

**TO DOWNSIZE OR EXPAND CHIROPRACTIC: THAT IS THE QUESTION!**

"IF THE GLOVES DON'T FIT

DON'T WEAR 'EM"

The Office of Alternative Medicine (OAM) of the National Institute of Health, the Institute of Medicine (IOM), and certain leaders of the movement to integrate alternative health care practitioners into allopathically dominated mainstream medicine are weaving a new set of gloves for health care. I have inspected those gloves. They do not fit the potential scope of practice I see for our profession in an expanding market for alternative health care. I will detail and analyze this and the related historical, social and legal issues of the alternative health care marketplace in this series of articles.

Why is chiropractic being downsized, and downsizing itself, in an expanding market for alternative health care services? As Lee Iacocca would say: it is time to lead, follow or get out of the way.

Lead What?	The alternative health care field.
Follow How?	By articulately and aggressively participating in the emerging definition of the alternative health care field.
Get Out of the Way!	That seems to be what some of our leaders think we ought to do. I will be looking at this issue throughout this series and proposing an alternative course of action.

Reasonable minds can differ as to how to best avoid being pushed out of the way. I will devote the first three articles to addressing suggestions which have been made in recent months by the Association of Chiropractic Colleges (ACC) and certain college presidents. I will address the following points made by three of the college presidents:

Dr. Reed Phillips, President of LACC (Dynamic Chiropractor, July 1, 1996): We need to primarily focus our attention on the wellness paradigm rather than attempting to become Primary Care Physicians within the definition of the IOM. (Compare ACC release dated July, 1996. At least one author has argued that wellness is primarily a self-help movement with very little, if any, room for paid physician involvement.1/)

Dr. Jean Moss: President of CMCC (Dynamic Chiropractor, January 1, 1997): Dr. Moss reiterated the value of the wellness paradigm. However, she emphasized the need to fully educate students as to the value of chiropractic musculoskeletal practices and the need to market our services to groups in the general community who could derive substantial benefit from musculoskeletal care but have not previously recognized its worth. (Such as the geriatric and aids populations).

Dr. James f. Winterstein, President of NCC, in a recent issue of the "Journal of Chiropractic Humanities" 2/ made two points which I will address.

1. Chiropractic "metaphysics" ("philosophy") is quasi-religious and should be discarded.  
(I will devote the whole next article, and parts of subsequent articles, to this point.) and
2. He opined: "When we say, for example, that we are an alternative to allopathic medicine, people simply do not believe us". Granted, fifty or eighty years ago we were often a legitimate alternative but today the expectations are so much higher that most people simply scoff at this notion and our credibility goes down the drain. . . ."

WE ARE AN ALTERNATIVE TO ALLOPATHIC MEDICINE BECAUSE WE HAVE A DIFFERENT VISION OF HEALTH CARE; not because of the particular treatment modalities we use. WE BELIEVE IN WORKING WITH NATURE, NOT AGAINST IT.

All alternative systems of medical practice share a belief that there is a vital force (Intelligence-energy/information, etc.) which is the organizing principle of life and that this vital force is a primary healing factor. Further, each alternative system of medicine believes that it is the task of the doctor to facilitate the processes of the vital force. Although we are not listed by the National Institute of Health as an alternative health care system we should have been. We should be leading the alternative care movement. The rationale, the public relations aspects and legal justification for this position will be spelled out in this series of articles.

Dr. Winterstein also argued that "the Association of Chiropractic Colleges" (ACC) should take a "strong lead" in formulating the image of chiropractic to be presented to the public in the coming century.

It is inevitable that the colleges will "lead" the direction your practice will take in the future. In fact, California law goes so far as to define scope of practice by utilizing the expression "chiropractic as taught in chiropractic schools or colleges." The perspective of the ACC and the college presidents is far too serious for your neutrality. It deserves our full consideration, reasoned analysis and response. I will specifically respond to the opinions of Drs. Winterstein, Phillips and Moore in the second and third articles in this series. Suffice it to say for the present - I respectfully dissent.

One introductory point relative to the legal aspects of the position of chiropractic in the health care system (especially, the alternative care portion of it) is appropriate here. This publication's "Chiropractic Champion of the Year", Senator Tom Harkin, has pointed the way. He said (Dynamic Chiropractor, December 16, 1996):

"Demand answers. Amid all the talk about ending discrimination and promoting fairness in America, why are we still sanctioning discrimination against chiropractors in this country?"

Exactly! But how do we stop this discrimination? We will address the point intermittently throughout this series of articles and more particularly when I spell out an action plan for chiropractic in the next century.

## DIVIDE AND CONQUER BY SPECIALIZATION 3/

Mr. Lisa, in his book "The Assault on Medical Freedom", pointed out that the "National Health Fraud Conference" has, since the late 1980's, changed its strategy in fighting against the so-called "quacks". Their new strategy is to "Divide and Conquer by Specialization." The victory in the Wilkes case had a lot to do with this.

It appears that the National Institute of Health, Office of Alternative Medicine, has acted precisely in accordance with this new strategy. In "A Report to the National Institute of Health on Alternative Medical Systems and Practices in the United States" (almost 400 pages-first available in 1993) the alternative medical field was divided into seven major categories as follows:

1. Mind-body Interventions;
2. Bioelectromagnetics Applications in Medicine;
3. Alternative Systems of Medical Practice;
4. Manual Healing Methods;
5. Pharmacological and Biological Treatments;
6. Herbal Medicine; and
7. Diet and Nutrition in the Prevention and Treatment of Chronic Disease.

The NIH further sub-divided each category as will be more fully developed and addressed in subsequent articles. Where do you think chiropractic is placed? it is located next to massage therapy as one of the "Manual Healing Methods". Chiropractic received 18 lines in the Executive Summary of the "Report" and massage therapy 26. I trust you are duly irate. But at whom? Does the chiropractic community share part of the blame? Perhaps so! I will return to this point in a moment. First, I will itemize the "Alternative Systems of Medical Practice" delineated in the "Report" to the NIH:

1. Traditional oriental Medicine;
2. Acupuncture;
3. Ayurveda;
4. Homeopathic Medicine;
5. Anthroposcopically Extended Medicine;
6. Environmental Medicine;
7. Naturopathic Medicine.

I am personally convinced that although there are some good reasons for initially dividing up the field in order to study it, the foregoing divisions reflect a desire to limit the influence of chiropractic, or any other single group. However, as previously intimated, the chiropractic community must bear its share of the blame.

The previously cited "Report" to the NIH was produced by a total of 195 panel members and non-panel authors. Part of the participation was as follows:

Chiropractors	2
Acupuncturists	9
Naturopaths	11

An additional 221 persons participated in what was called an "Unconventional Medical Practices Workshop". The participation by chiropractors, acupuncturists and naturopaths in that event was as follows:

Chiropractors	3
Acupuncturists	7
Naturopaths	5

Based upon figures from the "Report" itself, there were approximately 45,000 chiropractors, 6,500 acupuncturists and 1000 naturopaths licensed in the United States at the time the report was written. This means that approximately:

1 in 22,500 chiropractors,  
1 in 725 acupuncturists, and  
1 in 90 naturopaths

participated as a panel member or author of the "Report". Where were our College Presidents and "Association" etc. leaders? More importantly, where were you and I?

It is imperative that every chiropractor take an active role in defining his own future and that of the whole field of alternative health care. Obviously, this cannot be done in a vacuum. The "Report" to the NIH is of crucial concern; as is the implementation of that "Report". Each of us must thoroughly understand what has, and is, being done at the level of the NIH and otherwise in the field of alternative medicine. I will be laying out these matters for your consideration in this series of article.

Chiropractors must, as suggested by Senator Harkin, demand a level playing field. Of equal importance, they must act to preserve the rights of patients to choose the kind of health care they desire. In this regard, I highly recommend you reconsider the article "The Patient's Role in Managed Care" by Dr. Arnold Cianciulli which appeared in the Oct. 7, 1996 issue of the Dynamic Chiropractor. The potential for interference with your practice rights at both the state and federal governmental levels is apparent. There is, however, an additional and more subtle external threat to your future practice rights. That is, the so-called "integration of alternative medicine into managed care" movement". I will deal with this matter in some depth and will direct my attention primarily to the work of such persons as Larry Dossey, MD.

Dr. Dossey has written several great books and is the Executive Editor of "ALTERNATIVE THERAPIES in Health and Medicine". He was also one of eleven members of the "Editorial Review Board" for the "Report" to the NIH. He is a powerful spokesperson in the alternative care movement. Dr. Dossey and certain other leaders of the alternative health care movement strike me as believing that all practitioners, except allopaths, are technicians and should be integrated into mainstream medicine under the direction and control of what Dr. Dossey refers to on occasion as practitioners of "scientific medicine".

I would prefer to address the external threats to the chiropractic profession in my first couple of follow-up articles. However, the issues of whether chiropractic philosophy should be discarded and whether our practice rights should be limited to wellness and/or musculoskeletal problems (to the

exclusion of primary care) are presently on the table. I will, therefore, address these issues in the first two follow-up articles.

"IF THE GLOVES DON'T FIT  
CHANGE 'EM"

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- 1/ Nelson, CF. Chiropractic and Wellness Care, Journal of Chiropractic Humanities, Vol. 4 No.1, 3-19.
  - 2/ Winterstein JF. The Search for Intra-Professional harmony, Journal of Chiropractic Humanities, Vol. 6 No.1, 2-10.
  - 3/ Lisa, PJ, The Assault on Medical Freedom, Hampton Roads Publish. Co., Inc. 1994; 152.
  - 4/ One acupuncturist was also a DC but has been counted in the acupuncture column in that he appears to have participated primarily in that capacity. In addition, if the same persons participated in two panels etc., they were counted twice. It is interesting to note that 4 attorneys participated in this process.