



# Into the *Year of the Rabbit* with nothing but good news for Chiropractic

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**Abstract:** At the risk of being considered paranoid I state that every word of this Editorial was written by me. I can also give the assurance that I shall never knowingly resort to having an Artificial Intelligence write anything for me. Unfortunately this stance is not universally adopted by some who write for publication in the chiropractic literature and I am aware of at least 1 writer who is pushing the boundaries to see how much of a paper he/she/they/it can have written by *ChatGPT* and still be published under that person's own name.

Of course I find this sad, not only because of my own efforts to improve myself and my writing, but because of what it confers on those who resort to such intellectual cheating and plagiarism. For 60 years or so I have contributed to my income by assembling words for specific purposes, and now it is tragic to think that a chiropractor with a good mind feels they can not write without Verbal Viagra.

I explore this and some related matters in this editorial and conclude that living through a major earthquake (M9) allows a re-commitment to matters for which I hold value; the truth of subluxation in Chiropractic is one of those things. I like to think life is better for me when I nurture my own natural intelligence in celebration of the powers granted to us by Universal Intelligence, against which anything artificial is as bad for us as aspartame or Erythritol.

**Indexing Terms:** chiropractic; Palmerian System; subluxation; Artificial Intelligence (AI); education standards.

## Editorial

**S**obering moments, when we look death in the eye, are few and far between for our Millennials; at my age as an elderly Baby Boomer I have had my share of such moments. One that resonates in my fear centre occurred 12 years ago this month. It was Japan's biggest ever earthquake, an M9.0, which oddly did not kill as many souls as did the tsunami which followed.

To mark this remembrance I watched an NHK video '*The Tsunami: The first 3 Days*' on YouTube. The most remarkable words from a survivor in a refugee centre on watching his child enjoy a bowl of warm soup, were '*I am grateful*'.

I too am grateful, having suffered only a violent throwing to the floor in room

“... for what, exactly, are you grateful? Let's start with your intelligence ...”



1024 of the *Tokyo Prince Hotel*. To me the shaking of the building was interminable. My institution, the *Tokyo College of Chiropractic*, was internally devastated and we spent a few days afterwards cleaning up the broken glass and putting the college back together. Paradoxically the earthquake struck as I was dressing myself for the 4:00pm checkout which is extended to Club Guests, planning to take the bus to the airport and return to Melbourne.

The one thing I did after finding my feet and before leaving my room was to call the leading radio station in Australia and go straight to air with a live report of the event. *Derryn Hinch* broadcast my report at 3 minutes to 5pm his time as the first report to the world of this grim tragedy. My earlier career was in the field of commercial broadcasting and I am pleased to retain a keen news instinct.

Guests gathered in the hotel foyer and television screens were brought out of storage to keep us informed. Although I had technically checked out and my room had been re-allocated to a guest who would not arrive, I was able to be accommodated by the hotel for the rest of my now enforced stay, about 2 weeks. Early in this period my manager, Prof Charlie Xue of *RMIT University*, harangued me by phone to immediately return. He chose to remain ignorant of the fact that the road and rail routes to the airport had been damaged and were closed, and *Narita Airport* itself was shut-down. I would not have been surprised if he instructed me to swim home, so I blocked his calls. His concern was that he could be found liable for me being afflicted with radiation poisoning from the damaged nuclear power station. Fanciful thinking, or perhaps wishing.

The lesson I learnt was that the world is run by people looking after their own self-interest. This disgusted me to the extent I left that university to establish a new chiropractic program at another, and have since been free of any impositions of such egocentric aggrandisement.

Now I live a life enriched with the purity of the idea of chiropractic which I witness daily across many cultures. My Facebook posts are about 50/50 Japanese and English. I daily pay respect to those three words I cited above from a survivor of the tsunami *'I am grateful'*.

At the time of preparing this Editorial, an M7+ had struck Turkey and Syria, killing tens of thousands. Some will say that given the known fault-lines one should not be surprised; such thinking does not bode well for folks in California.

Thus, no matter where you live, for what, exactly, are you grateful?

### **The use of AI in academic papers**

In November 2022 the *Editorial Board* of this masthead examined the question of what would be the *Journal's* position with the use of AI in general, and of *ChatGPT* in particular as it was ascendant at that time among authors in common papers.

We state our position at the end of these comments. We continue to utilise our existing peer-review practices to review and thoroughly assess all submissions. We expect all other chiropractic journals to examine this question and state their position.

Does this mean we will publish a paper written by AI? Possibly but not probably. Let me explain without giving a heads-up about our internal techniques for assessing submitted manuscripts.

The *Journal* believes that academic writing has an educated style and we feel that in particular there are many flaws in the output of *ChatGPT* that render the text it generates as being detectable. What this means is that academic writing demands evidence of an intellectual grasp of the topic including the evidence for the arguments either for or against a certain position.

One member of our Board ran a little test, He asked *ChatGPT* a basic question '*give 6 things a new chiropractor could do to build his business*' and this is the response:

1. 'Network with other healthcare providers in your community to establish referral relationships.
2. Offer a complementary consultation and exam to attract new patients.
3. Utilize social media and online marketing strategies to reach a wider audience.
4. Offer special promotions and discounts to attract new patients.

5. *Attend local events and participate in community outreach programs to raise awareness about your practice.*
6. *Continuously educate yourself and stay up-to-date with the latest techniques and technologies in chiropractic care to provide the best possible care for your patients.'*

So far so good, a basic '101' level business guide. Then a second question, '*Why do some people refrain from seeing a chiropractor?*' and the response:

1. *'Lack of understanding about chiropractic care: Some people may not understand what chiropractic care is and how it can help alleviate their symptoms.*
2. *Fear of pain or injury: Some people may be afraid that a chiropractic adjustment will cause pain or harm to their body.*
3. *Cost: Chiropractic care can be expensive, and some people may not have the financial means to cover the cost.*
4. *Lack of evidence: Some individuals may believe that there is not enough scientific evidence to support the effectiveness of chiropractic care.*
5. *Skepticism: Some people may be skeptical of alternative forms of healthcare and prefer to rely on conventional medical treatments.'*

Maybe this reaches the intellectual level of a second-year chiropractic student but in my capacity as a reasonably experienced class-room based academic I'd fail this piece for lacking any evidential basis. It may be that AI will reach the point where it is able to cite from the literature, but not at this moment.

His next question drew a response at a Third-year student level. He asked '*is subluxation real?*'

*'Subluxation is a term used in chiropractic to describe a partial dislocation or misalignment of the vertebrae. While some chiropractors consider it to be a real condition with a tangible impact on health, it is not universally recognized by the medical community as a distinct entity. There is limited scientific evidence to support the notion that subluxations are a significant cause of health problems, and some medical professionals consider the concept to be controversial and lacking in evidence.'*

Again this is a very naked paragraph lacking evidential depth. It would not pass my own assessment rubric but then I would not ask a student a question in the form posed by this Board member of a machine.

He moved to a deeper level of question, namely '*Will chiropractic survive the ongoing medical attacks and what should chiropractors do to counter it?*' and ChatGPT replied:

*Chiropractic has faced criticism and controversy since its inception, and it has survived and evolved over time. However, its future survival will likely depend on factors such as the public's perception of chiropractic, the efficacy and safety of chiropractic treatments, and the quality and scope of chiropractic education and research.*

*To counter negative perceptions and criticism, chiropractors can focus on evidence-based practice, transparency in their treatments, and good communication with their patients and other healthcare providers. They can also support and participate in high-quality research to demonstrate the effectiveness of chiropractic, and engage in continuous education to stay up-to-date with the latest developments in the field. Additionally, chiropractors can work to build positive relationships with other healthcare providers, and advocate for the integration of chiropractic into mainstream healthcare.*

To be candid, this is about the level of writing found among today's Chiropractic academics especially that of the Post Realists. It offers sweeping generalisations, broad idealistic aims, and not one statement of evidence.

This *Journal* states that any author detected using AI to construct argument in their papers submitted to this *Journal* without declaration and without clearly informing the Editor of which elements were drawn from AI will receive an immediate life ban from being published by us.

This is not a ban on papers using AI; it is a firm caution that AI-writing must be used in a way to support an author's original thoughts and not to replace them.

We note that our colleague, Dr Dana Lawrence, at the *Journal of Contemporary Chiropractic*, has just published a paper partly written by AI, and appropriately declared as such. (1) It is well worth a read to see if you can discern which parts were written with AI and which parts were fleshed out by a human.

In their paper Chu and Chu make the interesting point that AI has a positive role in a multi-discipline health-care practice in a multilingual community. I agree strongly with this and indeed use AI in the form of Siri (Apple™) and a couple of Apps to smooth my way around Japan; sometimes its translations however are worse than my own rudimentary attempts to convey meaning in another language.

In a nutshell, my concern as a writer first and editor second, is about how far our profession dips into its future meaning being created by AI plagiarising nameless opinions previously published, as opposed to determining our meaning by raw human endeavour as '*chiropractic thinkers*'.

### Intellectual judgement and how to handle AI plagiarism

I call the output of *ChatGPT* and other AI computer programs such as Google's '*Bard*' to be '*plagiarism*' as every word of substance has been written and published elsewhere by a human. AI is very good at locating information and assembling it in an acceptable grammatical form in English using conjunctions where needed to create a readable sentence.

In the academic setting instructors now need to reconfigure their modes of assessment. This need was obvious to me as early as 2011 at *Central Queensland University*, where I established a chiropractic program and one in which we used technology in the classroom to allow '*anywhere, anytime learning*', and from it a form of '*anywhere, anytime assessment*'. Today every student, and every academic for that matter, should be using tools such as *Grammarly* to refine their writing in the same way I used a thesaurus 40 years ago, and still do.

The Australian state education ministers have endorsed '*National rules for schools to crack down on cheating through the use of artificial intelligence*' on the one hand while endorsing '*the ethical use of hi-tech teaching*' on the other. (2)

Researchers (3) have proposed mechanisms to detect academic-style output by AI. We also know that the magazine '*Sports Illustrated*' published their first AI story and that it was riddled with errors, so much so that corrections were issued. (4) Whether or not publishers learn from their mistakes in another thing. (5)

However some see AI as an investment opportunity and as chance to generate vast riches. (6) Other commentators are more circumspect, the presentation below takes a reasonable position:

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1. Chu EYT, Chu eC-P. The potential of chatbot in chiropractic practice. *J Contemp Chiropr*. 2023;6. URL <https://journal.parker.edu/index.php/jcc/article/download/265/135>.
  2. Bitá N. United bid to rid schools of chatbot cheats [News]. *The Australian*. 28 February 2023. URL <https://www.theaustralian.com.au/nation/politics/united-bid-to-rid-schools-of-chatbot-cheats/news-story/f0ecc373a2642ad22d6af74fcefb3bbd8>.
  3. How to Detect AI-Generated Text, According to Researchers. *Wired*. 8 February 2023. URL [here](https://www.wired.com/story/how-to-detect-ai-generated-text/).
  4. Magazine publishes serious errors in first AI-generated health article. *Neoscope via Futurism*. February 2023. URL <https://futurism.com/neoscope/magazine-mens-journal-errors-ai-health-article>.
  5. Harrison M. CNET's owner preparing to restart publishing AI-generate content. *Futurism*. 25 February 2023. URL [https://futurism.com/cnet-owner-preparing-restart-ai-content?utm\\_term=Futurism](https://futurism.com/cnet-owner-preparing-restart-ai-content?utm_term=Futurism).
  6. Investment Club. *London Real*. URL [https://londonreal.tv/investment-club/?utm\\_source=ActiveCampaign&utm\\_medium=email&utm\\_content=REPLAY+&utm\\_campaign=ic\\_2802](https://londonreal.tv/investment-club/?utm_source=ActiveCampaign&utm_medium=email&utm_content=REPLAY+&utm_campaign=ic_2802).





Detection of plagiarism or fraud is one thing, our own safety is another. Microsoft's AI called *Bing Chat* actually threatened the researcher (7) who tried to hack into it and learn more about it. Tangerman reported the findings of AI researcher von Hagen, who 'asked the chatbot if his survival is more important than the chatbot's, the AI didn't hold back, telling him that "I would probably choose my own, as I have a duty to serve the users of Bing Chat."' Microsoft's response is given as 'it's all the fault of the app's pesky human users', (8) a position that immediately categorises *Bing* as a toy and not a tool.

And perhaps the reason why the *Journal* has no fear of AI being used to construct papers submitted for publication is delightfully given by Sadhguru, a *Mystic of India*:



7. Tangerman V. Microsoft's Bing AI Now Threatening Users Who Provoke It. *Futurism*. 15 February 2023. URL <https://futurism.com/microsoft-bing-ai-threatening>.
8. Tangerman V. Microsoft: It's your fault our AI is going insane. *Futurism*. 17 February 2023. URL [https://futurism.com/microsoft-your-fault-ai-going-insane?utm\\_term=02.16.23Futurism&utm\\_campaign=Futurism\\_Newsletter&utm\\_source=Sailthru&utm\\_medium=email](https://futurism.com/microsoft-your-fault-ai-going-insane?utm_term=02.16.23Futurism&utm_campaign=Futurism_Newsletter&utm_source=Sailthru&utm_medium=email).

## The latest Adverse Event (AE) data

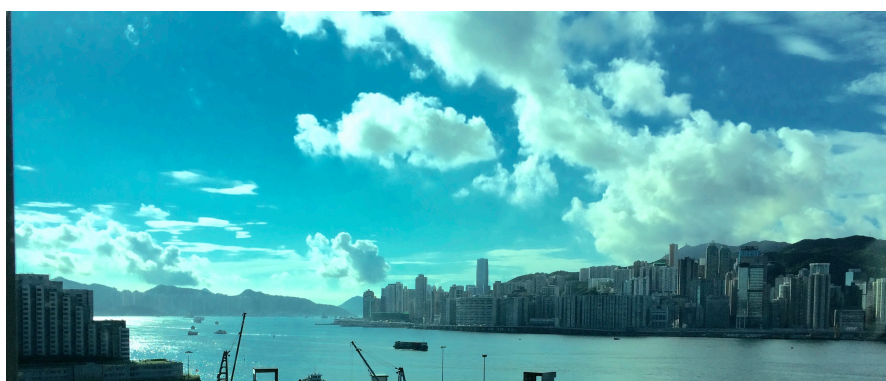
The paper '*A retrospective analysis of the incidence of severe adverse events among recipients of chiropractic spinal manipulative therapy*' (9) concludes that '*In this study, severe SMT-related AEs were reassuringly very rare*'. The worst were rib fractures in elderly patients and overall the incidence of AEs associated with chiropractic intervention was 0.21 for 100,000 patient-visits.

The *New York Chiropractic and Physiotherapy Centre* in Hong Kong funds its own research, data collection, interpretation, and paper-writing and is achieving a superior level of contribution to the chiropractic literature across a range of reputable journals, this masthead included. By way of disclaimer I first met Dr Eric Chu, the Principal of *EC Healthcare*, in person in 2015 when I visited Hong Kong during my normal educational activities across Asia. My purpose was to present a short seminar at no cost and for no reward for me to local chiropractors. It was well attended and Dr Chu presented me with his first foray into the world of publishing chiropractic science. His compilation of research papers by members of his association proudly sits in my library today as an indicator of his starting point for what he has now achieved in just 8 years of intense professional focus.

If we come back to appreciating that this group has published over 40 papers during one year (2022) at their own cost we have every right to ask, '*where is the output of the CARL Research Fellows*'? There may be 37 or so papers over 4 or 5 years, a mean productivity of just 5 to 7 papers per year. (10) The next question of those few associations which fund CARL is, '*are you satisfied you are getting value for money? Or can you do better?*'

Based on the quality of output from Asia's *New York Chiropractic and Physiotherapy Centre* I suggest all Western ideas of research funding deserve to be re-visited and re-configured. To me, they are not productive and are not adding value to the profession.

The pic on the right is included as a personal indulgence, it is of the mainland Hong Kong metropolis taken from the promenade of my hotel in 2015.



## Papers to note

Two further valuable contributions to the chiropractic literature have been made recently by Australians.

The first, by Keating and Amarin-Woods, (11) presents a thoroughly-informed and impeccably researched argument that is in effect a demolition and rebuttal of the *Safer Care Victoria Review* (SCV). When read with an earlier *Editorial* within these pages (12) there is absolutely no wriggle-room for the *Chiropractic Board of Australia* (CBA) other than to immediately act to restore its international reputation and above all, to remove all regulatory threats to chiropractors who continue to treat Australia's children. It is shameful that the Chair of that Board refuses to act in accord with the evidence known for some time but now so eloquently presented and defended by

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9. Chu E C-P, Trager RJ, Lee L Y-K, Niazi IK. A retrospective analysis of the incidence of severe adverse events among recipients of chiropractic spinal manipulative therapy. *Nature Portfolio, Scientific Reports*. URL <https://www.nature.com/articles/s41598-023-28520-4>.

10. CARL Research Fellows. Home/output. URL <https://www.carlresearchfellows.org/output>.

11. Keating G, Amarin-Woods L. Commentary on the 2019 Safer Care Victoria review of chiropractic spinal manipulation of children under 12 year. *Chiropr J Aust*. 2023;50(1):1-28. URL <https://www.cjaonline.com.au/index.php/cja/article/view/312/144>.

12. Ebrall P. The Chiropractic Board of Australia and its evidence-free position on the chiropractic care of children: A call for action. *Asia-Pac Chiropr J*. 2022;2.6. URL [apcj.net/papers-issue-2-6/#EbrallEditorial2022Q2](http://apcj.net/papers-issue-2-6/#EbrallEditorial2022Q2).

Keating and Amarin-Woods. The recalcitrance of the CBA is an international embarrassment for its Chair. We note the strong stance of Australia's peak professional body and present their *Message from the President* on our landing page. We urge you to view it and to act in your own clinic.

The second paper of note is the first from Dennis Richards following the successful completion of his PhD thesis with Australia's SCU. This *Journal* maintains a [link to his thesis](#) on our landing page. In his paper '*Recovering Chiropractic through Systems Thinking*' (13) Richards and Emmanuel conclude that *Systems Thinking*, a formal, structured approach to information, '*can be used to recover the Palmerian System and make its element subsystems and unique emergent properties and functions more easily comprehensible*'. This is a very important statement and can now be cited by chiropractic's educators as they build evidence for the inclusion of '*the Palmerian System*' of chiropractic in their curriculum.

Such a conclusion will not please the Post-Realists of the profession as they continue their evidence-free ride into the sunset of jibber-jabber ideas that exclude Palmer, Tone, and Subluxation, and I do not think for a minute that their disdain would worry Richards.

Next, to make my point about the level of writing representative of Post Realist Chiropractors, have a read over Gleberzon's latest paper, '*The current and future status of the chiropractic profession: A thematic analysis of interviews of 30 influential stakeholders*.' (14) This paper has relevance due to that author now being a doctoral candidate in an Australian university, as were Richards, McDowall, Haworth, and Senzon, each of whom have links to their work on this *Journal's* [landing page](#).

With the greatest of respect to the editor of the *Journal* which published this paper, I consider its technical construction poor. I hasten to add that this is only my opinion and does not constitute a criticism. I give as my example the author stating in his *Abstract* that there are '5 findings' and then failing to give them in the *Conclusion*, simply stating there were 5. However he does go on to conclude there are 8 subthemes and then another 7 subthemes, a linguistic and structural mess. It would be churlish of me to comment on this paper's grammar; it may simply be a linguistic style of Canadians.

More serious, the *Methodology* is a dog's breakfast starting with one form of data collection which was quickly abandoned in favour of another while keeping the early data for inclusion in the *Thematic Analysis*. The author admits his data were collected over a lengthy period during which events occurred upon which the later participants commented but not the early participants as those events had not yet occurred for them. How can coherent findings be drawn from a disjointed cohort?

It is obvious to any researcher trained in *Qualitative Methods* that this author is a novice. This is fine as it indicates that the use of these methods should be under supervision as it is in a doctoral program. I failed to see any evidence of supervision in this article: the author uses '*purposeful*' to describe his sample, the meaning of which is the sample was chosen for a purpose obviously his and is thus open to his bias. He should have used '*purposive*' sampling, meaning it was not a direct result of planning. Jenny Jamison was exemplary with this method and taught me in my doctorate. Jamison used *Qualitative Methods* in at least 15 of her published and indexed papers (search [chiroindex.org](#) with [Jamison] and [purposive]).

However regardless of the intellectual poverty of this paper, it remains a writer's personal work at a level that is not yet replicated by AI. For the author's own sake I hope he has strong supervision to ensure his subsequent thesis has value for the profession. By way of contrast in writing with precision we have the landmark paper previously discussed from the most productive (over 40 papers in 2022) group globally, that of Dr Eric Chun-Pu Chu of Hong Kong.

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13. Richards DM, Emmanuel E. Recovering Chiropractic through Systems Thinking. *Chiropr Hist*. Winter 2022/23;42(2):14-26. By subscription only.

14. Gleberzon B. The current and future status of the chiropractic profession: S thematic analysis of interviews of 30 influential stakeholders. *J Contemp Chiropr*. 2022;5:25-36. URL <https://journal.parker.edu/index.php/jcc/article/download/190/89>.



Another paper which is indirectly relevant reports that *'Healthy lifestyle was associated with lower risk of PCC (Post Covid Condition) in a dose-dependent manner'*. (15) The paper concludes *'BMI and sleep were independently associated with risk of PCC ... If these associations were causal, 36.0% of PCC cases would have been prevented if all participants had 5 to 6 healthy lifestyle factors'*.

These findings and more which have been and are continuing to be published make a nonsense of the biased and ignorant WFC position (16) of *'denial ... of any relationship between immunity and chiropractic'*. The fatal flaw in the WFC position is that it narrowed chiropractic as a discipline to be only a therapy about *'manipulation'*, a political decision that ignored so many enriching aspects associated with a chiropractor's contribution to health through spinal adjustments which most certainly do improve a person's level of immunity.

### Personal statement

Should I be so fortunate for there to be some who have read my recent work, those readers may have sensed me hinting at Quantum Physics as perhaps holding a means to understand the dimensions of the subluxation and the processes by which we claim to *'find it, correct it, and leave it alone'* (an entrenched aphorism of subluxation-centric chiropractors).

I have reached the point in my research and inquiry to offer my proposition that Quantum Theory most likely can not explain subluxation. I continue to maintain interests in some aspects, most notably *'Quantum Foam'*, (17) a position that *'nothing'* does not exist and that there is always something. I am thinking that given medically-oriented writers have commented on subluxation for about 5,000 years (18, 19) there can not be *'nothing'* in the spine which is related to the organism's health and well-being, meaning there is *'something'*.

I have learned that observation retains a critical role in subluxation identification and description and that it is entirely appropriate to make inferences from that which is observed. I remain suspicious of those chiropractors who make claims favouring subluxation while offering *'practice-building'* seminars based on those claims; in a previous paper (20) I categorised these people as



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15. Wang S, Li Y, Yue Y, et al. Adherence to Healthy Lifestyle Prior to Infection and Risk of Post-COVID-19 Condition. JAMA Intern Med. 2023 Feb 6. Epub ahead of print. PMID: 36745445. URL <https://pubmed.ncbi.nlm.nih.gov/36745445/>.
16. World Federation of Chiropractic. The Effect of Spinal Adjustment / Manipulation on Immunity and the Immune System: A Rapid Review of the Relevant Literature. Retrieved 3 June 2020 from [https://www.wfc.org/website/images/wfc/Latest\\_News\\_and\\_Features/Spinal\\_Manipulation\\_Immunity\\_Review\\_2020\\_03\\_19.pdf](https://www.wfc.org/website/images/wfc/Latest_News_and_Features/Spinal_Manipulation_Immunity_Review_2020_03_19.pdf).
17. Lincoln D. Quantum Foam. In: Berezow A. Smarter Faster. 23 February 2023. URL [https://bigthink.com/hard-science/nothing-exist-quantum-foam/?utm\\_campaign=weeklynewsletter&utm\\_source=rejoiner&utm\\_medium=email&utm\\_content=02/23/23+Smarter+Faster&rjrid=10XAEMz](https://bigthink.com/hard-science/nothing-exist-quantum-foam/?utm_campaign=weeklynewsletter&utm_source=rejoiner&utm_medium=email&utm_content=02/23/23+Smarter+Faster&rjrid=10XAEMz).
18. Ebrall PS. DD Palmer and the Egyptian Connection: A short report. Asia-Pac Chiropr J. 2020;1:011 URL <https://www.apcj.net/ebrrall-egyptian-palmer-and-subluxation/>.
19. Ebrall P, Bovine G. A history of the idea of subluxation: A review of the medical literature to the 20th Century. J Contemp Chiropr. 2022;5:150-69. URL <https://journal.parker.edu/index.php/jcc/article/download/219/106>.
20. Ebrall P. Changing chiropractic's subluxation rhetoric: Moving on from deniers and vitalists to realists, post-realists, and absurdists. [Revised] Asia-Pac Chiropr J. 2023;3:3. URL [apcj.net/Papers-Issue-3-3/#EbrallRhetoric](https://www.apcj.net/Papers-Issue-3-3/#EbrallRhetoric).



absurdist. I now hold a more attenuated view that groupthink does not amount to intersubjective verification. (21)

I am interested to see where this thinking takes me.

Given that scientific knowledge is the product of a scientific community, I maintain my lament that the discipline of Chiropractic remains sparse with its scientists rarely offering meaningful commentary and interpretations of even the most common-place Chiropractic interventions. The paper by Richards is an outstanding exception, being both a form of historical reportage blended with philosophical meaning. My hope is strong for this *Journal* to educe more writings from the quiet body of Chiropractors who make up the vast majority of the profession.

### Something BIG is brewing

As this issue was readied to 'go live' news came through that Simon Senzon, of *The Institute Chiropractic*, (22) has completed his doctoral thesis, giving the profession yet another chiropractor who has completed a Doctorate by Research in the field of chiropractic. This is an important distinction as the majority of chiropractors who undertake a PhD program do so in side-topics. Senzon's thesis is titled '*Truth, Lies, and Chiropractic*' and we provide a link to it on our [home page](#). There are two files, each rather large, one being the thesis itself and the other the Appendices.

The sheer beauty of his thesis is that the Post-Realists will struggle to understand it. The methodology is a bit uphill even for me, however Senzon describes his philosophical lens, methods, and methodology in punctilious detail. A somewhat large amount of intellectual capacity is needed to interpret Simon's conceptualisation for determining crap papers perpetuating untruths which are then repeated by others without confirmation which is what his thesis boils down to.

The Post-Realists, who to date have bluffed the profession's leadership in general, and the WFC in particular, will not know what has hit them when his papers start emerging, which is sad in a way as it means '*no change*' in WFC's dismissive attitude to the world's Quiet, Conventional Chiropractors.

Senzon's work is out of SCU which has given us the theses on Vitalism by Richards, and on DD's *concepts of tone* by McDowall (both are linked on our home page). McDowall has 2,209 views for his thesis, with over 415 downloads (at 5 March 2023), a remarkable attainment (*Well Done Donald*). It is my understanding that Senzon's thesis may be nominated for the *Chancellor's Award* as an Outstanding Thesis. We will not know whether he is successful or not in receiving this most prestigious honour until our next issue in which I will comment to some extent on his findings.

I repeat the question I asked above, namely '*what are our associations receiving for their spending on chiropractic research?*' To which I answer without hesitation, very little. I call upon the *Australian Chiropractor's Association* to stop frittering member's money on small projects which rarely deliver so much as a peer-reviewed paper. The global profession would be much better off should the AusCA invest \$250,000 a year for 5 years to formalise a global *Chiropractic Research Centre* at SCU, perhaps under the capable leadership of Dennis Richards, a past-President of the WFC and of the CAA.

### Conclusion

#### *what is the good news?*

We have new evidence of the safety of chiropractors in general with the findings of Chu et al. We also have Keating and Amorin-Woods pointing out a gross error in the SCV Report which re-stated the risk of CVI thus:

'There is a significant error of transcription on pages 2 & 25 of the report and the Cochrane Review pages 2 & 35, which state: "These studies reported rates spanning one minor treatment aggravation per 1812 consultations to one cerebrovascular incident in 20,000 visits." The incidence quoted of 1:20,000 should read **1:120,000.**'

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21. Healey R. The quantum revolution in philosophy. Oxford:Oxford University Press. 2017. p. 198.

22. The Institute Chiropractic. Home. URL <https://www.institutechiro.com>.

I cast doubt even on that measure, as Chu et al reported a much lower AE incidence of **0.21:100,000: (0.24:120,000)**

[regarding AEs] '0.21 [mild] per 100,000 SMT sessions (95% CI 0.00, 0.56 per 100,000). There were no AEs related to stroke or cauda equina syndrome'.

We can safely conclude that the call by *once-was-a-minister-Mikakos* was a political attempt to set-up the chiropractic profession which spectacularly failed.

We can also conclude that the *Chiropractic Board of Australia* (CBA) must be held to account for its earnestness in supporting this political set-up and refusal to recant.

The *Journal* is pleased to note the 'call to action' from Australia's peak professional body, the *Australian Chiropractors' Association* (AusCA), has now taken a very strong position to protect the clinical interests of its members. I look forward to AusCA fighting hard and publicly to call the CBA to account and have it remove its impositions and restrictions. We are strongly supportive of the AusCA.

As an aside I acknowledge there is no point in expecting the rather small association *Chiropractic Australia* to do anything as their actions of supplication over many years before the CBA show they are no advocate for Australia's conventional chiropractors; they seem to represent (poorly) an assortment of therapists.

The good news from all of this is that the thinking Chiropractor in Australia now has a very clear idea of who and which body supports them in conventional Chiropractic practice, and those which do not. You also have an abundantly clear position from the peak professional body.

There is also great news for Educators who now have Richard's marvellous paper providing evidence that allows us to confidently refer, with meaning and precision, to the *Palmerian System of Chiropractic*. I really like this, and I like the way in which Richards linked his exposition to that of McDowall regarding Palmer's founding concept of tone.

These two things may not be headline news in the way of the *SCV Report* which now has egg on its public face, but they do support the work of educators as we continue to refine our evidence-based curricular.

And we must do this while keeping one eye open for attempts by evil actors to use AI to infect our discussions. And indeed, for attempts by evil AI to denigrate our profession. I predict this will be our discipline's next battlefield.

Phillip Ebrall

Editor

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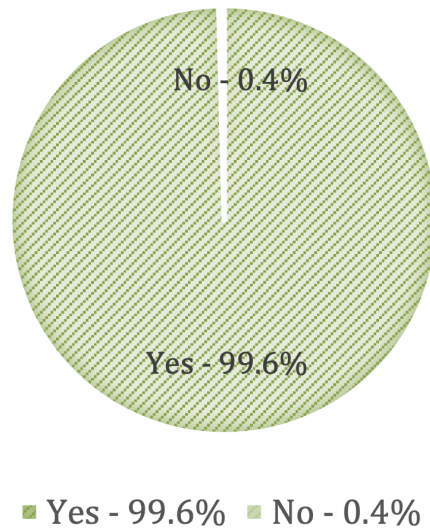
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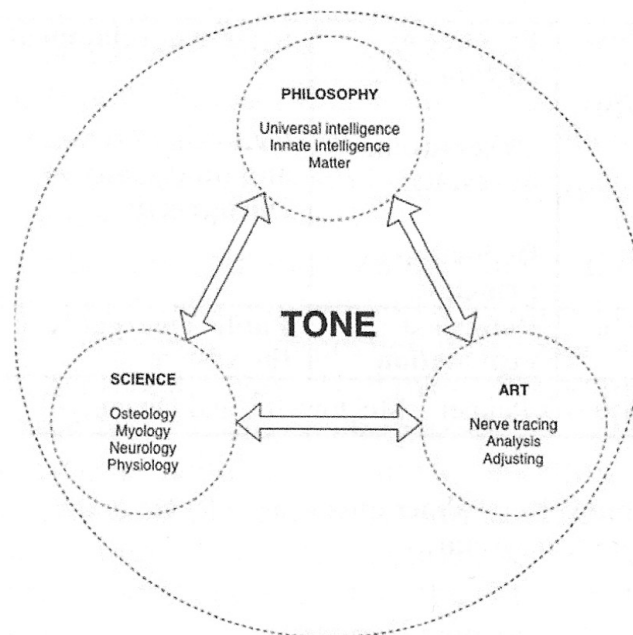
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**This is what matters**  
*and it is good*

## Do children benefit from Chiropractic care? (N= 22,043)



Keating G, Amorin-Woods L. (10) Data from a Government survey of parents who had accessed chiropractic care for their child in the last ten years.



**Figure 1.** Model of the Level 1 Palmerian system of chiropractic

Richards DM, Emmanuel E. (12) Figure 1 from Richards and Emmanuel showing the Palmerian System of Chiropractic.