pain will always be a part of what we offer." In my experience, those who support DD's principles and oppose any reference to chiropractic as a tool to reduce back pain ignore the huge impact proper spinal function can have on our patients, without relying so heavily on DD. Someone who's spine and its network of supportive muscles are functioning at optimum levels through chiropractic management will of course feel better. He or she will also be more productive at work and at play. They will enjoy the golden years free of many of the degenerative conditions which severely limit their aging friends who have largely ignored their spines. Having been in practice for nearly 30 years, I have watched as hundreds of my long term patients have moved gracefully through their post-retirement years able to fully enjoy life. I have done this without paying any attention to the flow of innate.

In support of the nerve rule, Dr. Ford submits several examples of work done by medical specialists to support the validity of our ancient history. He quotes a news release based on the work of Dr. Kigler, a pediatrician in New York. Dr. Kigler recommends manipulation for children with repeated ear infections. Of note, it is osteopathic manipulation which is recommended. I don't recall that osteopaths are particularly concerned with innate. Also of note, this example points to the loss of mechanical function of the Eustachian tube and not interference with innate as contributory to the problem. I'm certain there are many more case histories and numerous anecdotal

reports which further support the nerve rule. However, one must ask if the nerve rule is irrefutable, why is hard evidence of it so evasive? I'm reminded of a comment recently made by someone who asked "now that everyone owns a video camera, why is there no new footage of UFO's in action?"

In an attempt to support the historic definition of chiropractic, Dr. Ford points to dentistry. He describes the essence of dentistry as "cavity filling and tooth extraction." The fact is that dental hygiene and the use of fluoride have nearly eliminated dental cavities for younger generations. Dentistry has indeed seen the writing on the wall and in an effort to maintain a place in the health care picture has altered its essence. My dentist tells me he is in the smile business and this is certainly in line with current dental public education programs. Dentistry has adapted.

In my experience, those who embrace DD's original philosophies and Stephenson's 33 principles do not have a mind to move away from this position to save chiropractic. Any description of chiropractic which is not based on these principles is seen as being incongruent with the philosophy and integrity of chiropractic. By contrast, those who seek a more integrated and evidence based model of chiropractic will never accept a definition which is based on the theory that the essence of chiropractic is to restore the flow of innate. The evidence based chiropractors do not seem hogtied by their belief system. They are able to accept that healing often happens at a level which cannot be explained by current data and they are able to adapt to new information. Attempts to bring these groups together while maintaining diversity have resulted in tools such as the ACC definition of subluxation. This definition, in attempting to satisfy both factions and offend no-one becomes almost meaningless and does not bode well for lasting unity.

Certainly there is a middle ground, an area where most chiropractors can very effectively and comfortably practice. However, it is not this silent majority which is energizing the battle. I sense that discussions about the future of chiropractic will centre less on how best to integrate all models into the brotherhood and more on which group deserves the right to maintain use of the title "chiropractor." I do not recommend that we sterilize chiropractic to appease the medical monopoly. Rather, I see a very bright future in following the dental model. Heeding a change in public perception and a change in the nature of services required, they have maintained their position as the tooth doctors. Time will tell if we can do the same and finally assume our rightful roll as the spine doctors. In nature, it is not the largest, the fastest or the strongest species which survives. It is the species which is best able to adapt. Can we adapt to the many changes occurring all around us, or will we remain firmly rooted in the distant past? Can we survive?