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## **The Dichotomy in Chiropractic**

By Fred Barge, DC, PhC

Those not well-schooled in chiropractic's history, and unfortunately that is the majority of the chiropractors today who graduated after 1960 (which, by the way, is the majority of chiropractors), do not understand how our dichotomy came upon us.

Most assume that it crept slowly upon us as chiropractors began to expand their practices into the use of more therapies. Simply not so. The dichotomy began immediately, as from chiropractic's very inception D.D. Palmer's first classes included allopaths, homeopaths, eclectics, osteopaths, etc. Now, what would you do if you were a doctor degreed in another health care discipline, who had just taken D.D. Palmer's chiropractic course? Would you discard all of your present procedures and simply convert your practice to chiropractic? Reason and logic would say no. You would simply mix what you had learned from D.D. into what you were already doing. This was at first called mixed practice, and then the wordage deteriorated down to the abbreviated and degrading term of mixer.

These early practitioners of mixed practice immediately began to open up schools. D.D. Palmer's diploma actually granted them the right to "practice and teach chiropractic." Dr. Solon Langworth was possibly the very first and his efforts have been highly touted by the detractors of the Palmers ever since. He opened an infirmary and a "modernized" school of chiropractic in Cedar Rapids, Iowa. His efforts, however, were short-lived as his name is not heard of in chiropractic history after only a short period of time.

The most heroic efforts to bring chiropractic into the medical mainstream of common therapeutics was historically, and still is today, the National College of Chiropractic. The National College opened its doors in 1906, so, you see, from very early on our profession has been plagued by the dissident faction that objected to D.D.'s distinct (separate from medicine), philosophical concepts of body, mind, and spirit -- the traditional "from above down, inside out" innate principles of the founder and his son, B.J. Palmer.

Those who espouse the therapeutical disease treatment approach, such as Dr. James Winterstein, proclaim chiropractic's philosophy has spawned our dichotomy. Nothing could be further from the truth. The detractors of Palmer's chiropractic philosophy created the dichotomy. If we all practiced as the founder taught, wrote, and lectured there would be no dichotomy today.

So, what do we do about the problem? Dr. E.L. Crowder made a succinct statement that bears quoting here. "Our true inheritance lies in our ability to make and shape chiropractic so that it will survive for all time to come. Thus, we become the creators of our professional destiny."

Yes, we are the creators of our own destiny. We either accept the allopathic world view of disease and become a therapeutic practice, which would simply mean that we use numerous therapeutic procedures and modalities to "treat disease": Acupuncture, acupressure, homeopathic remedies, therapeutic massage, clonic irrigation, proprietary drugs, ambulatory (minor) surgery, ear irrigation, sinus drainage, etc., would all be within our scope, and of course SMT (spinal manipulative therapy). Or, we ameliorate and advance our traditional stance of non-therapeutic care, which simply means we do not treat disease nor provide a therapy for disease. Our spinal adjustment is not a form of therapy.

Therapy, as used in chiropractic is pre- and post-chiropractic care, preparatory and rehabilitative procedures relative to subluxation reduction and correction. Chiropractic care simply removes an obstruction to healing -- subluxation. A spinal adjustment is delivered to remove this obstruction and to normalize neuronal expression throughout the human system. We endeavor to normalize homeostatic function to provide vivification through the release of nerve root encroachment caused by vertebral subluxations. Our basic frame of reference is the detection, location, control reduction, and correction of the vertebral subluxation.

The later approach gives us the unlimited horizons of caring for all people regardless of the diagnosis. If they have a subluxation we can be of help.

The former approach will force us into the medical model. We will be asked to prove the efficacy of our "treatment" in every disease known to man. An impossible and unending task.

"Enuf" said.

Next time, Dr. Barge explains chiropractic's non-therapeutic stance.

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