

THE PIVOT REVIEW

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piv'ot (piv'ut) n. 1. a point, fixed pin, or short axis on the end of which something turns. 3. That upon or around which something turns or depends; the central, cardinal, or crucial factor, member, part, person, etc.

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Progressive Chiropractic

It always amazes me how peoples' perspectives can be so distorted that they fail to see their faults and shortcomings and instead ascribe them to others. Nowhere is it more obvious than with those chiropractors who call themselves "progressive," who want to see chiropractic evolve away from its traditional roots and are critical of the objective straight chiropractor. In their defense, I must say that they have a point with regard to the traditional B.J. chiropractors, those who see the vertebral subluxation as the cause of all disease and the adjustment as the cure-all. However, that is surely not objective/non-therapeutic straight chiropractic.

Let's look at these progressive types. There are a few chiropractors in our area who are marketing themselves as "progressive," having the newest equipment and treatment for low back problems. Basically, the modality they are promoting is a traction machine. Interestingly, you don't hear of anyone going in the hospital for traction anymore. The medical profession has virtually given up on that procedure. Is it progressive to incorporate procedures that medicine has found wanting and abandoned?

Right or wrong, chiropractic began because of the failure of medicine at the end of the 19th century. Today, most of those who want

to see chiropractic evolve are looking to incorporate medical procedures, many of which, like traction, have been abandoned by medicine. (Some, like healing with magnets, were even abandoned by D.D. more than 100 years ago!) Yet the reason for the growth of chiropractic was not because of failed procedures but because these procedures are based upon a failed system—medicine. Medical philosophy is based upon the idea that a lack of health is caused by the presence of disease(s) and its symptoms and that if you remove them, the individual will once again be healthy. While therapeutic procedures have some palliative effect, they are ineffective

In this issue...

- Non-Chiropractic Information
- Mentoring
- A Historical Perspective
- Science and Philosophy

in restoring health. And while new therapeutic methods are coming into existence all the time, they merely have the same old objective. There is nothing progressive or revolutionary about them. Those that have even limited benefit, including manipulation, are absorbed by organized medicine. With all these new measures that we are supposed to be incorporating into chiropractic to make it progressive and to evolve, the fact is the old standby, the staple of medical practice, is still the use of drugs as it has been for over 3,000 years. The “progressives” in our profession want to see us incorporate the use of drugs, to evolve into a profes-

sion that has been around for 3,000 years! If incorporating medicine into chiropractic is progressive, the most progressive thing we could have done was to never have begun a profession in the first place! Hey, maybe homo sapiens can evolve back into Cro-Magnon. Now that’s something to look forward to! We

can all sit around campfires eating root and bugs and grunting to each other to communicate. There really are different ideas of what is progress and evolution are.

Let’s look now at objective straight chiropractic. Contrary to charges, it has not been static. In fact, it has evolved more in a shorter period of time than any other approach to chiropractic. It has stayed within its species yet has changed considerably for the better which is what evolution and progress are all about. Some of these specific changes are included below.

Objective straight chiropractic has evolved from the therapeutic ap-

proach of getting sick people well to one of non-therapeutics, correcting vertebral subluxation simply because it is detrimental to all people. It has broadened the “market” of people who need our service to include everyone with a spine. At the same time, the majority of the profession has narrowed our clientele to include only those people with non-complicated low back pain. Objective straight chiropractic has been defining the profession by its unique objective, in theory eliminating the conflict with organized medicine. We have two different, non-competitive objectives. Bashing medical pro-

are not camping at the graveside of our ancestors but we are respectful of their contribution. While on the subject of respectfulness, we are willing to accept and respect every other approach to the practice of chiropractic as being legitimate and we are not interested in infringing upon anyone’s right to practice regardless of how worthless we think their approach to be. Now that’s a truly progressive attitude.

There are many factions within chiropractic. Without exception all of them but objective straight chiropractic fall into one of two categories. They are either resisting change, trying to combine chiropractic with an already existent profession, medicine, or hold tenaciously and defiantly to the model of the Palmers. Most people believe this position will lead to professional extinction which, needless to say, is not going to create progress for us and can only lead to our loss of identity, loss of our philosophy, and our unique contribution to society.

Unfortunately the latter option, professional absorption, is not progress either. Only the objective straight chiropractor has a progressive plan to evolve this profession into what it could be, what in all likelihood our Founders would like to have seen it become and one that can best serve humanity in a non-duplicative, non-competitive manner. That is truly progressive chiropractic! ▲

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cedures is not part of objective straight chiropractic. That has to be seen as progress even by those who want to be absorbed by medicine. We have also advanced the idea of innate intelligence, taking it from a pseudo-religious concept to one that is common sense and progressive, one that “progressive scientists” are actually acknowledging. We have disassociated ourselves from the one-cause, one-cure for all disease faction of the profession. That’s evolutionary (as well as revolutionary). We are advancing the philosophy but staying within the bounds of an objective that is exclusive for the correction of vertebral subluxation. We

Non-Chiropractic Information

One of the things that always seems to be a problem among chiropractors, especially those that are leaning (not there, but leaning) toward objective chiropractic, is our unwillingness to bash medicine and to get involved in tangential issues like unnecessary surgeries, drugging school children, fluoridation, vaccination and so on. There are so many issues of this nature that one could easily spend all of their time on these alone. There is no doubt that they are important issues and ones that somebody should be addressing. In fact, some have criticized objective straight chiropractors because we have a personal perspective on these issues and, in most cases have addressed them with regard to ourselves and our families, yet we are not willing to share our knowledge and information with practice members and the general public.

Traditional chiropractors share this information and most of it is good stuff, information that people need. The problem is that it is not chiropractic. Consequently, when it is

presented by a chiropractor it leads to confusion in the mind of the public. I think everyone could agree there is already enough confusion in chiropractic. It would be ideal therefore if someone other than chiropractors disseminated this information. What is more, when we present this information to people, we may unintentionally decrease the value of the information because we appear to be a group with an axe to grind with organized medicine. We appear to have no objectivity in the matter because most people are aware of the historical conflict with medicine. This leads to the second problem.

When we present anti-medical information, we position ourselves as an alternative to the practice of medicine. As long as chiropractic assumes the role of a medical alternative, it will never gain the acceptance it wants or deserves. People do not want to be forced to make a choice between chiropractic and medicine. Some people need medical care. More importantly, that is not an honest way to present chiropractic.

Alternatives have the same objectives. Chiropractic does not have a disease objective.

If this is information that people need then there should be an organization to disseminate that information. The argument could be made that there is such an organization but it is not doing its job very well. That may be true, however there are a lot of groups and organizations not doing their job, that does not mean we have to assume those roles. We have a specific and unique objective. There is enough information about chiropractic to keep us all as busy as we want to be educating people about chiropractic. There are books full of good, straight chiropractic information that people need to hear and understand. I know, I have written some of them. Teach them that information, give them an ADIO world and life viewpoint and maybe they can figure out for themselves what to do about the non-chiropractic issues.▲

Mentoring

Recently a friend of mine wrote an article in a national publication on the value of mentoring. I have great respect for this chiropractor but have some differences of opinion on the merits of mentoring. He says that young chiropractors should seek out a “seasoned, experienced” chiropractor as a mentor, that these “chiropractors are willing to serve as your mentor...” I am sure there are a few of these types of chiropractors out there but if I were a young chiropractor starting out, I would not be counting on a mentor to help me build my practice. I would like to

suggest some of the problems of any mentoring program for straight chiropractors. Let me preface these comments by saying that most of the non-therapeutic straight chiropractors that I know are very generous and helpful. Rarely do any of them ever turn down a chiropractor who calls and would like some help.

At the same time, mentoring, as my friend describes, involves holding the new chiropractor “accountable for performing the functions planned.” Most of us have learned to hold ourselves accountable, a prerequisite to success in any field. I

frankly do not have the inclination (nor the time) to hold others accountable for the things they should be doing. Practice management consultants do it but they get paid big bucks to do it and may to some degree create dependent chiropractors in the process. That’s okay with them though because it helps to insure that they will have work in the future. I am happy to give a young chiropractor some advice, some encouragement, answer questions but don’t ask me to hold your hand because that process never ends until and unless the chiropractor decides

for himself/herself to take responsibility for his/her professional life.

Another problem with mentoring in the straight community is the time factor. Consultants, for the most part, do not practice. They consult and they get paid for it. A mentoring program, done properly takes time, time that most chiropractors do not have. They are busy taking care of practice members, trying to maintain their own practice or build it to a higher level and also trying to have some semblance of a personal life. To try to meet with a young chiropractor personally or over the phone for an extended period of time on a regular basis is a tremendous task. Especially when there are so many young struggling chiropractors and relatively few mentors.

Perhaps the greatest problem lies in the nature of objective straight chiropractic itself. Many of the successful objective straight chiropractors previously practiced a different model of chiropractic. I personally was a traditional chiropractor (getting sick people well by correcting the cause of disease). Most of us who have made the transition are still in the process of figuring out how to communicate that difference. Non-

therapeutic straight chiropractic is the greatest, most rewarding, most honest, most enjoyable way to practice. However, it is not necessarily the easiest to communicate to people. Telling a person you are going to correct the cause of all their problems, the subluxation, is a lot easier than telling them you treat or cure nothing but merely enable the innate intelligence of the body to be more fully expressed. The former is not honest but

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it is easier. I (and I am sure I speak for others who would be considered mentors) am still trying to figure out the best way to get our message across to people in an honest and effective manner. We are still growing and evolving in our ability to convey our message. It may be a little early for any of us to assume the role of a mentor.

So what is the answer? There are answers and the future is not bleak. There is plenty of good information on how to practice non-thera-

peutic, objective straight chiropractic. It is in the *Blue Books* and on the internet. Books and the internet will not hold your hand and walk you through the process but they will force you to develop a practice that is uniquely you, designed by you, to fit your personality and personal goals in life. They will force you to build your practice. There are tools out there. The Foundation for the Advancement of Chiropractic Education, the publisher of this newsletter, produces many such items. There are chiropractors, myself included, who will not be your personal, hand-holding, put-the-exact-words-in-your-mouth mentor but will answer your questions, share our experiences, suggest some ideas and give

you some encouragement any time you call. Lastly, there are groups of chiropractors who are willing to meet together and share ideas. In other words, mentor each other. New practitioners have an enthusiasm that some of us old timers need. If there is not a sharing group near you, start one. If you are not physically close enough to a group of chiropractors, start one on the internet. If you can take the initiative in doing what is necessary to build a practice, you will build one.▲

A Historical Perspective

In 1895, D.D. Palmer (the son of the Discoverer of Chiropractic) noted that certain medical conditions were alleviated by moving bones. At that time there were probably hundreds of other procedures that were being performed to alleviate human ailments, none of which are around today, everything from bleeding to magnetic healing. Most of them we never heard of because they were not

noteworthy. They have passed from the scene because they did not work or if they worked they did more harm than good.

Chiropractic has lasted for almost 110 years because it obviously does something. It has more practitioners than ever before in history and millions of satisfied patients for over a century, many of whom come back on a regular basis. All of this despite

the fact that very few people understand the true objective of chiropractic. The success of chiropractic with a multitude of conditions must mean something. Anecdotal success must have some validity. Some people would ascribe chiropractic's numerous successes with varied conditions to positive thinking, coincidence, faith or some other illegitimate factor. But all the different successes with

millions of people for 100 plus years tell us that, it has to be something more than coincidence or mass hysteria. Chiropractic had to possess something in order to succeed, despite the opposition of the medical community who were convinced that no single procedure could be the cure for everything. Millions of intelligent and reasonable people including legislators and insurance companies concluded that chiropractic worked on some level.

Along came the objective straight chiropractor who presented a reason why chiropractic “works” for some people and not for others, why certain conditions are alleviated in some and not in others, why chiropractic appears to have had some

success with all kinds of medical ailments. They presented the reasonable explanation that chiropractic is not a treatment or cure for medical conditions (which makes the medical community happy). Chiropractic does one thing, it allows the body to work better, to function at a higher level, to be a little bit healthier. That is the reason for the apparent success in so many and varied conditions. A body working better has greater potential to heal all types of conditions. It is also the reason for “chiropractic

failures.” Even though chiropractic adjustments enable the body to work better sometimes that improved function is not sufficient to enable the body to heal itself. So despite working better the body cannot heal and either the patient must learn to live with a condition or seek care in the therapeutic realm.

Objective straight chiropractic further reasoned that if the body works better with adjustments in some people, enough to get well from some conditions and chiropractic is not correcting the cause of disease,

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then it must make the body work better in all people, those who do not get well, those who have no apparent problems or conditions and everyone in between. They further reasoned that a body working better because of no interference will be affected in a positive manner in other areas of human function beside disease and health. While we cannot measure quantitatively the improvement in a person under chiropractic care, the fact that varied and serious conditions have been known to disappear,

improvement must be of a significant nature and failure to keep the body free of nerve interference must be a significant factor in the loss of health or decreased ability to function in all areas of life.

This idea was so logical to chiropractors that they began to have themselves and their families adjusted for on a regular basis. They further determined that if it is good and necessary for themselves and their families (the idea of regularly checking the spine for nerve interference and removing it when found) it is good for all of humanity and perhaps there were enough people out there who would agree and want this type of care for themselves and their families. After all, there are millions of people who drink bot-

tled water, take supplements, eat nutritionally, exercise regularly, and in many other ways take care of themselves for no other reason than because their body will work better. Chiropractors concluded that if they can find enough people interested in this type of care, they cannot only make a living but they can contribute to the betterment of society. That is how this unique approach to chiropractic with its lifetime maintenance care developed. ▲

Feel free to adapt and use this article in your office.

Science and Philosophy

Why is it that chiropractic philosophers do not seem to have a fear of the scientists but the scientists seem to have a fear of the philosophers, viewing us as some kind of threat to the public? We put our ideas, our assertions and deductions out there, and wait for science to disprove them. In fact, we welcome the scrutiny of science, to have our logic put into the

cauldron of scientific experiment. The most obvious example of this is the historical change in our philosophy relative to the cause of disease. While philosophically chiropractic began as a “correction for the cause of disease,” it became clear, through scientific efforts, that there were many contributing factors or causes to all disease. Genetics, diet, mental atti-

tude, the environment, and other factors clearly contribute to disease and to ignore or reject these as factors is not only an insult to science but a poor public-relations position. So our philosophy became one that recognized the vertebral subluxation as a factor in the loss of health, a factor which is a part of the cause of disease. Albeit, it is a very important factor



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and one that should be addressed. Studies have shown that even a slight change in causative factors of disease can enable the body to heal itself. An antibiotic that kills a few bacteria, a change in mental attitude, and slight changes in dietary habits can all enable the body to heal itself a little better, enough to make a significant difference.

Our chiropractic philosophy has changed, and more than keeps up with modern scientific findings. So why is it that the scientist seems to be antagonistic toward philosophy and unwilling to accept philosophy? I think that it relates to the very nature of science and philosophy. Philosophy functions from a base of morality. One of the most important moral imperatives is to seek truth. Science, on the other hand, exists to establish facts. It functions in a moral vacuum. Maybe that is all right, maybe not. We have seen throughout his-

tory and continue to see that science does not regard issues of morality. Whether it is the experiments of the Nazis or stem cell research, issues of right and wrong are not important to the scientist.

So why the fear of the philosopher? Perhaps, in part, it is because they do not understand that the philosopher functions under a value system. It is the base of his thinking and actions. The scientist has no such system. He does not factor values or morality into his work. (Ironically, most scientists do it outside of their field of study, they just do not allow it to enter that area). He can separate any value system he might have from his work. Will we ever resolve this conflict? Not until and unless the scientist begins to adopt a philosophy, a value system and see his science in the light of that system.

Perhaps that will necessitate a change in the very nature of scientific

inquiry. He might (heaven forbid) begin with certain metaphysical assumptions. If science can not or chooses not to do this, then it can never expect to come to a knowledge of the truth and as such can not be critical of the philosopher or his metaphysical assumptions. ▲

It seems that often researchers are a tight little fraternity with their own language, procedures, and secret handshakes, a group who considers anyone doing or thinking anything outside their approach to be at best inferior, at worst unethical.