

Bushfires, blizzards, flooding, tornadoes, COVID, and scammers: Is an amnesty the answer?

Phillip Ebrall

Abstract: Subluxation-centric chiropractic is an effective way to express compassion and there has never been a more important time for all chiropractors to review their interface with their community. People are fatigued and suffering from 3 years of wildfires, floods, and over-reach by Governments in the name of a pandemic.

This editorial calls for a rethink by the profession's representative associations to actually provide leadership and inspiration by producing a position-statement for chiropractors influencing an individual's immune status. Better yet is for such statements to be generated by each country's practitioners to truly represent the discipline as they practice it.

Conventional chiropractors have so much more to offer than is being admitted or promoted by the profession's political factions. It is time this ended and practitioners stood up for their rights as an evidence-based health influencer.

Indexing Terms: chiropractic; compassion; subluxation; health influencer

Editorial

A theme for this editorial emerged during an Appreciation Lunch for a small group of writers who contribute so much to this *Journal*; I am grateful to the ASRF for their kindness. In Melbourne, over the best Indonesian food I have eaten outside Indonesia we agreed unanimously that we were fatigued, exhausted, and could barely keep our focus for the last couple of weeks of 2022.

Australia is a land of fire and flood and in the past 3-years we have suffered both extremes while under the influence of COVID restrictions. Fires swept through most states with unexpected ferocity and then the rains came and floods reached new highs, not record highs but certainly of sufficient depth and breadth to destroy many homes, farms, and indeed lives. We have also seen ferocious wildfires in the USA.

... it is time for conventional chiropractors to stand up as effective health influencers. We can no longer rely on the WFC, WCA, or our local associations to advance the discipline as it is practiced'



It is important to note that the intensity of fires in Australia largely reflects the ideology of the new age environmentalists who prevent sensible forest management which used to rely on regular out-of-season back-burning to reduce the fuel load. Australia is home to the world's oldest peoples, many nations dating back 70,000 years or more. This is a body of wisdom with a knowledge of forest management which we ignore today because the white man knows better; I would not be so sure.

And flooding of entire suburbs and towns should be no surprise when developers have paid for permits obtained from councils (local authorities) to build where they should not, on known flood-plains. In both cases of fire and flood, there is a hidden culpability which I will touch on when I come to the matter of amnesty.

Elsewhere, at the time of finalising this Editorial in late-December 2022, a very large part of the United States was under blizzard conditions and freezing rain storms. Tens of millions of people were under winter storm warnings or advisories and a number had died in the conditions. *Parker University* took the brunt of a storm during the year but their outpatient clinic was largely spared and they were quickly back in the business of educating chiropractors. In the Philippines thousands spent Christmas in Mindanao evacuation centres due to storms. In Japan a number of people are dying from the extreme Winter conditions. We know it is also very cold if not fatally cold in Europe and the UK.

This *Journal's* main thoughts are with the many chiropractors in affected areas around the globe who are not only impacted through physical damage to their practice and a negative impact on patient-flow, but who carry-on with delivering care to what has really become a shell-shocked population. I won't mention the healers in the war-zone of Ukraine because it is too difficult to grasp the vastness of this horror and any words from us could only be superficial.

The *Journal* is grateful to be able to support chiropractic science in Russia and the Ukraine, and as promised earlier we will publish papers in these languages. We make good on this promise in this issue.

The pandemic

There is sufficient evidence now to better inform the positions taken by many chiropractors who insisted on retaining personal freedom of choice with regard to gene therapies sold-for-profit in huge batches to governments in the guise of countering what many consider to have been a man-made bioweapon producing COVID. This is a statement of science and is supported by evidence, whereas any statements about 'why' are from the political realm and do not belong in this publication.

However some chiropractors may remember the WFC's rushed political position (1) debunking any place for chiropractic care in the matter of immunity. They concluded '*there exists no credible, scientific evidence that would permit claims of effectiveness for conferring or enhancing immunity through spinal adjustment/manipulation to be made in communications by chiropractors*'.

In both the UK and the USA some fringe chiropractors lined up to become vaccinators, supported by their local association or regulatory body. *Elsewhere in this issue* I categorise this position as 'post-realist' meaning these people have removed so much of the core premises of the realism of chiropractic that they can only function on their own opinion, a form of eminence-based chiropractic removed from evidence and which is completely unacceptable.

Perhaps the most damning overreach was from those institutions, RMIT University included, which insisted chiropractic students could only continue with their program of study by becoming triple-vaccinated. This impost was in place until recently challenged through due legal process resulting in a withdrawal of the vaccination requirement, but with conditions which can be worked around. I hold the documentation and am bound to keep it confidential, however my statements are factual.

1. The Effect of Spinal Adjustment. Manipulation on Immunity and the Immune System: A Rapid Review of Relevant Literature. World Federation of Chiropractic. 19 March, 2020. URL https://www.wfc.org/website/images/wfc/Latest_News_and_Features/Spinal_Manipulation_Immunity_Review_2020_03_19.pdf.

The most serious question remains, how can any organisation such as a university or an employer, undo forced vaccination should those vaccinations be found dangerous? The fear of legal reprisal seems to be behind the call to extend an amnesty, (2) in other words, to forget it and move on.

No amnesty for malfeasant advice

Instead of a '*get out of jail free*' card in the form of an amnesty, it is preferable to establish formal inquiries into the management of government and industry responses to the pandemic, not so much to accord 'blame' but to identify the weaknesses and create procedures to better protect citizens and employees and students when the next wave arrives.

However on the question of what went wrong in Australia the heads of Victoria's integrity agencies have flagged a '*disturbing*' trend of public servants failing to give impartial advice and being '*economical with the truth*'. (3) Christine Milne, a former leader of the Australian Greens, recently tweeted (4) that '*those at top of the Public Service [have been turned] into a highly paid Ministerial Service. Their contracts depend on delivering what their Ministers want regardless of whether it is lawful or the impacts on people*'. The included video clip of Justin Gregory KC asking about failure to report alleged illegal behaviour within a Government department, of Serena Wilson a former *Deputy Secretary, Social Security, Australian Department of social Services*, is sobering. This comment is reported in this Editorial without bias and is subject to the outcomes of the hearing. There is also the statement of the Victorian *Independent Broad-Based Anti-Corruption Commissioner* that there has been a dramatic increase in the agency's use of closed-door hearings during 2022. (5)

It is clear that the traditional values of governance within a Westminster democracy have gone awry. Should we expect any better when Big Pharma becomes involved to promote its products?

As more information is released about the results of supposed clinical trials and the financial incentives behind mass adoption of potentially unsafe interventions, agencies globally are openly asking '*why?*' and demanding answers to questions of *why* public health officers enthusiastically promoted a range of behaviours that resulted in a locked-down society.

Has there been a global '*economy with the truth?*' If so, how do we handle this? I mention these matters for two reasons directly relevant to the discipline of chiropractic:

1. how well do we understand the health status of those in the communities we serve, and
2. how may we better implement mechanisms to moderate impromptu, ill-informed, reactive positions and '*rapid reviews*' by some of our professional representatives?

With regard to point (2) *now* is the time to determine the discipline's position in each jurisdiction and to back it with evidence. The WFC failed the profession by being acquiescent to the WHO's global narrative. If ever the profession needed a body to stand up for its position it was during this horrific imposition of an ideology completely opposed to the premise of the profession the WFC is funded to represent. As noted above, (1) the best it could do was to issue a poorly performed rapid review antagonistic to core chiropractic principles.

Will the WFC be held to account? No, of course not. Neither will the *World Chiropractic Alliance* (WCA) (6) which was equally negligent in failing to advance support for its members; perhaps it no longer exists. It is no wonder so many small, local groups of clinics are standing up for themselves in

2. Chung F. The Atlantic calls for 'pandemic amnesty' after 'mistakes' during Covid response [News]. 2 November 2022. News.com.au. URL <https://www.news.com.au/lifestyle/health/health-problems/the-atlantic-calls-for-pandemic-amnesty-after-mistakes-during-covid-response/news-story/0028dace290d6cd5dc12500d939c148a>.

3. Kieran Rooney. Victorian Auditor-General Andrew Greaves says some public servants failing to give impartial advice [News]. 7 December 2022. Herald Sun, Melbourne Australia. URL <https://www.heraldsun.com.au/news/victoria/victorian-auditorgeneral-andrew-greaves-say-some-public-servants-are-failing-to-give-impartial-advice/news-story/8e2ac024db19c38e48a7d6f384b12bb9>.

4. Milne C. Tweet. 17 December 2022 at https://twitter.com/ChristineMilne/status/160458901027781504?s=20&t=1xeouH7Za_uA4bdpiuxyBA.

5. Dunlop C, Dowsley A, Rooney K. IBAC's secret witness grillings revealed in report drop [News]. Herald Sun, Melbourne. 20 December 2022. URL <https://www.heraldsun.com.au/news/victoria/ibacs-secret-witness-grillings-revealed-in-report-drop/news-story/2c54276d7534dc190bd88ae6df19bd3a>.

6. World Chiropractic Alliance. URL <https://worldchiropracticalliance.org/>.

the vacuum of global leadership. The profession's national associations should prepare an evidence-based position statement on chiropractic and immunity suited to their country, one that is agreeable to the majority of its members in that country. The WFC can no longer project the European post-realist views on the global profession. Each national association must pick-up this task and dictate policy upwards to the WFC as country-specific to reinforce the role of chiropractors in the broader health of our local communities. Chiropractic is more than pain management, we are health influencers.

Where is the discipline headed?

In this issue we publish a hypothesis that '*Long COVID could be a Risk Factor for Scoliosis Incidence and Exacerbation*'. We have previously published a number of papers describing ways in which a chiropractor may be better able to support the broader health of the people for whom they care; go to '*Past Issues > 2.5 Immunity*' and variously see other issues after that.

This matter takes on greater importance as we reflect on Point (1) above. Our communities are under attack by Big Pharma and a very much 'for profit' medico-industrial complex. In the United States and Canada this is especially destructive to community health. If homeopathy is now 'in the gun' (7) how long before it is chiropractic?

We know that '*continued prescription opioid use among patients with chronic non-cancer spinal pain who received chiropractic care was lower than in patients who did not receive chiropractic care*'. (8) Yet we are mistaken if we limit our understanding to the fact chiropractic has better clinical outcomes in many cases than management by expensive pharmaceuticals. The real issue is that many in our communities can no longer afford their drug regime. (9) So what will you do? You may find some ideas in these two papers. (10, 11)

It would be inane to launch a counter-attack against pharmaceutical management. I would rather see a compassionate outreach to communities in which chiropractors offer a low-cost alternative. Lyndon Amorin-Woods is an exemplar with the outreach services he leads in the Australian state of Western Australia for Murdoch University. (12)

Our response must not be seen as an opportunity to scam the public with multi-visit plans, as happened to a religious person I referred to a clinic run by a former student of mine. I can not see any clinical justification to do a hard sell of 3 visits per week for 9 weeks then ongoing twice-weekly to a portly person-of-the-cloth in her 80s who continues to serve as the Prison Chaplain in the state of Victoria. She needed compassionate care that would help her remain active in her service. The most appalling part of this scam is that my referral specifically asked Dr Tawil's clinic to not do this; I made no comment about charging a fee-for-service although one of my mentors Dr Bruce Ellis of Gisborne Victoria holds a clinic policy of free care for such people.

I am grateful that this patient came back to me, albeit with concern she was unable to pay for the massive plan that she was required to sign-up to. I am grateful I was able to identify another chiropractor close to her home who was also a student of mine and who has since provided care as

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7. Homeopathy Industry Threatened By New FDA Guidance. The Office Of Advocacy, US Small Business Administration. 27 January 2020. URL <https://advocacy.sba.gov/2020/01/27/homeopathy-industry-threatened-by-new-fda-guidance/>.
 8. Emary PC, Brown AL, Oremus M, et al. The association between chiropractic integration in an Ontario community health centre and continued prescription opioid use for chronic non-cancer spinal pain: a sequential explanatory mixed methods study. BMC Health Serv Res. 2022 Nov 3;22(1):1313. DOI 10.1186/s12913-022-08632-9.
 9. Murphy R. The High Prices of Prescription Drugs Are Making Americans Sicker. CNET. 17 December 2022. URL <https://www.cnet.com/personal-finance/the-high-prices-of-prescription-drugs-are-making-americans-sicker/>.
 10. Shobbrook M, Amorin-Woods L, ParkinSmith G. Mitigating the opioid crisis: An Australian perspective on the role of chiropractors (Part 1). Chiropr J Aust. 2020;47(1):4-17. URL <http://www.cjaonline.com.au/index.php/cja/article/view/243>.
 11. ParkinSmith G, Amorin-Woods L, Shobbrook M, et al. Chiropractic and the opioid epidemic - Strategies to mitigate harm and promote evidence-based care (Part 2: Summary). Chiropr J Aust. 2020 ;47(1):18-28. URL <http://www.cjaonline.com.au/index.php/cja/article/view/246>.
 12. Amorin-Woods L. Student perceptions of a clinical placement within a therapeutic community. Chiropr J Aust. 2017 ;45(4):269-87. URL <http://www.cjaonline.com.au/index.php/cja/article/view/174>.

needed and suited to the patient. Does the patient pay? I have no idea and it is not my business. What does matter is that she is now receiving 'compassionate care' and our communities are better for it.

Now more than ever, the ability for a chiropractor to deliver compassionate care is critical to the community each serves. Please talk with your current patients about how your clinic is a '*beacon of hope*' in these tumultuous times, and be prepared to offer compassionate care to meet the needs of many more in your community. See the papers in this issue by [Venning](#) and by [Vincent](#) for empowering ideas on how to improve your communication.

Why an amnesty is an obscene idea

While it is encouraging to note that the *New York Supreme Court* has reinstated all employees fired for being unvaccinated and ordered backpay, this does not alleviate the heartache and trauma experienced by those individuals who followed the basic human right to make their own choice about their health care. As a side-bar I note the *State Supreme Court* found that being vaccinated '*does not*' stop the spread of COVID-19. I also note that the US Senate has passed the *National Defense Authorization Act (NDAA)*, which repeals the Biden administration's military vaccine mandate. (13) The question is now about the hundreds of thousands of others who lost their job and perhaps career by standing up for their rights.

More damning is how we think about those forced to be 'vaccinated' against COVID and died. This is not a conspiracy-style statement, it is based on evidence from reports by coroners. (14, 15, 16) Even in the Philippines the data suggests that adult sudden death syndrome is due to vaccines. (17) We must also consider the '*emotional pain from the uncertainty of government action, the lockdowns, job losses, home schooling on the kitchen table, isolation and loneliness. Not getting to see mums and dads before they died. Not being able to fly home for their funerals. Emotional experiences that stay with us forever.*' (18)

As this editorial was being finalised (late December 2022) a surprise news story broke in Australia. This country's leading 'medic', Dr Kerry Phelps, a former President of the AMA and a person whom we must say has been critical against those who were vocal against the 'vaccine', has now revealed '*devastating*' COVID vaccine injury:

'In an explosive submission to Parliament's Long Covid inquiry, the former Australian Medical Association (AMA) president has broken her silence about the "devastating" experience - emerging as the most prominent public health figure in the country to speak up about the (matter).

"This is an issue that I have witnessed first-hand with my wife who suffered a severe neurological reaction to her first Pfizer vaccine within minutes, including burning face and gums, paraesthesiae, and numb hands and feet, while under observation by myself, another doctor and a registered nurse at the time of immunisation," the 65-year-old said.

"I continue to observe the devastating effects a year-and-a-half later with the addition of fatigue and additional neurological symptoms including nerve pains, altered sense of smell, visual disturbance and musculoskeletal

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13. Moran S. Senate passed defense bill that repeals military coronavirus vaccine mandate [News]. Breitbart. 15 December 2022. URL <https://www.breitbart.com/politics/2022/12/15/senate-passes-defense-bill-repeals-military-coronavirus-vaccine-mandate/>.
 14. Byatt F. Coroner links mum's death at 38 to her having AstraZeneca covid vaccine [News]. Birmingham Live, Birmingham Mail. 11 June 2022. URL <https://www.birminghammail.co.uk/black-country/coroner-links-mums-death-38-24201214>.
 15. Kidd R. Coroner confirms Dunedin death linked to Covid vaccine [News]. Otago Daily Times. 20 December 2022. URL <https://www.odt.co.nz/news/dunedin/health/coroner-confirms-dunedin-death-linked-covid-vaccine>.
 16. Elworthy J. Covid vaccine led to engineer's death says coroner [News]. CAMBS News. 14 December 2022. URL <https://www.cambsnews.co.uk/news/health/covid-vaccine-led-to-engineers-death-says-coroner/5125/>.
 17. Castillo MD, R. Data suggests adult sudden death syndrome is due to vaccines [News]. Lifestyle Inq. 27 June 2022. URL <https://lifestyle.inquirer.net/409269/data-suggests-sudden-adult-death-syndrome-due-to-vaccines/>.
 18. Brogdon J. Patron of Lifeline Australia. In times of desperation help is always at hand. Herald Sun, Melbourne. 15 December 2022. URL https://edition.pagesuite.com/popovers/dynamic_article_popover.aspx?artguid=ada4bbba-61e8-4847-ac43-ee7ab0415bfb.

inflammation. The diagnosis and causation has been confirmed by several specialists who have told me that they have seen 'a lot' of patients in a similar situation." (19)

These are just some of the reasons for this *Journal* opposing an amnesty against those who may have exceeded their authority and perhaps acted illegally to enforce behaviours which have been damaging to society. In this Editorial I have shown that the advice given to Government may not be open and fearless. In Victoria we have witnessed the amazing inability of government decision-makers from the Premier down being unable to 'remember' who made the decisions around an incompetent hotel isolation scheme. They seem to also be unable to remember the circumstances that lead to over 800 deaths in Aged Care facilities in their state.

Nothing short of what is known in the Australian system as a '*Royal Commission*' is needed to get to the truth in these matters. All people must be held accountable for the decisions they made and the results that ensued. There can be no amnesty.

Realists, post-realists, and absurdists

In this issue I have [a paper in the style of philosophy](#) that calls for the discipline to move from a perceived split on the basis of 'vitalists' vs 'deniers' to a position where contributors to the ongoing debate are classified as 'realists' when they use the full lexicon of chiropractic as founded by Palmer and developed by others over 127 years. Of necessity this lexicon includes the idea of subluxation. Those who extract 'subluxation' from their understanding of chiropractic produce rhetoric which I have termed '*post-realism*'. The extremists in both groups of vitalists and deniers are termed '*absurdists*' to include those who make unsubstantiated claims about subluxation or extreme vitalism, equally with those who make unsubstantiated claims about evidence-based practice or extreme denialism.

The paper was published as a '*pre-print*' on a website called [Qeios](#) which uses AI to select persons to review and critique manuscripts. This is actually a form of open peer-review, a process to which this *Journal* is committed. The result is that the reader of the final paper in this masthead is able to go to [Qeios](#) and see the earlier versions and read the review comments.

Mastroiani proposes that traditional peer review is fatally flawed (20) and should be terminated, a view which this *Journal* strongly supports. Its major flaw is that it keeps the comments of peer-reviewers private to the editor. As Editor of this masthead I remain very comfortable with this *Journal's* approach to peer review where every submission is critically reviewed by persons other than me the Editor, while as Editor I retain the final decision to publish or not. To make my decision I am ethically bound to read and understand every submission and the decision I make is dichotomous; I seek an answer to my question of '*does this submission add to the dialogue about chiropractic?*' To this *Journal* and its magnificent team of writers and reviewers, I say a sincere thank you for continuing to deliver and make a difference in such an amazing and timely fashion. Thank you.

Back to the reviews on [Qeios](#). An expressed concern was that I had unilaterally accorded categories of thought (realism, post-realism) to the rhetoric of chiropractic. Objections were raised that these are only my opinion, which they are, and thus are not real, which I debate. I am not sure how chiropractors could ever come to agree on whether or not they are a realist or a post-realist which means I needed to offer these categories with evidence, which I have done, to allow vigorous discussion of them which I want to see published in the open access, indexed chiropractic literature. Regrettably this is a shrinking body of mastheads.

The more disappointing observation is that those I consider post-realists seemed to take this as personal derogation, which it is not. I actually think a chiropractor who uses post-realist rhetoric can

19. Chung F. Dr Kerry Phelps reveals 'devastating' Covid vaccine injury, says doctors have been 'censored' [News]. News Corp. 20 December 2022. URL <https://www.news.com.au/technology/science/human-body/dr-kerry-phelps-reveals-devastating-covid-vaccine-injury-says-doctors-have-been-censored/news-story/0c1fa02818c99a5ff65f5bf852a382cf>.

20. Mastroiani M. The rise and fall of peer review. *Experimental History*. 14 December 2022. URL <https://experimentalhistory.substack.com/p/the-rise-and-fall-of-peer-review>.

be quite pleased with themselves and happy that they write that way. The intent of my paper is to stimulate debate and to move beyond the snide language of 'subluxation deniers' and 'drug pushers' to a more civilised language for which I consider Western philosophy offers some guidance; I chose the path of realism.

As with all decisions of an author in the field of philosophy there will always be another who vehemently disagrees; this is something I welcome as I happen to think that neither of us may be 'right', if there is such a thing as a definitive 'rightness' which I doubt. There is however such a thing as being beyond one's level of competence. One reviewer, who is trained as a chiropractor and has a PhD in epidemiology decided he was qualified to enter a philosophical debate, he is not. Finally, the scam

Writers do not write to be read by others, they are compelled to write by a deep desire to 'say something'. It is a little different for chiropractic academics who are meant to write and publish but rarely do.

On 1 December 2022 I received a polite email inviting me to write an update of my work on Case Reports. For the sake of completeness, the first email came a couple of days earlier and I did not respond in the knowledge it is rare to be invited to write anything. Their follow-up reminded me that the *Journal of Alternative, Complementary & Integrative Medicine* (ISSN: 2470-7562) | DOI: 10.24966/ACIM | NLM ID: 101739460 had an 'Impact Factor' of 1.1.

I happen to believe that Impact Factors are an abject nothingness but the claim of an IF of 1.1 suckered me because my ego overruled my commonsense. The supposed peak journal for the chiropractic profession (JMPT) has an IF of 1.437. (21) In reality these are pathetic metrics; the same site reports an IF of 38.89 for the *British Medical Journal*.

There was some pleasant dialogue between me and Emma for the *Journal of Alternative, Complementary & Integrative Medicine* and I spent 5 days writing a paper in their style specifically addressing their stated objectives for my piece. I submitted well before their due date of 15 December and was promptly accepted on the basis of full review etc etc.

Two things should have alerted me to what was coming, the fact the review was overnight and the only other journal I know which is capable of such rapid processing is this masthead because we created our processes specifically to make this a reality, and the fact that the email invitation ran a previous title of mine together as

'THEVALUEOFCASEREPORTSASCLINICALEVIDENCE'

which I overlooked as possibly being a software error which failed to properly cite my previous work. Idiot.

On confirming acceptance this journal then noted an invoice would be forthcoming and publication would only occur on full payment. I attach the invoice (above) as a warning to others who may be hunted by what is established by their evidence to be a Predatory Journal. Their publication fee of USD1519.00 converted to about AUD2400.

My objection to payment is primarily moral and secondarily ethical. The ethics lie in soliciting a submission without making any mention of the payment that would be required. This is the actual scam and I have embarrassment but not shame that I fell for it.

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	Cheque Payment: Cheque should be in favor of HERALD SCHOLARLY OPEN ACCESS <ul style="list-style-type: none"> Please send the Cheque to: 41891 Fraser Downs Ter, Aldie, VA 20105; Tel: +1 202-499-9679 (This is our financial centre address). 	

21. SCI Journal. Impact factor JMPT. Returned 20 December 2022. URL <https://www.scijournal.org/impact-factor-of-J-MANIP-PHYSIOL-THER.shtml>.

There is also the issue of creating a journal name that is very close to a genuine journal of high repute. (22) It was actually this which confounded me as it seems logical to expand a journal's name to include *Integrative Medicine*. After all, I have published on this topic in the *Japanese Journal of Integrative Medicine* (23) along with other papers. (24, 25)

The morality is about coercion through deceit, which actually speaks more to my moral weakness than that of this tawdry publication that played on my insecurities. I have advised that 'journal', and I use that term loosely, that I would discuss their unconscionable behaviour in this editorial.

The whole matter goes to the question of trust, and this points to the founding tenets of this masthead: we are about Truth, Freedom, and Health. This *Journal* is committed to free open access to all and this *Journal* is committed to publication without author fees in any shape or form. Further, all authors retain copyright to their work and simply allow this *Journal* to publish it on their behalf.

We are committed to publish with minimal editorial intervention. This means that when any of the reviewers of my paper in *Qeios* decide to publish their comments as a paper critical of me then this *Journal* will welcome their work and not censor it in any way except to remove allegations that may land us in court.

Freedom and Truth are non-conditional. Except when lawyers are involved.

Conclusion

In conclusion, I wish all readers and especially our writers and reviewers, a very happy non-denominational, non-sexist, non-binary, happy and safe time as our calendars, subject to their source as Julian, Hebrew, Hijri, Iranian Muslim, Buddhist, Vikram Samvat, Shaka Samvat, Japanese, Chinese, Gregorian, or another I have missed, mark a period in time which at best is illusionary.

Who cares, Happy New Year. It is the thought which counts. May we each find the strength within us to face another year of turmoil.

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22. The Journal of Alternative and Complementary Medicine. Home. URL <https://www.liebertpub.com/loi/acm/>.

23. Ebrall PS, Murakami Y. How to write a well constructed, credible Case Report for Integrative Medicine. Jap J Int Med 2018;11(3):285-91.

24. Ebrall PS, Murakami Y. Do we need a 'new' chiropractic? Or do we already have it? Japanese J Integrative Med. 2016;9:1-5.

25. Ebrall PS, Murakami Y. Chiropractic aims to strengthen education in integrative medicine. Journal of Integrative Medicine Japan. 2015;(2): 75-7.