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THE CHIROPRACTIC CHOICE is published by the International Chiropractors Association and is designed to keep the doctor of chiropractic informed with news useful and pertinent to the practice of chiropractic as well as provide a forum for debate and expression of opinion to encourage critical thinking and sharing of ideas. Therefore be it known that all statements of facts or opinions as expressed by authors of articles published herein are the personal opinions of the authors and may not necessarily be in agreement with ICA's published policy statements or that of the ICA Board of Directors. ICA takes no responsibility for the accuracy of information about products and services stated in paid advertisements and unless stated otherwise, does not endorse these products or services.

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Chiropractic Diagnosis: The Issue Must Be Faced

Let us first look at some definitions of DIAGNOSIS.

- **Dorland's Medical Dictionary** — "The art of distinguishing one disease from another. The determination of the nature of a case of disease."
- **Stedman's Medical Dictionary** — "The determination of the nature of disease." — Principle Diagnosis — "Found after testing and study, to be the main reason for the patient's need for healthcare services."
- **D.D. Palmer** — "Diagnosis is the recognition or determination of the nature of disease and the pathognomonic signs of each. The act of recognizing a change in organs, functions or vital phenomena, in contradiction to that found in health, deciding therefrom as to its character, is diagnosis. Chiropractic diagnosis or analysis is radically different from any other method; as much so, as adjusting causes is different from treating effects."
- **International Chiropractors Association** — "The ICA holds that it is a basic responsibility of the doctor of chiropractic to employ such diagnostic processes as are necessary in his or her professional judgment to determine the need for care and, in particular, to detect the presence, location and nature of chiropractic lesions (subluxation and attendant biomechanical, biochemical, structural and neurophysiological problems, etc.) and prepare and administer an appropriate course of care within the realm of chiropractic."

Differing approaches

From the above definitions, can you see the differing approach of medicine and chiropractic in respect to diagnosis? Medicine is interested in determining the "nature of disease." Medicine determines the "nature of the disease" in order to treat the condition, which as Stedman's definition states is "The main reason for the patient's need for healthcare." In this sense medicine is empirical. The 24th edition of Dorland's states under "empiric" "... the empirics declared that the search for the ultimate causes of phenomenon was vain, but they were active in endeavoring to discover the immediate causes. They paid particular attention to the totality of symptoms." And so too in medicine today. But do chiropractors pay attention to symptoms? Certainly we do, but we view them in a different light than does medicine.

D.D. Palmer had much to say on diagnosis, analysis and symptoms. The following quotes are from D.D. Palmer's 1910 text, *The Science, Art and Philosophy of Chiropractic*.

1. "Chiropractic diagnosis or analysis is radically different from any other method; as much so as adjusting

causes is different from treating effects." (pages 561-2)

2. "The Chiropractor depends largely upon the subjective and objective symptoms as his material to locate the cause of the ailment. Knowing the organ or part affected, he is able to locate the impingement which is the primary cause of deranged function." (page 562)
3. "The Chiropractor determines the nature of disease in a manner quite different from that of other methods. Disease, viewed from the standpoint of Chiropractic is of an entirely different nature from that accorded to it by any system of Therapeutics." (page 755)
4. "A Chiropractor's analysis is made for the purpose of locating the cause of trouble, so that he can adjust the displaced portion of the bony framework, which, by its impingement on nerves and muscles, is creating disease." (page 755)
5. "Chiropractors take symptoms into consideration in order to locate the cause thereof." (page 458)

YES, D.D. Palmer did use the word diagnosis. (see quote #1)

YES, chiropractors place *importance* on "subjective and objective symptoms." (see quote #2)

BUT, in determining the nature of disease our methods are quite different from "any system of therapeutics." (see quote #3)

Chiropractic Diagnosis/Analysis considers symptomatology in order to locate the neurogenic cause of malfunction (subluxation) that sets the stage for disease. (Quote 4 and 5)

We also monitor body function to determine the effect, or lack of effect, our care has upon the patient's physiology. Such monitoring of body function takes on a different diagnostic profile than does medicine. Medicine tries to identify the disease and then locate the vector that creates the symptoms so that they can destroy it. Therefore meticulous diagnostic identification of the enemy is *absolutely* necessary. They must prescribe something to destroy the invader and hopefully not harm the host.

We too must meticulously identify what we hold to be the enemy, the cause of the malfunction that sets the stage for dis-ease and the resultant diseases that follow. We do not attempt to destroy anything; we seek to *enhance the body's defenses!* We take symptoms into consideration to help us locate the neurogenic level of spinal involvement (specific full spine). And we also look very strongly at the upper cervical subluxation complex for the cause. We seek to identify the subluxation/subluxations.

It is of great importance in medicine to determine if the patient is suffering from viral or bacterial pneumonia, that determination is differential diagnosis.

To the chiropractor this difference is not vital to our adjustic care. The adjustment remains the same in either case, in medicine the drug approach varies as they are *treating* the disease. The differing approach to patient care between medicine and chiropractic dictates a different design and perspective in regards to diagnosis. Diagnosis itself is not the problem, it is the *WHY* of diagnosis — *why we diagnose* that separates the chiropractic from the medical approach.

Let me close with a statement I have worked on and used for well over a decade now..I have placed much "thot" into it. For those in the profession that continue to persist and to insist that we diagnose on the level of a GP in medicine I say this:

"In the final analysis, all specialty care and/or portal of entry health care practitioners rely on referrals to the medical specialties and their attendant facilities for complete and comprehensive medical diagnosis. The utility of duplicating their capacities is limited by the specialized and unique nature of chiropractic care."

Yes, we do rely on medical facilities for "complete and comprehensive medical diagnosis." In my opinion this is simply not our domain. The *differential* diagnosis of determining the vector be it viral, bacterial or rickettsial is *medicine's* responsibility. Ours is to determine if there is a causal relationship that we can address through chiropractic care. If not, it is our responsibility as first contact healthcare providers to refer. Using a term coined by Dr. David Koch "Referential" diagnosis is the realm of the chiropractor and it too is the responsibility of all first contact health care providers.

"Enuf" said.

Chair, Editorial Committee

QUEBEC *continued from page 1*

signed by 125,000 citizens of Quebec protesting the proposed legislation. Assemblee Nationale Deputies are hearing individually from concerned DCs and consumers as well.

The Association des Chiropraticiens de Quebec has undertaken a determined campaign to educate legislators on the skill levels of chiropractic practitioners, the norms of chiropractic education and practice, and the high quality, cost-effective contribution chiropractic makes to the citizens of the Province. Education has been a major part of this campaign because too many legislators do not have a good understanding of the depth and breadth of chiropractic training and have been the target of aggressive medical campaigning to limit chiropractic.

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Membership Application Page 13