

Towards truth and trust in the discipline of Chiropractic

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Narrative abstract: A past criticism of the discipline of Chiropractic has been that it is not based on evidence. This claim is spurious yet it has generated a cadre of Chiropractic researchers focussed on publishing sufficient studies to constitute an evidence base. The state of this literature is such that it now allows Systematic Reviews to be undertaken and position papers presented.

However a landmark thesis by Dr Simon Senzon and a finely constructed examination of positions by Oakley and Harrison have collectively found an unacceptable level of literature abuse and misuse by a number of Chiropractic authors. These findings now create a level of untrustworthiness with what is presented by a few as 'evidence-based' positions.

This editorial explores this issue and specifically points to the GCC of the UK which has published eminence-based standards for Chiropractic education which are blatant in their omission of evidence contrary to their agenda.

Indexing terms: Chiropractic; evidence; literature; trust; CBP

Editorial

One thesis (1) pointing to a lack of integrity in sections of the Chiropractic literature can be considered as an interesting finding. When a paper is published (2) which independently carries the same message and specifically with regard to the use of radiography in clinical Chiropractic practice, the findings are more than interesting, they are demanding of our attention. When a third paper is published (3) showing a lack of trustworthiness in the literature of manual medicine regarding manual therapy for non-radicular cervical spine related impairments, it becomes compulsory to ask 'what is going on?'

My previous editorial (4) noted Senzon's recently completed doctoral thesis (PhD) and suggested I would offer detailed comment in this Editorial. As a quick

... one of the 3 pillars of this masthead is 'Truth'. The founding group had some unease with content published elsewhere in the Chiropractic literature and vowed for this Journal to always uphold the truth of Chiropractic. Sadly, the need for us to remain steadfast has never been more ardent ...'

1. Senzon SA. Truth, lies, and Chiropractic. [Thesis]. Southern Cross University, 2023. DOI <https://doi.org/10.25918/thesis.247>.
2. Oakley PA, Harrison DE. Radiophobic Fear-Mongering, Misappropriation of Medical References and Dismissing Relevant Data Forms the False Stance for Advocating Against the Use of Routine and Repeat Radiography in Chiropractic and Manual Therapy. Dose Response. 2021 Feb 11;19(1):1559325820984626. DOI 10.1177/1559325820984626. <https://journals.sagepub.com/doi/pdf/10.1177/1559325820984626>.
3. Riley SP, Shaffer SM, Flowers DW, et al. Manual therapy for non-radicular cervical spine related impairments: establishing a 'Trustworthy' living systematic review and meta-analysis. J Man Manip Ther. 2023 Apr 17:1-15. DOI 10.1080/10669817.2023.2201917. Epub ahead of print. <https://pubmed.ncbi.nlm.nih.gov/37067434/>.
4. Ebrall P. Into the Year of the Rabbit and nothing but good news for Chiropractic. URL Asia-Pac Chiropr J. 2023;3.4. URL apcj.net/Papers-Issue-3-4/#EbrallEditorialApril2023



recap I wrote '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'. (1) Thankfully Senzon will generate a number of papers reporting his findings in detail, however one of his three key points is that 'The Chiropractic identity literature does not functionally fit within science because too many influential papers fail to cogently portray truth, and thus this component of the professional Chiropractic literature does not meet the expectation of a scientific discipline'. (1, p. iii)

Oakley and Harrison (2) are more overt, stating 'activists reiterate common false statements such as "there is no evidence" for biomechanical assessment by X-ray' and proceed to give further specific examples of what can only be considered extremely poor science with a fatal inability to search, interpret and report the literature. The alternative is that these activists are manipulating the literature to advance an agenda of one specific group.

In an earlier paper (5) I have identified such a group as constituting the post-realists within Chiropractic. The danger is when political associations such as the WFC place a reliance on this poor science to justify their work in redefining Chiropractic to supposedly be more politically acceptable. This of course is a euphemism for removing the idea of subluxation from the practice of Chiropractic.

The one thing that Senzon, and Oakley and Harrison, have done is to reveal that a number of papers published within the Chiropractic literature are untrustworthy. However I hasten to add that other professional clinical literature is now also shown to be untrustworthy and I refer to the paper by Riley et al (3) which found that of 35 papers in the field of manual medicine reporting trials of manual therapy involving adults to treat 'non-radicular cervical spine related impairments' only one 'prospectively registered RCT' met the author's 'strict, high-quality standards'. In other words, the findings of most RCTs of manual therapy for this matter can not be trusted. The authors note 'our message may make the reader uncomfortable'.

A philosophy of trust

'Trust is a topic of long-standing philosophical interest because it is indispensable to the success of almost every kind of coordinated human activity, from politics and business to sport and scientific research'. (6) In terms of publication, trust is an essential characteristic defining the quality of a paper. When we as readers gain a sense, or as now shown a knowledge of a covert agenda, we can rightly conclude that in that instance the Chiropractic literature has been manipulated and misquoted for a specific purpose. This is most unhealthy.

Achieving trust is a work-in-progress for any author. I do not know how those authors cited by Senzon, and Oakley and Harrison, whom I classify as 'trust disruptors', will be able to address the questions of trustworthiness now associated with their publications. For a start I would suggest that no invitation be extended for them to speak or publish work now known to be untrustworthy. This *Journal* is fortunate in that it is avoided by the post-realist faction of Chiropractic and we are able to maintain a strong position of trust in what we publish within the context of the realism of Conventional, subluxation-centric Chiropractic.

None of the realists want the discipline of Chiropractic to be a 'Hobbesian war of all against all'. (7) Yet as an educator I often feel that the *General Chiropractic Council* of the UK is waging a war against Conventional Chiropractic using purported standards of educational programs as their weapon. (8) Without speaking for them I can imagine that Oakley and Harrison feel a similar war is being waged against the use of X-rays in Conventional Chiropractic practice, and I take their point that the

5. Ebrall P. Changing Chiropractic's subluxation rhetoric: Moving on from deniers and vitalists to realists, post-realists, and absurdists. URL Asia-Pac Chiropr J. 2022;3.3. URL apcj.net/Papers-Issue-3-3/#EbrallRhetoric.

6. The ethics and epistemology of trust. Internet encyclopaedia of philosophy. Accessed 29 May 2023. <https://iep.utm.edu/trust/>.

7. The philosophy of trust. Faulkner P (Ed), Simpson T (Ed). Oxford University Press. 2 March 2017. <https://doi.org/10.1093/acprof:oso/9780198732549.001.0001>.

8. General Chiropractic Council (GCC). Education Standards with Expectations. March 2023. https://www.gcc-uk.org/assets/downloads/GCC_Education_Standards_with_Expectations.pdf.

weapons in this case include misusing the medical literature to define Chiropractic practice, a distinctly different paradigm of manual spinal care.

It could be argued that students enrolled in any program that adheres to the GCC Standards may have a viable claim for not being sufficiently trained to practice Chiropractic, particularly in those nations which apply ICD coding for subluxation. (9) These codes include:

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| M99.1 Subluxation complex (vertebral) | M99.2 Subluxation stenosis of neural canal |
| M99.10 of head region | M99.20 of head region |
| M99.11 of cervical region | M99.21 of cervical region |
| M99.12 of thoracic region | M99.22 of thoracic region |
| M99.13 of lumbar region | M99.23 of lumbar region |
| M99.14 of sacral region | M99.24 of sacral region |
| M99.15 of pelvic region | M99.25 of pelvic region |
| M99.16 of lower extremity | M99.26 of lower extremity |
| M99.17 of upper extremity | M99.27 of upper extremity |
| M99.18 of rib cage | M99.28 of rib cage |
| M99.19 of abdomen and other regions | M99.29 of abdomen and other regions |

There are further IDC10 codes for other clinical findings, as as the M99.6 series for '*Osseous and subluxation stenosis of intervertebral foramina*'.

Do you care for a 'posture Queen'?

A biomechanically '*correct posture*' is one of those ideas which has underpinned the discipline for many years. This image taken in 1956 of the winners of a '*Posture Queen*' competition at a Chiropractic national conference is from a time long gone; today it is politically incorrect if not sexist and discriminatory to speak of '*Posture Queens*' let alone have a contest which, while having good intent, would only be seen as chauvinistic.



9. ICD10Data.com. Biomechanical lesions, not elsewhere classified M99-. <https://www.icd10data.com/ICD10CM/Codes/M00-M99/M99-M99/M99->

Thankfully the days of the profession relying on publicity stunts, as a 'Posture Queen contest' could only be called, are long gone, and instead the discipline is being advanced by solid research undertaken at the highest level by strong teams of scientists who in turn produce strong outcomes.

Chiropractic Biophysics®

There is no doubt that *Chiropractic BioPhysics Technique* (CBP) and *CBP NonProfit, Inc. - A Spine Research Foundation* in Eagle, ID, are serious about research and gathering then reporting the evidence supportive not just of their clinical approach, which itself is already strongly evidence-based, but also of 'ideas' in Chiropractic that underpin our daily conversations with patients.

The paper '*Alterations in Cervical Nerve Root Function during Different Sitting Positions in Adults with and without Forward Head Posture: A Cross-Sectional Study*' (10) is such a report. It is the type of paper every chiropractor will want to print-out and share with patients (link provided as (10) below).

CBP are to be commended for now directing their formidable resources towards establishing the clinical relationships of a spine with normal curvature. They have produced sufficient evidence to end any questions about the validity and reliability of their approach to technique, and are now well into the stage which a couple of Editors including me have longed for, namely papers of direct clinical relevance to the CBP Technique.

In brief, this paper reports '*statistically significant differences in the cervical nerve root function in all postures between the 'Normal Head Posture' and 'Forward Head Posture' groups ($p < 0.001$), indicating that the NHP and FHP reacted differently in different positions.*' Notably this difference was not seen when subjects were assessed supine, putting the emphasis on a dynamic result associated with sitting. They conclude that '*both the erect and slouched sitting positions were found to have significant differences in nerve root amplitudes between the NHP and FHP groups.*'

In clinical terms this means poor sitting posture with a slouched head is now known to produce altered neural outputs from the C6 and C7 nerve roots. All Chiropractors appreciate the clinical significance of this finding and will know what to assess in a patient with such posture. Naturally the Chiropractor will offer to correct any '*forward head posture*' and while there are many techniques by which to achieve this, the CBP approach has strong evidential basis that it does.

Well done to the CBP group. You can get the paper from the link in the citation; (10) it is, as all clinical papers should be, '*Open Access*' and free to download.

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Cite: Ebrall P. Towards truth and trust in the discipline of Chiropractic. *Asia-Pac Chiropr J.* 2023;4.1. URL apcj.net/Papers-Issue-4-1/#EbrallEditorial2023Q3.

10. Kamel M. Moustafa IM. Kim M, et al. Alterations in Cervical Nerve Root Function during Different Sitting Positions in Adults with and without Forward Head Posture: A Cross-Sectional Study. *J. Clin. Med.* 2023,12,1780. <https://doi.org/10.3390/jcm12051780>.