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Chiropractors, Neurosurgeons Join Forces

By Editorial Staff

When dealing with spinal disorders, chiropractic physicians are known to have the highest patient satisfaction ratings for conservative care. Neurosurgeons are also known for their thoughtful approach to spine problems and are the surgeons known to perform operative procedures with the least risk for the greatest chance of gain. The largest part of most chiropractic physicians' practices involves the care of individuals with spine and spine-related problems. Most neurosurgeons' practices are more than 75 percent spine-related - the highest percentage of any group of surgeons.

Both neurosurgeons and chiropractic physicians have a neuroscience background. It is obvious that these two disciplines should come together to become involved in cooperative spine care. Neurosurgeons and chiropractic physicians both have extensive training in spine anatomy, spine biomechanics and neuroscience related to the spine. The two health care disciplines complement each other; therefore, cooperative efforts will improve the efficiency and quality of spine care.

The American Academy of Spine Physicians (AASP) has brought chiropractic physicians and neurosurgeons together. Only neurosurgeons and chiropractic physicians are eligible to apply for membership. (Aside from academy activities, members of the AASP are encouraged to be active in their national and local professional associations.)

The value of collaboration is the benefit of cooperative spine care. This refers to two or more health care professionals working together to preserve or restore spinal integrity while prioritizing the patient's well-being. The patient with persistent or progressive pain, numbness, muscle weakness or abnormal spinal movement who is not recovering as expected may require an interdisciplinary approach with the combined expertise of chiropractic physicians and neurosurgeons. The potential patient benefits of cooperative spine care include early diagnosis and intervention, a broad range of therapeutic options, continuity of care and improved potential for patient recovery.

The AASP's Academy Council features leaders in the field of spine care. Members of the council are:

Edward Benzel, MD, neurosurgeon, Cleveland Clinic

George Dohrmann, MD, PhD, neurosurgeon, University of Chicago

David Durrant, DC, Chicago Neuroscience Institute

Barth Green, MD, neurosurgeon, director, Miami Project to Cure Paralysis

Vincent Lucido, DC, president, Foundation for Chiropractic Education and Research (FCER)

Stephen Ondra, MD, neurosurgeon, Northwestern University

John Shea, MD, neurosurgeon, Loyola University

Steven Vanni, DC, DO, neurosurgeon, University of Miami

Wayne Whalen, DC, past president, California Chiropractic Association (CCA)

Terry Yochum, DC, University of Colorado

Scientific consultants are:

Scott Haldeman, DC, MD, PhD, clinical neuroscience, University of Southern California

Manohar Panjabi, PhD, DTech, clinical biomechanics, Yale University

Continuing Education and Credentialing

The AASP provides chiropractic physicians and neurosurgeons with opportunities to become **credentialed as spine physicians**. (This is the only organization with the same credentialing process to include chiropractic physicians and neurosurgeons.) Through the efforts of the AASP, chiropractors and neurosurgeons will become better recognized as spine specialists or spine physicians. The designation "spine physician" refers to an enhanced area of practice, not a specialty with exclusion of all other areas. One of the goals of the AASP is to provide greater recognition of members while increasing public awareness about spine disorders and available conservative care.

The same continuing education (CE) programs are available for both chiropractic and neurosurgery. The online AASP continuing education programs are sponsored by Logan College of Chiropractic. Continuing education credits may be applied toward state licensure renewal credits in those states that accept online CE. (See www.spinephysicians.org for a list of states accepting online CE.) The online continuing education programs allow physicians to obtain CE credits without having to leave their practices. It can be done relative to each doctor's schedule and at each doctor's pace.

The continuing education credits received through AASP home study and online educational programs can be applied toward Diplomate status with the American Academy of Spine Physicians (DAASP) and also to Fellow status with the American College of Spine Physicians (FACSP), the highest level of postdoctoral achievement in spine care. The online continuing education programs are provided in one of three formats: online textbook review courses, case-study review courses and journal review courses. Continuing education topics in the textbook review courses include such areas as spinal biomechanics, spine anatomy, myelopathy/radiculopathy, spine trauma, and imaging of spine disorders. Courses with an emphasis on sports medicine are also now available.

The International Spine Association

The International Spine Association (ISA), with divisions representing most countries of the world, has joined with the AASP on various projects. The two organizations are committed to developing the largest single online resource of information about spine physicians (spine specialists), the spine, spinal disorders, and therapeutic options. The information will be made available in the language of each of the countries represented by the ISA.

The AASP and the ISA have also created a strategic alliance for the development of the **National Directory of Spine Physicians**, an online directory of chiropractic physicians and neurosurgeons who provide spine care (www.spinephysicians.net). The directory is provided as a public service; a free listing is available to all chiropractic physicians and neurosurgeons who provide spine care. You do not have to be an AASP member to post a listing on the directory. The directory has various levels of information about AASP members, including a full-page physician profile, a direct link to the member's Web site, and designation of those physician who hold Diplomate status with the American Academy of Spine Physicians (DAASP) and Fellow status with the American College of Spine Physicians (FACSP).

An online journal, *Journal of the American Academy of Spine Physicians (JAASP)*, is being readied for publication. A minimum of one of the authors must be a member of the AASP for a manuscript to be considered for publication.

The Future of Spine Care

The focus on spine care will increase greatly in the future. There is a growing patient interest in cooperative and conservative spine care. Some speak of an "epidemic" of spine issues in the coming decades. Rapid growth of the elderly population, due to increased longevity and the aging of baby boomers, will lead to an increased prevalence of spinal problems and related disability. Spine physicians must prepare to meet the growing demand. Members of the AASP will help to shape the future of spine care in this challenging environment.

JACA Article

The AASP's influence is growing rapidly, and the organization is being approached by various publications to provide insight, opinions and articles about spine care. In February 2003, the *Journal of the American Chiropractic Association (JACA)* published an article on interdisciplinary cooperative spine care. Dr. Durrant, a member of the AASP Academy Council, was quoted by *JACA* as saying, "It's all about providing the patient with the opportunity to be more informed about his or her condition and therapeutic options. We need to improve the quality of spine care by prioritizing the patient's needs, broadening the scope of available care and promoting professional dialogue so that conflict is less likely and therapeutic outcome is improved."

There is a benefit for chiropractors to work with neurosurgeons, and a benefit for neurosurgeons to work with chiropractic physicians. The greatest benefit is realized by the patients, who are provided with the best conservative care and the best (if needed) operative care. This is **The Chiropractor/Neurosurgeon Advantage**.

For more information:
American Academy of Spine Physicians
1795 Grandstand Place
Elgin, Illinois 60123
Tel: 847-697-4660

Fax: 847-931-7975

aasp@spinephysicians.org"> aasp@spinephysicians.org

www.spinephysicians.org

Editor's note: This article is background for a new column coming to *DC* in 2004: **The Chiropractor/Neurosurgeon Advantage.**



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