

CHIROPRACTIC PHILOSOPHY

The Importance of a Philosophy Based Practice

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Chiropractic and its philosophy did not evolve overnight. Like all great entities, it took the devotion and fortitude of many great individuals to preserve and develop this great art. However, today some chiropractors question the validity of the principles on which chiropractic philosophy was based. Without doctors who believe in the true essence of chiropractic or its philosophy, chiropractic's identity and destiny are questionable. Chiropractic philosophy should be an inherent and essential part of every chiropractic practice. So, let's delve into chiropractic's past, present and future, and defend the importance of a philosophically based practice. In other words, let's attempt to "awaken" chiropractors who want to capture or re-capture the "big idea."

D.D. Palmer, the father of chiropractic, eloquently defined chiropractic as "...a philosophy, science and art of things natural; a system of adjusting the segments of the spinal column by hand only, for correction of the cause of dis-ease." Through this definition, chiropractic is explained in terms of "what it is, how it is done, and why. Actual chiropractic philosophy explains 'the why' of everything Chiropractic. B.J. Palmer and David Daniel Palmer believed this to be true also. Thus, "the father," "the developer," and "the educator" all had the same belief system of what chiropractic was. They believed that a strong philosophically-based foundation was vital to the integrity of chiropractic. They, as well as other pioneering chiropractors, never wavered from that belief.

During the early history of chiropractic education, most students entered chiropractic schools because they or someone in their families had gone to a chiropractor who had corrected a chronic health condition. These students were taught subjects that were chiropractically oriented. In time, many of these committed students became second, third and fourth generation chiropractors. Why? Because they saw chiropractic's wonders, and they believed in chiropractic philosophy.

During chiropractic's formative days, the majority of professors were DCs or DCs with BS degrees. However, there were a few MDs, and some DOs as well. Some early, outstanding teachers at the Palmer School of Chiropractic (PSC) were Mabel Palmer, DC; John H. Craven, BA, DC; Stephen J. Burich, BS, DC; and Arthur G. Hendricks, BA, DC. Dr. Palmer wrote *Chiropractic Anatomy* in 1918; Dr. Craven authored *A Textbook on Chiropractic Orthopedics and Hygiene and Pediatrics*; Dr. Burich authored *A Textbook of Chiropractic Chemistry*; and Dr. Hendricks co-authored *X-Ray Technique and Spinal Misalignment Interpretation*.

In the 1900's, the fight began in chiropractic known as "the straights ver-

sus the mixers." The "straights" wanted chiropractic to remain intact as the founders of chiropractic established it to be. They believed that the essence of chiropractic revolved around the correction of vertebral subluxations by hand only. The "mixers" wanted to incorporate, into their practices, new procedures. At this point, the "mixers" began lobbying, in their individual states, to pass laws allowing them to practice accordingly.

In the 1920's, 1930's, and 1940's, the Palmer family defined and dictated chiropractic's path. B.J. Palmer wrote his newsletters about chiropractic and its future from the Palmer School of Chiropractic (PSC). Chiropractic philosophy was based on the belief that the body was self-healing. The early chiropractors believed the brain controlled the energy that the body needed as it passed through the nerves to allow the body the best opportunity to express health within itself without an outside interference. This philosophical belief was practiced without question, and chiropractic grew. At this time, the Universal Chiropractors Association (UCA) was the largest chiropractic association, and it had a membership of over 5,000 members who were followers of B.J.'s philosophy. The schools that taught chiropractic were almost all privately owned, and the Palmer School of Chiropractic was the largest school in the world. By the 1940's, many state associations existed.

During the 1950's, changes began in chiropractic. Some of the chiropractic colleges began to grow and formulate their own opinions regarding chiropractic. In breaking from the traditional teachings of chiropractic taught at Palmer School, these new colleges broadened their curriculums and included subjects such as physical therapy, nutrition, and obstetrics. In time, these schools began attracting more and more students.

As chiropractic evolved into the second largest healing profession in the world, many chiropractors began to lose their sense of chiropractic philosophy. But if chiropractic was based on a belief system totally immersed in philosophy, how could this be true? Furthermore, did these DCs really ever have any chiropractic philosophy to begin with? This division between philosophically based DCs and non-philosophically based DCs caused a big dilemma in chiropractic that remains today.

With the creation of alternative chiropractic schools and new curriculum requirements, states began organizing their own associations, and national organizations began drafting ideas. States even began changing their laws to accommodate the needs of these new schools and their graduates.

Schools that continued teaching with a strictly philosophical approach to chiropractic refused to allow medically oriented subjects to be a part of

their curriculum. In fact, in order to attain licensure in certain states, the students of these unyielding schools had to secure any new, required subject hours elsewhere.

As chiropractic evolved, more chiropractors began opening their own schools. However, in addition to these new schools, more conflicting views on chiropractic, itself, surfaced as well.

When the 1970's arrived, our schools, our state boards, and our national associations wanted more change and recognition. Hence, CCE came into existence. CCE began to dictate as to what they thought chiropractic standards should be. They required all of our schools to convert from being for-profit colleges to non-profit universities. When CCE became involved with accrediting chiropractic colleges, they mandated certain classes to be taught. At this point, the only way chiropractic philosophy was taught was if the specific chiropractic college, itself, deemed it necessary in its curriculum. Thus, chiropractic schools voluntarily decided if philosophy was or wasn't important to them and their students.

According to a 1991 graduate follow-up study taken by National College of

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Chiropractic (NCC), doctors were asked to choose a practice profile that most typified an NCC graduate. Amazingly, for a chiropractic college, the results were as follows: "0% correction of spinal subluxation only; 12.5% spinal and/or extra spinal orthopedics excluding surgery and prescription drugs; 5.6% spinal orthopedics to include prescription drugs; 77.8% diagnosis and treatments of human ailments without the use of prescription drugs or surgery; 2.8% non-surgical, non-prescription orthopedics; and 1.3% correction of spinal and extra spinal subluxation only" (National College of Chiropractic 1991). According to the practice profile percentages, these graduates obviously lacked the principles on which chiropractic philosophy was based. However, despite the deficit of philosophical teachings, several respondents specified the need for a "better philosophical base" when asked to list ideas to improve NCC overall.

During chiropractic's formative years, a vertebral subluxation was corrected by an adjustment. However, today a vertebral subluxation is also known as a misalignment, and an adjustment is known as a manipulation. So, what's the big deal? These are mere words, right? Well, in the big scheme of things, this altered terminology is a big deal indeed.

Today many DCs believe that it is necessary to abolish the terminology of the past so we will gain acceptance from the medical establishment as well as insurance companies. However, if chiropractors would consistently use proper chiropractic terminology when filing insurance claims, writing reports, and so on, we would find that we, as a profession, would grow by leaps and

bounds. In time, insurance companies, federal agencies, and state and national chiropractic associations would have to accept chiropractic terminology for what it truly is. It is important to recognize that our past laws were designed not only to explain the job of the DC, but protect it as a separate and distinct health profession.

Chiropractors are known as the specialists in correcting vertebral subluxations by hand only. Although we have accepted tools that assist us in determining the location of vertebral subluxations, it is the skilled hands of the D.C. that adjust. This distinction has kept our profession strong and separate from all other health care professions. If we accept altered terminology, such as misalignment and manipulation, it "opens the door" to other professionals such as osteopaths, medical doctors, physical therapists, and so on, to do what chiropractors do.

CCE came in like a giant and continues today to push its weight around. Instead of staying on track and continuing in the direction that our forefathers intended for chiropractic to be then and now, CCE wants chiropractic's approach to health care to be more medically oriented. It is important to remember, however, that the standards of CCE are controlled by DCs and their organizations. Regrettably, we, as a profession, continue to have this debate as to what chiropractic is or isn't.

Consider what B.J. Palmer said, "All that is necessary for the anti-chiropractic and pro-medical forces of evil to win, is for enough good chiropractors to do nothing." If chiropractic and its beliefs are going to triumph, steps must be taken.

Perhaps re-organization is an answer to solving chiropractic's dilemma. Placing uniformed guidelines in all states, as well as in all chiropractic schools, would lead to a clearer understanding of what chiropractic actually is. Additionally, our schools, state associations, professional organizations, and CCE, should abide by any new structuring created. While the State Boards of Examiners presently dictate the type of subject matter acceptable for license renewal, perhaps, we should allow our schools to dictate these policies instead of the boards. However, since a lot of our schools don't teach philosophy and appropriate subject matter for DCs, this would have to be addressed as well. Finally, since some of the professors in our college lack any chiropractic knowledge, they should be required to take courses to enlighten them to this amazing art. Without question, today's students are acquiring fine educations. However, the actual courses should be taught with an emphasis on how to relate them to chiropractic. Standards must be mandated and met.

In compiling this paper, a questionnaire was sent to seven practicing doctors of chiropractic. Despite the small sample size, the DCs were selected due to their varied practice standards. The survey was designed to gain insights on topics such as philosophy, on scope and practice in chiropractic offices, on chiropractic as a profession today and in the future, and on vertebral subluxation. Excerpts from the questionnaire offer ideas and thoughts from doctors who practice chiropractic today.

In regards to chiropractic philosophy, three doctors referred to "innate intelligence" (D, E, B 2002). Doctor C ex-