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THE MENACE OF CHIROPRACTIC

An Outline of Remarks Made by Robert B. Throckmorton, Legal Counsel,  
Iowa Medical Society, at the North Central Medical Conference,  
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I. THE CURRENT CHIROPRACTIC PICTURE.

This is best represented by the two masks of "Comedy" and "Tragedy".

A. THE DARK SIDE.

Following are some of the aspects of the darker side of the picture:

1. The Chiropractic Mind. Chiropractors think, act, and speak in a frame of reference that is entirely foreign to the typical doctor of medicine. This is readily apparent from Chiropractic publications, particularly those sponsored by the "mixers". By way of illustration, I have distributed copies of a brochure published by the National Chiropractic Association. This publication reprints a letter from F. J. L. Blasingame, 1 to Executive Secretaries of constituent and component medical associations, on the subject of "Current Status of Chiropractic" including a questionnaire seeking answers to nine rather innocuous questions. The NCA publication continues with some rather volatile remarks, and then sets forth 38 questions under the heading "Survey of Medicine".

You will note that these questions include the following:

"Do you know of any instances of unqualified medical doctors attempting to give spinal manipulations or chiropractic adjustments to patients? Please state names, dates, places, and other details.

"Please send all information and news releases concerning M.D.'s being charged with malpractice by patients or other adverse medical publicity in your area.

"What are the most common complaints of your patients when they express dissatisfaction with previous ineffective or harmful treatment by M.D.'s?

"How many cases of serious injury or death of patients are the result of drug injections by M.D.'s in your area?

"Do you know of instances of M.D.'s obtaining FREE drug samples from salesmen and later selling them to patients?

"Since the AMA is vigorously opposing National Health Legislation as "socialized medicine", do you feel the NCA and ICA and other related healing professions should cooperate with the AFL-CIO, the American Nurses Association, and the Kennedy administration in endorsing and supporting Health Care Under Social Security and other social legislation?

"Since reportedly the M.D.'s have the highest ratio of drug addicts in their professions of any other group are you aware of many such in your area?

"Do you know of instances where patients have become drug addicts through

2. The Size of Chiropractic. Chiropractic frequently boasts that it is the second largest profession in the healing arts. It claims 25,000 licensed chiropractors which compares with approximately 250,000 doctors of medicine, and 12,500 osteopaths.

3. Number of Chiropractic Schools. At the present time there are approximately 17 Chiropractic schools, as compared with five Colleges of Osteopathy and approximately 85 medical schools.

4. State Licensure. Chiropractors are licensed in all but four states, namely, Massachusetts, New York, Mississippi, and Louisiana.

5. Active Public Relations Program. It is readily apparent from the publications of chiropractors that they are currently placing great emphasis on public relations programs designed to "prove the image" of chiropractic to the public mind. For example, the October, 1959, Issue of McCall's, carried special report entitled "The Case For The Chiropractors!". The Iowa Federationist, a labor newspaper, has carried a series of ads "Published in the public interest by the Chiropractic Profession of Iowa". These institutional ads have attractive art work and contain such messages as "Foundation for Health Your Nerves and What They Do For You"; "'Slipped Disk' Sufferers Find Welco Relief in Chiropractic Care"; "Across the Nation Alert Americans Salute 65 Years of Chiropractic"; "The Modern Chiropractor Has High Professional Standards"; "Health Through Chiropractic - Sciatica Sufferers Find Prompt Relief in Chiropractic Care", and "Chiropractic Health Service Relieves Nervous Tension".

You also may have noticed the new pocketbook publication entitled "Your Head and Chiropractic" which is available at news stands. This is billed as "The Complete, True Story of America's Fastest Growing and Most Controversial Healing Art".

6. The Public Relations Vacuum Left By Medicine. In all but a few states organized medicine has ignored Chiropractic and its effort to create a favorable "image" through its public relations program. This is an unfortunate situation as the public is exposed only to the Chiropractic claims of excellence and accomplishment without having the opportunity to know of the strict legal limitations imposed on Chiropractic practice, the unscientific premise on which Chiropractic is founded and the grossly inferior quality of Chiropractic training and experience. If this vacuum is permitted to continue to exist, medicine is in danger of losing by default the public relations battle initiated by the Chiropractors.

7. Community Activities of Chiropractors. Chiropractors are not as busy as physicians and many of them use their more abundant leisure time to participate in civic and community affairs and establish themselves as accepted citizens. Any status thus achieved is used to exploit chiropractic as a profession deserving of acceptance and recognition by the community.

8. Use of the term "Doctor". It must be recognized that the term "doctor", which traditionally has designated a doctor of medicine, has begun to be applied indiscriminately to other practitioners of the healing arts. There is reason to believe that many chiropractors are happy to be considered "doctors" rather than "Chiropractors", and that many of them aspire to fill the "void" presumably left by those osteopaths who have abandoned their cultism and have limited their practices to scientific principles. Also,

that chiropractors have moved into small communities which have no other practitioners of the healing arts and are advancing the notion that they are "physicians" rather than "chiropractors".

9. Active Recruitment of Students. Chiropractors are well aware of the fact that the continued existence of their profession depends on the recruitment of students in chiropractic schools. These efforts have been stepped up and modernized in recent years.

10. Downgrading of the Medical Profession. The average physician not in "competition" with chiropractors and chooses to ignore them. Chiropractors, on the other hand, consider themselves to be in active "competition" with doctors of medicine and accordingly find occasion to deride or belittle scientific standards, principles and practices in order to raise their own esteem. Moreover, the chiropractic organizations, particularly those sponsored by the "Mixers", are in search of a "whipping boy" that will unite the chiropractic profession. Doctors of medicine in general, and the AMA in particular, are usually selected as the most likely candidate. The medical profession should welcome honest and constructive criticisms; however the type of propaganda so frequently indulged in by chiropractors does harm scientific medicine to some extent and misleads the public to its own detriment.

11. Extolling a False Discredited Dogma. Chiropractic is the foremost cult in the country. Its continued existence for a period of 65 years should cause concern to those interested in scientific medicine and in the protection of the public.

## B. THE BRIGHT SIDE.

1. Chiropractic Factionalism. Chiropractors are divided into two major groups or factions. The "straights" - who limit their practice to manipulations of the spine and other incidental adjustments - and the "mixers" - who are unwilling to be restricted to the basic chiropractic concept and want to "mix" in additional modalities and forms of treatment. The "straights" are represented by the International Chiropractic Association reportedly with 5,400 members, with headquarters at Davenport, Iowa. The "mixers" are represented by the National Association of Chiropractors with headquarters at Webster City, Iowa. B. J. Palmer, son of the founder of Chiropractic, was the moving spirit of the International Chiropractic Association, and was violently opposed to "the mixers". His death, within the past two years, raised the hopes of the "mixers" that the two factions might unite. Although there have been meetings between the two groups, thus far there has been no major step toward unity and the division of chiropractic into the two factions continues.

2. Lack of Uniformity in Definition of Chiropractic Practice. One of the programs of the "mixers" is to establish a uniform definition of chiropractic in all states. They recognized that this would tend to unite and strengthen their profession. The fact that chiropractic is not recognized in four states and that the definition of the practice is restricted and diverse in the remaining states is an obvious source of weakness to chiropractic.

3. Conclusions of the Stanford Report. A 1960 report, entitled "Chiropractic in California" and made by Stanford Research Institute, is

encouraging. This report concludes that there are four characteristics of chiropractic in California as follows:

- "1. The number of chiropractic practitioners and students is declining.
2. Chiropractors, although comprising the second largest group of healers, serve less than one-thirtieth of the market for healing services.
3. There is a high degree of internal dissension among chiropractors.
4. Chiropractic education has not succeeded in obtaining financial support from its own practitioners, from its friends, or from government sources."

The report continues by stating three possibilities as to the future of chiropractic:

- "1. The emergence of the 'straights' as a specialized health field, such as dentistry, or psychiatry.
2. The emergence of the 'mixers' as medical men - 'chiropractic physicians and surgeons'.
3. The general continued decline of chiropractic as a profession in its present form."

The report concludes: "on the basis of this research, the third possibility appears to be the most realistic".

4. Osteopathic Developments. The fact that osteopathy is abandoning its "cultism" is a most encouraging sign. As long as osteopathy and chiropractic both claimed that manipulation and adjustment had special therapeutic and remedial qualities, the uninformed public might very well be led to conclude that doctors of medicine resisted this type of "cultism" for selfish or prideful reasons. However, the capitulation of osteopaths on this specific point is the most persuasive proof possible that medicine has been right in its stand on "cultism" and should be an important factor in persuading the public that chiropractic is wrong.

5. Financial Problems of Chiropractic Schools. The Stanford report states "of the 500 to 600 chiropractic schools that have operated in the United States at one time or another since 1900, only 23 remain". Other sources set the number of schools at 17. Chiropractic schools have been unsuccessful in attracting endowments and public funds and for the most part have had to rely on tuition for financing. This fact, plus the rapidly mounting costs of operating an educational institution, place the existing schools under serious financial pressure. This is a most vulnerable point of the chiropractic profession at the present time.

6. Chiropractic Legislative Programs Unsuccessful. Chiropractors, particularly those of the "mixer" persuasion, have made valiant efforts to promote state and federal legislative changes. The fact that such efforts, in the main, have been unsuccessful is encouraging, but it would be fatal for the medical profession to develop a sense of false security on this account.

7. Recent Judicial Decisions Have Been Unfavorable to Chiropractic  
In the case of the California State Board of Medical Examiners vs. Lightower  
the Los Angeles Superior Court on January 31, 1962, held that a chiropractor  
cannot practice obstetrics. In another California case decided in 1961,  
Crees vs California State Board of Medical Examiners, the Court held that  
licensed chiropractors could not use drugs nor practice obstetrics. A  
California court has also convicted a chiropractor of manslaughter, as I  
recall, for the death of an eight year old cancer victim whom he treated with  
iodine water and vitamin pills.

On May 4, 1962, the New York Supreme Court, in the case of Chiropractic  
Association of New York vs Hillboe, sustained an order by the commissioner  
of public health which banned the use of x-ray equipment by chiropractors.  
It was also established in 1962, in the case of England vs Louisiana State  
Board of Medical Examiners, that the Louisiana Medical Practice Act applied  
to chiropractors and is constitutional.

8. Anti-quackery Activities. Rulings of the Pure Food and Drug  
Administration have outlawed devices used by some chiropractors. Also, the  
stepped up activities of the American Medical Association with regard to  
quackery is encouraging.

## II. WHAT MEDICINE SHOULD DO ABOUT THE CHIROPRACTIC MENACE.

Organized medicine should undertake a more clearly-defined program to  
solve the chiropractic problem. Most of the activities that will be required  
have their local, state and national aspects and therefore call for action  
by the county and state medical societies as well as the American Medical  
Association. I submit the following suggestions for organized medicine at  
all three levels:

### A. Face up to the chiropractic menace as a major problem.

Although organized medicine recognizes chiropractic as a problem, it is  
my own observation that this particular problem is apt to be relegated to  
a subordinate position of importance because of the press of other matters.  
I strongly recommend that organized medicine accept the chiropractic menace  
as a major problem of primary significance to the medical profession and to  
the public.

### B. Form a committee.

I recommend that the AMA, each State Medical Society, and each County  
Medical Society, consider the formation of a special committee on chiropractic.

### C. Obtain information about chiropractic.

The AMA has already assigned staff responsibility on this subject to  
Mr. Ed. Donelan, of the Legal Department, and he has already assembled a  
considerable amount of chiropractic data that should be made available to  
the state and county medical societies, as well as to individual physician  
Medical societies would be well advised to maintain a clipping service on  
chiropractic, and each state medical society should conduct a survey on  
the subject. Obviously, it will not be possible to duplicate the Stanford  
study of "Chiropractic in California" in all states, but the closer this  
ideal can be approximated the better.

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D. Educate physicians on the subject of chiropractic.

To physicians, chiropractic is utterly ridiculous. Consequently, physicians have either ignored or ridiculed chiropractic and let it go at that. This approach may have served a useful purpose in the past, but it is not sufficient for the present day. ~~The public is entitled to have~~ facts, figures and scientific information about this cult and its practices and limitations. The public does and should look to the medical profession for unbiased and authoritative information on this subject. Medicine has not fully met this responsibility. It is time that future physicians are properly informed while in medical school and that practicing physicians be adequately informed through medical society activities and programs.

E. Educate the public on chiropractic.

This, of course, should be done through the usual means of communication such as, newspapers, magazines, television, pamphlets, etc. I am personally skeptical that the McCall's article entitled "The Case For The Chiropractor" was written just because the author thought it would make a fascinating article. I see no reason why similar articles, which, however, would convey the actual facts about chiropractic, could not be "stimulated" for magazine and the press.

Medicine has many natural and well established liaisons with professional groups such as the pharmacists, dentists, hospitals, nurses, nursing homes, etc., as well as many nonprofessional groups. The opportunity exists for informing these groups on this vital subject, and the opportunity should not be missed.

F. Encourage chiropractic disunity.

The chiropractic problem is less acute because of the factionalism of chiropractors into at least two major groups. In my opinion, the "straights" are less of a menace than the "mixers". Any action that prevents the "straights" from being taken over by the "mixers" is desirable.

G. Undertake a positive program of "containment".

Although it would be emotionally satisfying to recommend a bold course of action whereby chiropractic would be eliminated through legislative action, this is not a practical solution to the problem at this time. A more feasible solution, and one that is indicated as being well within the public interest, is to "contain" chiropractic within its present narrow and limited scope. If this program is successfully pursued, it is entirely likely that chiropractic as a profession will "wither on the vine" and the chiropractic menace will die a natural but somewhat undramatic death. This policy of "containment" might well be pursued along the following lines:

1. Insist that chiropractors identify themselves as such.

Iowa law permits physicians, osteopaths, chiropractors, dentists, podiatrists and optometrists to use the term "doctor" but only on condition that the practitioner further identify himself by the letters "M.D.", "D.O.", "D.C.", "D.D.S.", "Podiatrist" or "Optometrist". In addition, Iowa law expressly requires that every chiropractor "shall place upon all signs used by him, and display prominently in his office, the word 'Chiropractor'". Proper enforcement of these laws would

chiropractors who would pose as physicians rather than cultists and limited practitioners.

2. Enforce the chiropractic practice act and other existing laws

No effort has been made by the Iowa Medical Society, in recent years, to compel chiropractors to confine themselves to the narrow scope of the chiropractic practice act, to make certain that the Basic Science Law is being properly administered, to require the Board of Chiropractic Examiners to release more specific information as to those being licensed as chiropractors and to disclose the results of their examinations, and to enforce the legal requirements pertaining to chiropractic schools. A salutary interest in the enforcement of these laws would do much to accomplish a policy of "containment" without requiring the enactment of additional legislation.

3. Enforcement of Pure Food and Drug Laws.

Each State, through the State Department of Health, the Board of Medical Examiners, the State Medical Society, or some other agency, should undertake sufficient investigational activity to uncover violations of existing state laws, as well as existing federal laws. A proper enforcement of the Federal Pure Food and Drug Laws will eliminate many of the "gadgets" and machines used by chiropractors in their practice.

4. Encourage ethical complaints against chiropractors.

State laws customarily provide that professional licenses may be revoked for "unprofessional conduct" and for other specified reasons. Most of these laws apply to chiropractic licenses. In addition, the chiropractic organizations have some ethical rules and requirements. I recommend that ethical and professional violations be called to the attention of the state board of chiropractic examiners for action in the first instance. This would have the salutary effect of letting chiropractors know they were under surveillance and, in some states at least, the board of chiropractic examiners could be counted on to take the proper action. If satisfactory action is not forthcoming, it would be advisable in many instances to take the matter into court, or pursue it through the State Department of Health.

5. Oppose chiropractic inroads in health insurance.

A recent Wall Street Journal article states "All told, more than 500 health insurance companies now recognize chiropractic, up from 200 only seven years ago. The number continues to mount steadily". In my judgment this "advance" has been made possible in large part because of the inertia of organized medicine.

6. Oppose chiropractic inroads in workmen's compensation.

Chiropractors are making a determined effort to obtain a larger share of Workmen's Compensation cases. These efforts can and should be resisted through suitable cooperation of medicine with industrial commissions, employer's organizations and labor unions.

AMA 00137

7. Oppose chiropractic inroads into labor unions.

Another objective of chiropractic is to obtain greater acceptance on the part of organized labor. Medicine would be well advised to face this problem squarely and to undertake the necessary steps to solve it.

8. Oppose chiropractic inroads into hospitals.

In general, chiropractors have not been successful in establishing hospitals or gaining admission into existing hospitals. However, this area of activity should be carefully guarded, as hospitalization of patients by chiropractors would give a status and prestige to chiropractic that is neither necessary nor desirable.

9. Contain chiropractic schools.

The Stanford report, "Chiropractic in California", makes it clear that chiropractic schools in California are having serious financial problems. Any successful policy of "containment" of chiropractic, must necessarily be directed at the schools. To the extent that these financial problems continue or multiply, and to the extent that the schools are unsuccessful in their recruiting programs, the chiropractic menace of the future will be reduced and possibly eliminated.

H. Maintain a strong legislative position.

In general, medicine has been successful in resisting the efforts of the chiropractic profession to enhance its position through legislation. These defensive legislative programs should be continued and intensified.

Whether an "offensive" legislative program should be undertaken against chiropractic should be determined by each state medical society in the light of all the circumstances prevailing. Such a positive legislative program might include more demanding legislation with regard to chiropractic schools, the elimination of x-ray by chiropractors, and the enactment of or tightening of existing basic science laws. A program of this type is apt to be misconstrued by the public and by legislators unless a proper educational program as to the menace of chiropractic has first been instituted.

III. CONCLUSIONS.

- A. Chiropractors pose a threat to the public and to scientific medicine
- B. The unification of chiropractors into a single group would increase this threat, particularly if the "mixer" concept should prevail.
- C. The "mixers" may achieve their goal of emerging as "medical men" if organized medicine remains apathetic to this problem.
- D. Any action undertaken by the medical profession should be directed toward:
  1. Education of the profession and the public.
  2. "Containment" of the chiropractic profession.
  3. The stifling of chiropractic schools.

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- D. Action taken by the medical profession should be firm, persistent and in good taste.
1. Behind the scenes whenever possible.
  2. In attacking "cultism" in general, organized medicine need not be reticent in proclaiming the fact that chiropractic is the primary target.
  3. Never give professional recognition to chiropractors.
  4. Action should be directed against chiropractic as a cult not against chiropractors as persons - "Hate the sin but love the sinner".
- E. A successful program of containment will result in the decline of chiropractic.

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