Autonomy, Dominance, and the Patient’s Interest

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Chiropractic today is faced with the most serious threat to its professional autonomy that has existed in its 100 year history. At issue is professional dominance whereby an occupation loses control over its work activities.

In an attempt to gain control of a small minority of marginal unscientific practitioners who practice outside logical and rational standards, some chiropractors in Canada are attempting to seductively and subtly place chiropractic in a position in the health care system under medical domination. The seduction is the designation specialist, the means of control, and practice by referral only.

The limited scope of chiropractic practice has been influenced historically by the medical profession. The current move to place chiropractic practice under medical domination worldwide is being promoted by chiropractors within the chiropractic profession, aided, abetted, and spurred on by some who consider themselves friends of chiropractors. In whose interest do they serve? The patient who seeks chiropractic care? The practitioner who delivers this care, or a group that considers medical approval more important than helping patients? The issue is access to health care delivery through specialization, not technical sophistication or occupational segmentation.

In Canada, hospital training through a fellowship program has created a paramedical model for chiropractic dominated by medicine. A limited group of this fellowship has labeled itself the primary scientific body within chiropractic and attempted to position itself to determine political policy and control of what is taught as chiropractic science. Have they become a self-anointed thought police without the opportunity for open debate provided by existing forums such as the chiropractic educator’s annual meeting, the annual Conference on Chiropractic Education and Research, or the International Conference on Spinal Manipulation? The skills and techniques that separate chiropractic from medicine are being claimed by others through membership in the Orthopractic Manipulation Society International, a society that has limited chiropractic membership, encouraging those chiropractors that are politically useful to the establishment of medical dominance. We are told that chiropractors will benefit more patients (and our practices will grow) if we become specialists in spinal manipulation for the treatment of "mechanical" back pain.
What makes medical doctors more competent to diagnose "mechanical" back pain especially those who deny the existence of the lesion that chiropractors have been treating for 100 years (the subluxation)? Can mechanical back pain be seen on radiographs? How do they plan to diagnose mechanical back pain when they lack the palpatory skills necessary to make this distinction? Or is mechanical back pain a diagnosis of exclusion. With a greater than 30 percent chance that patients with back pain have more than one condition, how many will be denied care that is beneficial? Given the figure that chiropractors already treat 30 percent of the patients with back pain and the longstanding bias against chiropractors by medicine, patients don’t appear to have much to gain from a profession practicing only on medical referral. What of those who have conditions other than back pain which have long been treated successfully by chiropractors?

Will chiropractic care be safer for the patient if medical referral is necessary for access? Comparison of medical malpractice rates compared to those of chiropractors does not indicate that chiropractors seriously lack skill in differential diagnosis, the reason given for chiropractic to be practiced on a referral basis. The denial of the patient’s right to be x-rayed to rule out contraindications to manipulation by chiropractors through membership in the orthopractic society cannot be construed to be in the best interest of the patient. Why then is anyone practicing outside the narrowly defined orthopedic model labeled incompetent at best, or as deviant and quacks at worst?

Orthopractic is an attempt to limit practitioners of manipulation to specific medically acceptable conditions that orthopractic has determined as having "scientifically proven" benefits. And where has all the funding gone? Reductionist medicine has defined the role of chiropractic in the health care system as providers of manipulation for the treatment of mechanical back pain. What will happen to traditional patient centered chiropractic care that is compatible with the values and perspectives of the public that seeks help from chiropractors for more than one body part or at most a system (musculoskeletal). "Neuro" must go, don’t you know.

The issue is how can chiropractic maintain control of the substance of its own work if it is on a referral basis only? A consulting profession such as chiropractic does solve the practical problems of patients far beyond the treatment of back pain. Will patients be denied the benefit of chiropractic care beyond manipulation of mechanical back pain sent by referral? A small group of reactionaries shouldn’t be allowed to denigrate a profession under the guise of improving patient care. Fortunately many medical practitioners respect the autonomy and competency of chiropractors working with them in the patient’s interest.