



# What does the ivory-billed woodpecker debate have to do with chiropractic?

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**Narrative:** What struck me powerfully about the ivory-billed woodpecker debate is how it seems to mimic the relationship between chiropractors treating patients and chiropractic academics/researchers.

I see the chiropractors treating patients as the life-long bird watchers who are experts on bird identification seeing the types of patients that seek chiropractic care, what types of interventions appear effective, and are enmeshed in the nuanced nature of practicing the art of chiropractic.

Whereas the chiropractic academics/researchers are more similar to ornithologists who are experts in different specific fields of study yet should ideally yield and cooperate with the vast majority of chiropractic clinicians to help develop a future for the field of chiropractic.

**Indexing terms:** Chiropractic; Woodpecker; Realists; Post-realists; absurdists.

## Introduction

One of my favourite things to do when going for an evening walk in my neighbourhood is listen to 'Science Friday NPR Podcasts.' (1) Last night while walking I was listening to an interview hosted by Flora Lichtman with Michael Retter, editor of the magazines *North American Birds* and *Special Issues of Birding*, from the *American Birding Association*. The 25 May, 2023 interview focused on a recent article that suggested the Ivory-billed Woodpecker may not be extinct. (2)

What piqued my interest is the parallel to chiropractic in the way he discussed the recent research about the *Ivory-billed Woodpecker* and his understanding of this bird, its nature, habitat, and why he considered it clearly extinct. As Retter shared his compelling critique of the research article with Lichtman she asked a pertinent question 'The thing that strikes me is that this is a peer-reviewed paper, right? These are reputable ornithologists making these claims. What is happening?' (3)

Retter replied 'In general, I would say that most ornithologists are not experts on bird identification. They are experts in their very narrow particular field of study. And to give you an instance, my husband

... imagine the progress our discipline would make if the research community accepted input from the field practitioners as to what Chiropractors were actually doing ...'



is an expert on the genetics and genomics of a couple species of salmon. But if you put them in front of him on a table, he wouldn't know what they were.' (3) He continued '... in my experience, a lot of ornithologists, not all, are like that with birds. They might know how many eggs on average a house wren tends to lay in its nest. But if a female red-winged blackbird landed in front of them, they might not know what it was just because they haven't studied that'. (3)

So what does the ivory-billed woodpecker debate have to do with chiropractic? What struck me powerfully as I heard this description is how it seems to mimic the relationship between chiropractors treating patients and chiropractic academics/researchers. I see the chiropractors treating patients as the life-long bird watchers who are experts on bird identification whereas the chiropractic academics/researchers are more similar to ornithologists who are experts in different specific fields of study.

I have had the luxury to have a full time chiropractic practice for over 40 years but have also been quite active particularly in clinical research for over 35 years. This gives me a unique position because I have friends and respected colleagues in both the chiropractic practice and in chiropractic research arenas. I have come to understand that both camps have passionate, ethical, responsible, and caring individuals trying to do what they feel is best for humanity. While I was initially hesitant to embrace the terms shared by Ebrall (4, 5) regarding the chiropractic profession as I view the conflict between the chiropractic bird watchers and ornithologists I feel he may be on to something.

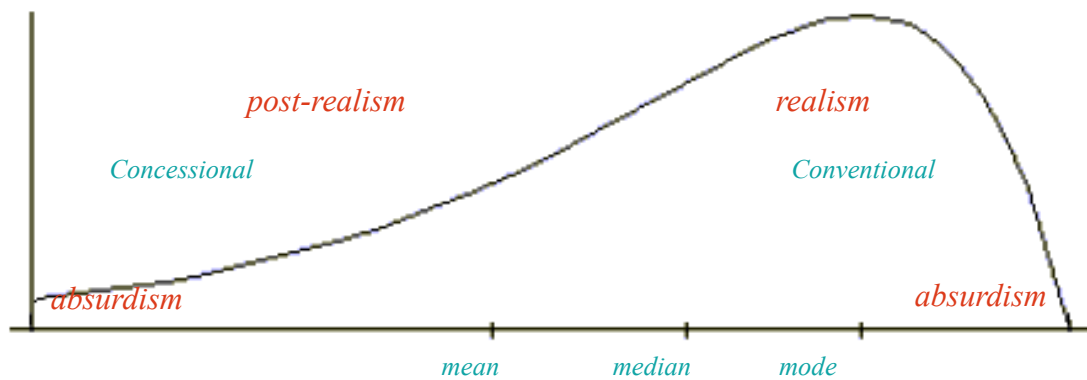
From my perspective he breaks down chiropractic essentially into '*realists*' (the vast majority of chiropractors or birdwatchers) and '*post-realists*' (a small faction of chiropractic ornithologists), there is another even smaller faction he terms '*absurdists*'. The '*absurdists*' are also broken own into a zealous subluxation based group and an extreme evidence based research group. Ironically when each side espouses their rhetoric they tend to paint the whole of chiropractic as either in one or the other absurdist camp. (4)

The subluxation based absurdist group believes that anything and everything that affects any person can be treated with chiropractic. The more serious, the more chiropractic care is needed. There tends to be a focus in that group that the more patients that receive chiropractic the better and they are less interested in any body presentation that is not related to diagnosing and treating chiropractic vertebral subluxations.

The extreme evidence based research absurdist group believe that only procedures that are published in PubMed biomedical related indexed research is worth consideration when determining how chiropractors should be practicing and what types of patients should be treated. They often will focus on randomised controlled trials and other reductionistic type of study along with using medical terminology to define chiropractic practice and care. There appears to be a goal of this group to have chiropractic fit within an allopathic model and attempt to eliminate any chiropractic historical terminology or methodologies.

While the bulk of the chiropractic community has mixed feelings about the subluxation based absurdist group, they ultimately have a minimal influence on the vast majority of how chiropractors practice internationally. On the other hand the extreme evidence based research absurdist group appear to have a stranglehold on much of chiropractic peer review journals, academics, and strongly influence many chiropractic college curriculum.

How is it possible for the extreme evidence based research absurdist group to have such a profound influence on how chiropractors can practice, are taught in college, and direct chiropractic's future?



Predictive left-skewed distribution of chiropractic thought

From: Ebrall P. Changing chiropractic's subluxation rhetoric: Moving on from deniers and vitalists to realists, post-realists, and absurdists. *Asia-Pac Chiropr J.* 2022;3.3.

There are different ways this is happening:

1. What and how are questions being asked will tend to lead to the types of answers that will be received.

For instance, as a means of attempting to limit chiropractic care to the treatment of head, neck, and low back pain the evidence based absurdists in 2004 performed a survey on chiropractic's '*Consultation on Identity*'. This survey found that only 6% of patients seek wellness care from chiropractic providers. (6)

The findings of this study were met with dismay by the vast majority of chiropractors treating patients because it didn't seem to mesh with their clinical experiences. I found the findings quite odd so sought to have my own survey and see what I found. The preliminary survey was presented at an *Association of Chiropractic Colleges (ACC)/Research Agenda for Chiropractic (RAC)* Conference and was entitled '*Patient preference for wellness care: Is it on the menu?*' (7) The reason for the title was essentially if chiropractors were not considering that they can offer wellness care why would a patient even consider seeing a chiropractor for that type of care.

The later published study found using an international convenience sample of *Sacro-Occipital Technique (SOT)* practitioners, 1,316 consecutive patients attending 27 different chiropractic clinics in the USA, Europe and Australia that '*More than 40% of chiropractic patient visits were initiated for the purposes of health enhancement and/or disease prevention*'. (8)

Ultimately we asked different questions to a different group of chiropractors. This group of chiropractors tended to have an expansive view of chiropractic and with a large menu, so their patients had more items than head, neck, and low back pain from which to pick. But by asking different questions to a different group the findings were quite a different when you consider 6% versus 40% of patients seeking health enhancement and/or disease prevention.

2. There is a perception of cultural authority when an author speaks strongly behind the guise of evidence based biomedical literature.

Since the 1990s there has been a push to make chiropractic '*evidence based*' and be able to better partner with other healthcare professions that have also embraced evidence based care. (9, 10) Since the biomedical field has a medical, pharmaceutical, and surgical bias, the research methodologies have been developed to better utilised to study this biomedical type phenomena.

However a complex nuanced art form that encompasses the chiropractic encounter from assessment, touch, and the multitude of variants of a singly labeled presentations such as low back pain, often defy the reductionistic qualities of biomedical studies such as randomised controlled trials. (11,12) For instance from a chiropractic perspective low back pain may be just local to the low

back, or may be related to pelvic imbalance, lower kinematic chain chronic asymmetrical use, a postural accommodation to cervical spine imbalance, visceral referred pain, emotional stressors, and sometimes all of the above interrelated to some degree.

So when a chiropractic '*ornithologist*' looks at a patient in a clinical setting their perceptions and value of importance may vary significantly from the chiropractic '*birdwatcher*'. For instance I found a disturbing article by Innes et al, in which they state '*Some chiropractors seem to have an inflated belief in the powers of spinal manipulation (SMT), for example aiming at preventing future spinal degeneration and health problems, activities that are without supporting evidence. Non-evidenced health beliefs have been shown to be associated with a tendency toward magical thinking.*'(13)

The Innes et al article (13) hides behind '*evidence based literature*' to foist their opinions and do so with calling chiropractors that do not believe in their position as '*magical thinking*'. It is important to note that a search of PubMed found that magical thinking '*has historically been associated with psychotic (and psychiatric related) disorders*'. (14, 15)

I can imagine the result of taking a poll of chiropractors actively treating patients whether they find that their care helps patients in '*preventing future spinal degeneration and health problems*'. Apparently according to Innes et al there is no evidence to support this contention and is solely fantasy and magical thinking if you believe this possibility. (16, 17, 18) Reminiscent of the ivory-billed woodpecker debate what is clear to any chiropractic '*birdwatcher*' is missed by a chiropractic '*ornithologist*' due to '*lacking evidence*'.

3. There is an attempt by the evidence based absurdists to fractionalise and factionalise divisions in the vast majority of chiropractors by painting any that don't agree with their perspective as being part of the subluxation based absurdist group.

At the ends of the chiropractic continuum the two groups of absurdists argue incessantly about a term, '*subluxation*', used in chiropractic historically for over a century. (19, 20) The evidence based group see an important need for separation within the chiropractic profession. '*The chiropractic profession has a long history of internal conflict. Today, the division is between the "evidence-friendly" faction that focuses on musculoskeletal problems based on a contemporary and evidence-based paradigm, and the "traditional" group that subscribes to concepts such as "subluxation" and the spine as the centre of good health.*' (21)

When I read the Leboeuf-Yde et al's earlier article (21) I was uncomfortable with how they coloured any group that sees chiropractic in a manner different to them. They have a concept that chiropractors utilising the noun '*subluxation*' are not utilising evidence-based information, which is '*off putting*' to say the least. Having attended the *International Research and Philosophy Symposium* (22) and reviewed journals such as the *Annals of Subluxation Research* (23) and *Asia Pacific Chiropractic Journal* (24) it is clear there are chiropractors utilising the term '*subluxation*' attempting to perform research and develop evidence-based rational. (25, 26)

It is important to realise that learning preferences (27, 28, 29) tend to characterise perspectives in chiropractic clinical '*bird watching*' and research/academic '*ornithologist*' communities. Clinicians tend to be more kinaesthetic learners and want to '*feel*' what they are doing to determine its value. Chiropractic researchers/academicians tend to be more visual learners and determine value through reading and/or writing.

The evidence-based absurdists when viewing any group that isn't in agreement with their beliefs appear to minimise the vast majority of chiropractic '*birdwatchers*' and the value of their ongoing clinical findings. So instead of having the chiropractic family have a separation it would logically seem better to have the chiropractic '*birdwatchers*' and '*ornithologists*' sit down and share their findings in a mutually supportive manner.

## A proposition

What a wonderful world it might be if the evidence based chiropractic researchers sought input from the clinical chiropractic community and developed a common perspective. This perspective could incorporate *how* chiropractic care is an art that involves subtle and nuanced therapeutic care for complex conditions that may be difficult to study in a reductionistic manner.

It does seem that the chiropractic evidence and subluxation based absurdists feel a strong emotional charge about needing their view to be absolute and eliminating the 'other'. (30) However the vast majority of chiropractors in clinical practice seem to have space for the multitude of viewpoints relative to chiropractic care and do practice within evidence based 'norms'. (31) Therefore it seems we have space for collegial debate, discussion, and cooperation with both chiropractic clinical (realists) and evidence based (post-realists) to help preserve the wealth and depth of what a chiropractic encounter can encompass. This could include further research and study into mechanisms of how chiropractic care functions, how chiropractic offers low risk conservative options for care, and how chiropractic care might integrate with various allied health providers.

## Conclusion

Ideally the chiropractors that are in the field like the '*birdwatchers*' are seeing the types of patients that seek chiropractic care, what types of interventions appear effective, and are enmeshed in the nuanced nature of practicing the art of chiropractic.

The chiropractors doing the research and involved in academics, like the '*ornithologists*', should ideally yield and cooperate with the vast majority of clinicians to help develop a future for the field of chiropractic. Lastly it is important that we are cautious with the absurdists' points of view since they represent extremes and are in the minority of the chiropractic profession.

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