



CHIROPRACTIC: MYTHS AND MISCONCEPTIONS

BY WAYNE FUSCO, D.C.

Modern chiropractic care began in 1895, however evidence of “bone setting” performed by the Chinese dates back to 2700 B.C. and was also practiced by Hippocrates, the father of modern medicine. Despite successful, sustained growth in utilization and popularity of the profession, there remains large numbers of new patients to The Cox Chiropractic Clinic who have never seen a chiropractor before. Most have been referred by a friend or family member who has had great results and urges them to “give chiropractic a try”.

The purpose of this newsletter is to address many of the myths and misconceptions surrounding chiropractic healthcare. Armed with scientific research and knowledge, one is able to make rational decisions about whether chiropractic care is right for them. By clarifying these issues, our patients are also better able to support and defend their decision to choose chiropractic care.

Myth #1: “I Don’t Believe in Chiropractic.”

For several years, chiropractors treated patients with wonderful results, but with little research to support their methods. Because of this lack of research, and because chiropractic treatment is different than medical care, one was left to “believe” or “not believe”. Often, those who decided not to “believe” labeled chiropractors as “quacks”, subsequently cementing a label which has continued in some people today. However, over the last 15 years, there has been a wealth of research; providing evidence as to the effectiveness and necessity for chiropractic care, and establishing its place in our healthcare system. By evaluating this research, one will find that “belief” in chiropractic care is no longer required. For example:

A. 1991: The Rand Study⁽¹⁾— An exhaustive study of chiropractic was conducted by the

RAND Corporation, an internationally recognized non-profit organization. They found chiropractic manipulation to be an effective and appropriate treatment for back disorders and discovered that patients treated by chiropractors improved significantly faster than those treated by traditional medical care.

B. 1994: U.S. Government’s Agency for Health Care Policy and Research (AHCPR)⁽²⁾— The U.S. government commissioned a 5-year study, reviewing nearly 4,000 scientific studies to assess various methods of treating low-back pain. The 23-member panel developed new clinical guidelines designating spinal manipulation by chiropractors as a first line of treatment for low back problems, citing chiropractic’s effectiveness in reducing pain and speeding recovery.

C. 1998: U.S. Government (AHCPR)⁽³⁾— The AHCPR presented a 100-page report highlighting the valuable role of chiropractic care. The report indicated that “today the scope of chiropractic research now parallels that of medical research”.

D. 1993 Canadian Government⁽⁴⁾— The Canadian government also commissioned a study to assess the effectiveness of chiropractic care. Led by Pran Manga, Ph.D., this study concluded that spinal manipulation by chiropractors is shown to be more effective than other treatments for lower back pain.

Myth #2: “Chiropractors Are Not Real Doctors.”

Chiropractors today require a minimum of 7 years of school and must pass 4 national board examinations before applying for a state license. Before entering chiropractic school, most will have an undergraduate degree, and they will earn another bachelors degree after just two years into the program. At the end of 4 years of classes and over one year treating patients, students graduate with a doctoral degree of chiropractic (D.C.). A review of 18 chiropractic colleges and 22

medical schools found that chiropractic doctors actually receive more basic science training than primary care medical doctors⁽⁵⁾. Total minimum hours are 2,419 for chiropractic doctors, and 2,047 for medical doctors (M.D.s). Doctors of medicine receive significantly more hours on subjects such as Pathology and Psychology, whereas doctors of chiropractic receive more training in Orthopedics and X-ray diagnosis. Chiropractors require more training in the performance and skill of their treatment, while primary care physicians will be much more proficient in the knowledge of prescription drugs and minor surgery.

Myth #3: “Chiropractic Care Costs Too Much”.

Treatment costs have consistently proven to be lower for chiropractic care than medical care. A study of 1.7 million people in 2003 found that patients with chiropractic coverage experienced 12% lower overall costs than those without chiropractic coverage⁽⁶⁾. Low-back pain patients experienced 28% lower costs. A review of more than 43,000 injured workers claims in North Carolina found that the cost of treatment averaged almost \$2,900 less if the worker was treated by a chiropractor (\$3,519 for M.D. vs. \$663 for D.C.)⁽⁷⁾. The rate of expensive spinal surgery was much less for those treated by a chiropractor as well; finding a reduction of 49.4% for neck injuries and 32.1% for low-back injuries. Across the board, chiropractic care has been found to be less expensive, require less advanced imaging, less impatient visits, and less surgery.

Myth #4: “I Tried Chiropractic... It Didn’t Work.”

Not everyone will respond favorably to chiropractic treatment. The good news, of which many people are unaware, is that there are several different types of treatment techniques within chiropractic care. Some will ma-

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nipulate or adjust the spine, some will focus more on the muscles, some on rehabilitation. Some chiropractic doctors focus primarily on nutritional counseling, some use light force techniques, some use mechanical instruments in their treatment. The type of technique which works best depends on several factors, including the type of injury, severity of the injury, age of the patient, and location of the injury.

Someone who has tried sushi and didn't like it, doesn't usually stop eating at restaurants altogether. Someone who has not responded favorably with one chiropractor should not discount chiropractic care altogether either. Dr. Fusco and Dr. Cox perform Diversified technique and intermittent traction primarily, but are trained in several others which may be necessary for certain patients. These techniques are proven safe, orthopedic in nature, and scientifically research-based. X-rays are usually taken before treatment starts in order to fully understand the scope and cause of a problem, rule out contraindications, and assure appropriate treatment can be rendered.

Myth #5. "Once You See a Chiropractor, You Have to Keep Coming Back."

This myth is true, but not why one might think. After active care, a patient might return to our clinic for one of two reasons; either (A) they are in pain, or (B) they have recognized the true benefit of chiropractic care and they want to return.

Unfortunately, the forces which caused a patient's injury are likely to continue after treatment has been finished. Someone who developed a spinal problem related to their posture or activities at work is not likely to quit their job to protect their back. Consequently, unless the patient is actively working to prevent, adapt, or change those daily stressors, their problem is likely to return. Someone who has injured their back is 45% more likely to re-injure themselves in the future⁽⁸⁾. In our office, patients are prescribed specific exercises, designed to increase strength, stability, and flexibility in the spine. Also, our patients are encouraged to attend an informative lecture which illustrates protective measures such as proper lifting techniques and computer ergonomics. By taking an active role in their health, we find patients respond better to current treatment, have fewer reoccurrences, and require less

treatment in the future.

Secondly, why would someone want to return to a chiropractor if they are not having pain? After all, we have been taught that pain signals a problem and the absence of that pain means the problem has resolved. This view is **absolutely** not true when it comes to the spine. The majority of spinal problems are chronic and develop slowly over a period of months or years before they ever become painful. Even new injuries are typically the result of increased stress imparted into an weakened or unstable back.

Spinal injuries can be detected and corrected before they become painful, and we encourage patients who have completed active pain-relief care to address their spine proactively. Just as periodic visits to a dentist are suggested to prevent cavities, periodic visits to the chiropractor are suggested to prevent spinal injury and degeneration. We don't wait until our car overheats before we change the oil and we encourage our patients to treat their spine the same way. It is far cheaper to get the oil changed every 3 months than to replace an engine. Always keep in mind, our spines are irreplaceable.

Myth #6: "Chiropractic is Dangerous."

Patients have the right to know about the risks associated with different types of healthcare, including chiropractic. Some patients tell us that they have been warned against neck manipulations due to the risk of stroke. This warning is ill-founded, and not supported by research. In fact, the opposite has proven true. For example;

A 5-year study using statistics from the Canadian government concluded that the risk of serious complication from chiropractic treatment was only one in every 3,846,153 neck manipulations⁽⁹⁾. NCMIC, a malpractice insurance company which insures over 24,000 chiropractors, paid 61 stroke claims over a three year period of 1991-1993⁽¹⁰⁾. These 24,000 chiropractors performed an estimated 43 million neck manipulations over that period. Twenty post-manipulation strokes per year indicates a rate of less than one stroke per 2 million neck treatments. A study appearing in the Canadian Medical Association Journal puts that risk at 1 in 5.85 million⁽¹¹⁾.

In the 65-year period of 1934-1999, there are only 19 cases of death known to have occurred in the world related to chiropractors or chiropractic manipulation⁽¹²⁾. In contrast, The New England Journal of Medicine reported that compli-

cations from pain medications such as aspirin are responsible for 16,500 deaths each and every year⁽¹³⁾. Consequently, chiropractors pay, on average, \$1,200-1,800 per year for malpractice insurance, which is the lowest in healthcare and is several times lower than their medical counterparts.

Serious complications following chiropractic treatment can occur, but are extremely rare. Dr. Fusco and Dr. Cox take every precaution necessary to minimize that risk, including completion of thorough examination, x-rays, and diligent application of safe and effective treatment techniques.

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