



Dynamic Chiropractic – June 15, 1998, Vol. 16, Issue 13

We Get Letters & E-Mail

Wonderous Chiropractic

Dear Editor:

I have practiced the wonderful and wondrous techniques of chiropractic since 1951, and have witnessed and occasionally been directly involved in medicine's financial, political and chicanery (I was once called to a pre-indictment hearing for affecting a cancer cure, as confirmed by the Mayo Clinic, which had originally found the case "terminal.")

In my opinion, you are completely on target in your "Report of My Findings" column in the April 6 edition of *Dynamic Chiropractic*. Our chiropractic profession is combatively unmatched against medicine's vast financial influence and political clout. Surely our most opportune stance is in our ideological preference in a world so disgraceful and deadly addicted to drugs both physiologically and psychologically. (I just visited a friend of mine a nursing home taking 14 -- yes, 14 -- various prescription drugs. A good friend of mine, an MD, when asked how a professional could balance so many different toxic compounds, said, "That's impossible," and that it is the body's "innate" power toward survival that makes them seem less deadly.)

Wanting to include the use of drugs in the practice of chiropractic, and in light of what is currently "going down" in the world of medicine's track record of troublesome if not criminal treatment activities, one is enjoined to ask of our chiropractic brethren, from what mindset is their orientation toward a healing discipline established?

Of course, most are aware that all disciplines have an offering to a needy patient; however, the oft-used and well-established hypothesis of "benefits versus risk" is now unbalanced in medicine's drug-oriented application.

We salute you, Mr. Petersen, for your constant, well-versed, direct "say it as it is" journalism. You have said before, and will reiterate, I suspect, that we have found the enemy and it is us.

James W. Sweet, DC, SC

Watertown, Wisconsin

Tabloid Ads

Dear Editor:

Every month I read your paper with great interest, as I have for nine years, due to the informative articles that keep me somewhat abreast on what is happening in the health profession. The articles and writers of such articles do a good job. I am writing because I recently had a high school patient ask me for an article on health on which she could write a short paper. I had a copy of DC handy, so I looked into it, found a small article that I knew she could understand and gave her the entire issue.

That evening, I looked through another copy of the same issue and began to be quite embarrassed by the fact that I let the young lady take this publication home where she and her parents could peruse through it. My embarrassment was not due to the content of the articles by your writers, but by a few of the advertisements. A majority of them are respectable, but the ones that stick out are downright sleazy. I guess I never paid attention to them in the past, but looking at them with a patient's perspective, I felt as if I were reading a tabloid.

The ads I am referring to are the "They all laughed when I tried to get PI patients", "How a \$7 investment can create a flood of personal injury patients worth ..." and the "How I built a \$1,000,000 per year cash practice" ads. These ads rate right up there with the ads you saw in the comic books when you were a child that sold x-ray glasses or told you could put on 50 pounds of muscle in 4 weeks. They are sleazy and a disgrace to the profession. I have read others with the same concerns and have also read the rebuttals that say "B.J. would be doing the same thing." I can't even comment on that.

I am not saying that these doctors do not have something to share that is probably very effective or that they should not try to let others know about it. It is their tactics that are poor. I am sure the writers of such ads are thinking, "I'm laughing all the way to the bank." Well, that is the heart of this problem -- they focus on the money and never mention good health care in their ads. Therefore, the ads seem fixated on one thing, and this is why I realized that I cannot share this publication with my patients.

To not just complain, and to maybe help the situation, I will suggest that you set some advertisement standards for your great publication that match the standards you use for those who contribute articles to it.

Gregory W. Beasley, DC
West Branch, Michigan
Beas-voyager.net

Editor's note: These next two letters are responding to the nameplate in the May 18, 1998 issue of *Dynamic Chiropractic*. The nameplate, which changes each issue, is also on our website, ChiroWeb. (<http://www.chiroweb.com>)

"Can't you do better?"

Dear Editor:

I have just had the opportunity to view this web page. Please understand that I think this page is absolutely horrible. If I were a layperson, my impression would be that we are all charlatans, etc. The ad does nothing for me. Imagine the impression we make on others who view this page. A magician over a spine is professional? Can't you do better than this?

Kenneth S. White, DC
Austin, Texas
blancopolo-aol.com

Shocked

Dear Editor:

I am a chiropractic student at Palmer College of Chiropractic. I am writing in regards to something that I noticed in your recent issue of DC. I enjoy receiving your paper and find it not only interesting but educational. But in the last issue, on the front page there is something that shocked me which I would like to

bring to your attention.

On the cover, there is a picture of a magician passing a hoop over a spine. Next to it is the statement, "The Magic of Chiropractic." I am in the second trimester at Palmer and am learning the basic sciences, which include biochemistry; spinal anatomy; endocrinology; gross anatomy; cell physiology; and neurophysiology. I am finding out that these classes have everything to do with chiropractic.

The reason why I state this is that understanding how the body works is very important to how chiropractic works. All chiropractic does is allow the body to function at its maximum potential. So chiropractic is not a magic, but a science. Like that quote states, "Chiropractic is a science, philosophy and art." If we want the chiropractic profession to be unified, we all need to have a common foundation and understanding of what chiropractic is and does.

Again, I enjoy your paper and look forward to upcoming issues, but please take thought and care behind statements that are made about chiropractic.

Brian Pfaff

Second trimester chiropractic student

Palmer College of Chiropractic

Davenport, Iowa

Editor's note: These last two letters are in response to Dr. John Amaro's "Is This a Conspiracy?" from the May 18th edition of Dynamic Chiropractic.

Confused

Dear Editor:

After reading Dr. Amaro's recent article, it really confused me. After all these years, Dr. Amaro's acupuncture is not the acupuncture that most people know. According to the Encyclopedia Britannica, "Acupuncture: Ancient Chinese medical technique for relieving pain, curing disease, and improving general health. It was devised before 2500 BC in China ..." Even up to today, no acupuncture school exists in Taiwan that is officially permitted by Taiwanese authority. I have lived in Australia for more than six years

(not six visits) and was involved in a local acupuncture program, but never heard of "Australian acupuncture" as Dr. Amaro referred. I hope we can all agree that "acupuncture is from China," just as "Coca-Cola is from America."

I have studied in China. After MD training, it took another three years for me to get a degree in acupuncture, not in traditional Chinese medicine (TCM). My Korean colleague in Los Angeles told me that it takes four years of training for acupuncture alone and six years for Oriental medicine (acupuncture included). Similar curricula are required in Japan. In California, it takes three years of study to become a licensed acupuncturist (LAc) and a majority of the students attend the acupuncture school all day, every day, five to six days a week.

As a science or a technique, like chiropractic, acupuncture involves many aspects such as anatomy, function, diagnosis, manipulation and complication, etc., and should be studied professionally. For its introduction, a 100 hour program is perfect. For its selective practice, a 1,000 hour program may be appropriate. Believe me -- for this matter, we are lucky not to be living in China, Korea or Japan.

So far, I think the ACA has done the right thing and is on the right track for the benefits of all doctors. Congratulations!

Simon Wang, MD, PhD, Ms. Ac.
Tustin, California

Appalled

Dear Editor:

I was very glad to see Dr. Amaro's most recent article, "Is This a Conspiracy", printed in the May 18th issue of DC. I am glad that DC has the courage to print his articles.

As a chiropractor who has practiced acupuncture for about 5 or 6 years, I too have found that there is an effort to portray the chiropractor as inept, while at the same time the graduate of one of the acupuncture schools in the USA is depicted as more knowledgeable. This is politically motivated for the sake of cornering a market on patients. I also feel it is inaccurate.

The epitome of certification for the 4-year acupuncture school graduate in the USA is the NCCA certificate. Many states allow an acupuncturist to practice after obtaining this credential only.

Lately, one of the pioneers of acupuncture in the USA has declared that the methods taught in 4-year TCM (traditional Chinese medicine) schools in the USA may be complex misinterpretations of philosophy: " ... what we presently have is a standard based largely on outdated information and rooted in textbooks whose validity has been openly challenged. The [4-year] acupuncture exam [by the NCCA] establishes a very low standard based on the state of knowledge in the early '80s. The profession still largely misrepresents its nature as purely holistic." The preceding quote is from Stephen Birch, the author of textbooks used in 4-year acupuncture schools, quoted in an interview in *Oriental Medicine Journal*, Vol. 5, #3/4, Winter, 1996.

For the NCCA exam, one needs to take a preliminary course called "clean needle exam". I took the clean needle course at the acupuncture school in Columbia, Maryland. Nobody there knew I was a chiropractor. As we waited to take the exam, students and instructors were talking. One candidate taking the course lamented how slow business was in Illinois because of the "war" with chiropractors who do acupuncture. After many derogatory comments, I introduced myself. I told him that if business was slow it was because of him, not because of any "war" with an outside individual or group. I told him he ought to assume responsibility for his predicament. Chiropractors have thrived in spite of such "wars" with MDs, PTs, etc. that make any "wars" acupuncturists face pale by comparison. In comparison to chiropractic, acupuncturists have always been the media's fair-haired boys; they should have it very easy.

That day after the course, I trained with a friend of mine who lived in Taiwan for 14 years and graduated from Taijung Medical School with an OMD (Oriental medical doctorate) whose specialty was internal medicine and herbs. He had also gone to Georgetown Medical School in the US, and is now going to chiropractic school. He told me that he felt the chiropractors were way ahead of the 4-year acupuncturists. He said the typical acupuncturist could not get into massage therapy school.

I have to thank Dr. Amaro for so clearly informing us of the problems with the 4-year acupuncturists. I agree with him that they have a political agenda that is money-motivated. It is appalling that our own ACA would publish an article that spoke so negatively of chiropractic and its practice of acupuncture. Lindsay Anglen, DC Mount Vernon, Missouri



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