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Consumer Reports Tackles Chiropractic

"Orthopractic" Influence behind Article is Apparent

By Editorial Staff

The long awaited Consumer Reports feature article on chiropractic was published in their June 1994 issue. Their last review of chiropractic was a "major investigation in 1975." That report proved quite negative: "Consumer Reports found that chiropractors were likely to take unnecessary x-rays, perform manipulation on infants and children, propose inordinately lengthy treatment plans, and promote chiropractic treatment for serious disorders that needed medical care."

The latest report fills almost eight full pages, covering everything from philosophy to chiropractic pediatrics. While the tenor of this report was generally negative, it did contain some interesting statements:

- Back pain costs the country billions annually in medical costs and lost work time. Those staggering facts led the government to sponsor a series of research projects over the past five years to find effective methods for treating back pain. Led by a team at the University of Washington Schools of Medicine and Public Health in Seattle, the research was notable for identifying treatments that don't work, including extended bed rest, traction, and corsets, traditional approaches to acute back pain. Brief bed rest (one or two days) followed by increasingly vigorous exercise emerged as the best conservative therapy that medicine has to offer. Surgery for back pain was found to be often ineffective and appeared to be overused.
- Nonetheless, says Paul G. Shekelle, an internist who headed the project, "We now have more evidence for the use of spinal manipulation as a treatment in low-back pain than for many other medical therapies currently used."

- Known as the Manga report, for its lead author, economist Pran Manga, the report stated that chiropractic manipulation is safer, more effective, and more cost-effective than medical management of low back pain. Those sweeping conclusions were a windfall to chiropractors, who made sure the media, Congress, and the American public heard them. But many experts have since criticized the Manga report for drawing conclusions that go beyond the available data. "[Dr. Manga] looked at the exact same studies as the rest of us, and no one else has been able to come to those conclusions," says Dr. Shekelle.
- If chiropractors limited themselves to treating back pain and other musculoskeletal problems, they might win a broader measure of acceptance from medical doctors. But many chiropractors want to do more. As Louis Sportelli, a chiropractor and past chairman of the board of the ACA, explains, most people go to chiropractors initially for back and neck problems. Then, once they are in the office, "practitioners educate them about the other conditions they can treat, such as irritable bowel syndrome, dysfunctional gallbladder, functional forms of asthma and angina." Those are all problems for which standard medical tests can find no clear physical cause.
- Ron Slaughter, the founder of a small organization of chiropractors who limit their scope of practice, observes that a patient who gets relief from back pain may be impressed enough to let a chiropractor treat his hypertension as well. Compounding the problem, many chiropractors work in isolation from the larger health care community. "A chiropractor who holds himself out as an alternative to medical care is a very dangerous practitioner," Slaughter says.
- Among the most prominent is David Singer, a Clearwater, Fla., chiropractor who preaches an aggressive style of converting patients to the chiropractic way of thinking. "Only the consumer who understands nerve interference will pay cash after his symptoms are gone," he says. In a set of audio tapes called, "How to Create Lifetime Patients," he recommends that chiropractors should not tell patients the results of their initial exam or how long they'll need treatment until they've been indoctrinated into the benefits of lifelong chiropractic care. Singer also promotes the use of prepaid, unlimited care programs,

which many chiropractors frown upon. And for patients who question the need for further treatment, he advises this injection of guilt, "It is a choice that you yourself must make, depending on how important your health is."

- A 1986 report from the U.S. Department of Health and Human Services Office of the Inspector General showed that many chiropractors had been doing a fast shuffle to collect Medicare reimbursement: Of 145 chiropractors surveyed by telephone, 84 percent said that some subluxations don't show up on x-ray, but nearly half said they "could always find something" to justify the diagnosis, or actually tailored the diagnosis to obtain reimbursement. Today, only a small group of stalwarts maintain that x-rays can show them a patient's subluxations.
- And while many medical doctors are still wary of chiropractors, there are those like Paul Shekelle, the physician who headed the RAND study, who refer patients to them when warranted. Though the body of research on low-back pain supports spinal manipulation, not chiropractic per se, "a good chiropractor will give a better exam and better advice and treatment than the average internist or family physician," says Dr. Shekelle. "The general practitioner doesn't feel comfortable with back pain. He'll give the patient Tylenol and send him home to bed."

The coup of the entire article goes to the National Association for Chiropractic Medicine (NACM), which now calls itself the Orthopractic Manipulation Society (OMS), for being able to infiltrate and influence the article's author/s to run a solicitation of their fringe organization and give them credibility over 48,580 U.S. chiropractors, and 3,245 Canadian chiropractors. No mean feat. The national chiropractic organizations should have such PR!

Yes, some major wool was pulled over the eyes of the Consumer Reports author/s: The article reported:

- Ten years ago, a small group of chiropractors formed the National Association of Chiropractic Medicine and publicly renounced chiropractic philosophy. Members agree to use manipulation as an applied science, and to treat only neuromusculoskeletal conditions. In March, the NACM added the word "Orthopractic" at the end of its name to show its affiliation with the Orthopractic Manipulation Society International, a new organization made up of medical doctors, osteopaths, physical therapists

and chiropractors.

- The Orthopractic Society was formed to emphasize the scientific use of spinal manipulative therapy, and to provide a framework of principles for chiropractors wishing to abandon traditional chiropractic thought. Their "Orthopractic Guidelines" define manipulation as a therapy for joints that lack adequate mobility and range of motion, not as a treatment for subluxations. In particular, the group has repudiated many practices associated with chiropractors, such as full-spine x-rays and the use of manipulation to treat postural disorders in children, infectious diseases, and internal and metabolic disorders.
- While "orthopractic" practitioners are still only a small part of the chiropractic community, their numbers are growing. And they adhere to guidelines that anyone considering spinal manipulation would be wise to insist a practitioner follow.
- Get a referral from a reliable source. Don't just pick a name out of the Yellow Pages. The National Association for Chiropractic Medicine and the Orthopractic Manipulation Society International maintain referral lists of chiropractors (and other manual therapists, in the case of the Orthopractic Society) who agree to adhere to those organizations' principles. The NACM can be reached at 713 280-8262; the Orthopractic Society, at P.O. Box 145, Beaconsfield, Quebec, Canada H9W 5T7. At present the groups are relatively small, but expect to grow rapidly within the next year or two.

Interestingly enough, the address given is for the Orthopractic Manipulation Society of North America which is run by Dr. Murray Katz. Dr. Katz is a long-time adversary of chiropractic. His attacks on the profession include testifying against chiropractic before the New Zealand Commission. But upon cross-examination, with the help of additional evidence, the nature of Dr. Katz's credibility was revealed. The Commission concluded:

"We think the kindest thing to say is that Dr. Katz has become so emotionally involved in his self-appointed role as a 'concerned advocate of consumer rights' that over a period of some years he has allowed his enthusiasm to override his judgement, his sense of reality, and his sense of what is

proper.

"Having regard to the matters we have specifically mentioned, and to Dr. Katz's general demeanour as a witness as we observed him during the three days of his submissions and evidence, we are abundantly satisfied that it would be quite unsafe to rely on his opinions, or on any of his evidence on matters of fact which were not completely verified from an independent and reliable source."

But perhaps the most interesting statement made by the New Zealand Commission was this one:

"We would add this. Dr. Katz told us that he believed he had been instrumental in influencing the views of Mr. Joseph R. Botta, who is the executive director of the United States Consumers Union, and that the union's report on chiropractic (see chapter 21) contained in the September and October 1975 issues of its magazine had been materially influenced by Dr. Katz's views."

The Consumers Union publishes Consumer Reports. One wonders why Consumer Reports is introducing and endorsing the views and the organization of Dr. Murray Katz. At press time, "DC" asked for a telephone interview with the article's principal author, Rochelle Greene, which was denied. They have asked us to submit our question in writing.

Among the questions we'd like answers:

How did the National Association for Chiropractic Medicine (NACM) manage to turn a Consumer Reports article into an endorsement for their organization, especially considering their lack of membership (estimated in the hundreds)?

What was the involvement of the Orthopractic Manipulation Society (OMS) in the writing of the article?

Why did you recommend NACM chiropractors? What do you really know about them? How many members do they have? Why is their membership list kept secret?

Was Consumer Reports aware of the New Zealand Commission's findings on Dr. Murray Katz, the main force behind the OMS? In it's findings, the New Zealand Commissions states:

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issues of its magazine had been materially influenced by Dr. Katz views. We have already expressed some doubt whether the United States Consumers Union report is entitled to any real weight in our inquiry, since it deals with the United States situation which for a variety of reasons is different from that of New Zealand. If Dr. Katz did materially influence the findings in that report, his evidence only adds to our doubts as to the weight to be attached to the report."

It appears that Consumer Reports was a tool for Dr. Katz's longstanding war against chiropractic. Otherwise, how is it that in March of this year, the OMS and NACM apparently knew of the contents of the Consumer Reports article and included it in its action plan?

Will Consumer Reports publish an opposing view from a responsible party, or will the opinions of Dr. Katz prevail? Where can DCs send comments? Can they fax them to Consumer Reports?

Editor's Note: If you feel strongly about the need for Consumer Reports to publish a more accurate account of chiropractic, or wish to make comment, you can fax your thoughts to them at 1-800-766-9988.



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