Chiropractic Philosophy for the 21st Century

By Stephen R. Seater

Recently a chiropractor friend asked what it was about chiropractic that I liked best. I replied that it was the fact that chiropractic had a philosophy at its core. It follows certain beliefs which have come down to us from its founder, D.D. Palmer. Today there are actually a number of competing philosophies within chiropractic, similar in many respects, but also quite different in others. I am particularly drawn to the view of chiropractic as promulgated by Dr. Reed Phillips and associates in which they define the contemporary view of chiropractic at the Los Angeles College of Chiropractic (LACC). According to Dr. Phillips, et. al., it consists of "distinct philosophies of vitalism, holism, naturalism, therapeutic conservatism, critical rationalism, and the experimental philosophies."

The LACC statement establishes a clear role for chiropractic in the 21st century which is defined as follows: "Doctors of chiropractic are primary care providers focused on health rather than disease alone. Chiropractors are used extensively in the care of functional pathology of the neuromusculoskeletal system and for wellness care. This involves a whole range of activities aimed at overall health of the individual as well as assisting in alleviating the specific problem presented." In other words, chiropractors should be the wellness doctors of the next century.

On the other hand, medicine, as I understand it to be practiced by the medical industrial complex, lacks anything like chiropractic’s approach to health care. As Andrew Weil, MD, has said, "I find allopathic medicine glaringly deficient in theory and philosophy of any sort." Allopathic physicians frequently define health as the absence of disease and lack a clear theory of what really constitutes disease. Although some MDs, usually of a holistic persuasion such as Dr. Weil, differ from standard allopathy, it is clear that the medicine practiced within the medical industrial complex is devoid of any unified theory. Dr. Weil characterizes allopathy as "a vast and cumbersome body of data concerning the identification of specific, physical agents of disease and the use of particular treatments directed against those agents. Medical school curriculums are notoriously unwieldy and inefficient because they have to expose students to endless facts and details."
Medicine largely follows a Cartesian/Newtonian approach to health in contrast to chiropractic which emphasizes holism. The mind and the body are interrelated in the holistic approach to health. The focus of the medical industrial complex is on disease and the body is reduced to its components. The ill receive massive drug therapy largely to suppress symptoms or they are sent to surgery to have some worn out part excised and perhaps replaced with an artificial limb, heart, etc. Allopaths mostly wage war on maladies after they have manifested themselves and against agents that transmit them, which they usually identify wrongly as final causes.

Because standard allopathic medicine lacks any focus on the whole person or on prevention, it has concentrated on developing a whole array of very effective emergency procedures. These interventions save many lives, but they are also the root cause of an enormous amount of iatrogenic disease. Allopaths have a strong propensity to treat most of their patients with heroic measures rather than conservative ones. There is also the tendency to rely heavily on testing procedures that are not as reliable as the public may think, some examples include pancreatic cancer screening, hemocult, mammography, and prostate specific antigen, to mention a few. False positives frequently occur and often lead to considerable discomfort and hardship for patients. Even worse however is the likelihood of being given strong drugs, complete with side effects, when they are not really needed. In a recent article on wellness care, C.F. Nelson discusses the relationship between cholesterol and heart disease and points out that little evidence exists to support the use of low fat diets and cholesterol lowering drugs as a means of prolonging one’s life. He cites studies which show that the "benefits of cholesterol lowering turned out to be modest, or nonexistent, or there was an actual increase in overall mortality rates in patients taking some cholesterol lowering drugs." Even so, a whole cholesterol lowering enterprise has developed and you can be certain that most allopaths will prescribe drugs, some of which may be dangerous, or very low fat diets for their patients with higher than normal cholesterol.

How different all this is from the therapeutic conservatism that the LACC statement speaks of. Chiropractic typically advances natural remedies where appropriate while at the same time emphasizing the body’s ability to heal itself and restore homeostasis. Chiropractic has a true philosophy of health based on the "conception of the practitioner as a facilitator in the healing process wherein the true locus of health is the patient." Chiropractic’s philosophy of health has led to the powerful potential for doctor-patient relationships in effective treatment as discussed by Robert LeKane some years ago and corroborated by J.L. Coulehan who believes that the chiropractic clinical art contributes greatly to the healing process.
I believe that chiropractic has a very bright future because of its approach to patient health. Surveys show clearly that Americans are increasingly seeking conservative holistic treatments before resorting to powerful pharmaceuticals and invasive procedures. Chiropractic not only provides natural therapies for the patient, but because chiropractors are physicians and have diagnostic competence, the chiropractic profession has enormous potential to enhance its stature and provide more care to the public in the years immediately ahead.

One of the major keys to success is scientific research. Chiropractic must embrace critical rationalism as it relates to science as discussed in the LACC statement on contemporary philosophy and which says: "Within the health disciplines including chiropractic, critical rationalism implies that the methods of science are applicable to the area of health and that the associated biological and social sciences provide the knowledge base for clinical practice."

Scientific research has already helped chiropractic immensely. If you don’t think so just stop for a moment and ponder the significance of the recent AHCPR guidelines, Acute Low Back Problems in Adults. This document establishes and legitimizes spinal manipulation as a conservative method of treating back pain. Since 94 percent of all manipulation in the U.S. is provided by chiropractors, this is widely being interpreted as a major victory for chiropractic. However this would never have been possible had it not been for the research done on spinal manipulative procedures, much of it funded by the Foundation for Chiropractic Education and Research (FCER).

Much more research needs to be undertaken. FCER is currently focusing its efforts on discovering the effectiveness of manipulation on numerous somatovisceral conditions such as primary dysmenorrhea, childhood asthma, infantile colic, primary hypertension, and otitis media. While this a good start, a much greater variety of research needs to be funded. As W.A. Nelson has said many times, chemical and emotional factors are just as much a part of chiropractic as are mechanical factors. "The bone out of place is too simplistic today and it is not true. We are faced with a formidable challenge to restore homeostasis in an organism in disarray. Manipulating a few vertebra mechanically while ignoring muscle tone, nutrition, and emotion is fraught with potential disaster." I firmly believe that at some point it will be necessary to scientifically evaluate chiropractic management of the entire person.

This brings me to the assertion made by some chiropractors that healthy people will benefit from frequent or maintenance adjustments. So far, there is no real evidence that spinal adjustments are preventive in nature,
although there are some data which demonstrate that adjustments produce small T-cell bursts and increase endorphin levels. These observations may or may not be clinically significant. Nevertheless, chiropractic maintenance care must eventually be subjected to scientific scrutiny if members of the profession are to continue promoting it.

And what of manipulation under anesthesia? This procedure is growing in popularity in many parts of the country. Aside from some outdated osteopathic research, there is precious little data to support its use. FCER will soon begin a study to evaluate the effectiveness of this technique.

Reports have come to us at FCER about chiropractic treatments that elicit emotional releases from patients. Some critics have derided such claims as "driving out demons," and "pure hogwash." However, recent statements by Candace Pert, PhD, a world renowned neuroscientist and co-discoverer of neuropeptides, with more than 250 publications to her credit, may indicate that we ought to reconsider this. Dr. Pert says that trauma is a profound sensory overload that the brain may not be capable of assimilating at once. Instead, it may be shunted to the deep subconscious mind. She further theorizes that at least some old patterns of emotions may be stored in other parts of the nervous system. The touch therapies (chiropractic included) may perturb these patterns by activating areas in the body causing the relaxation response and instigating the flow of endorphins and other neuropeptides. This mechanism may account for patients remembering strongly emotional events during treatment.

Everything chiropractors do in the course of caring for their patients must eventually be evaluated scientifically. A decade or so ago, the public wasn’t demanding that everything their health care providers did should be validated via research. Today, not only the public, but the payers of health care are demanding this. I believe that in a few years procedures which lack any supporting data will no longer be reimbursed. It’s a trend that will most likely accelerate. So if chiropractic is to thrive, it must embrace research as one of the keys to its salvation and find ways to finance it.

References


Coulehan JC. Chiropractic and the clinical art. Social Science Medicine.

Monk and Green. Interview with Candace Pert, PhD. Massage Therapy Journal, Vol. 33, #4.


Nelson WA. Chiropractic Technique, Vol. 6, #3.


Stephen Seater, CAE
Executive Director
Foundation for Chiropractic Education and Research

Click here for more information about Stephen R. Seater.

Page printed from: