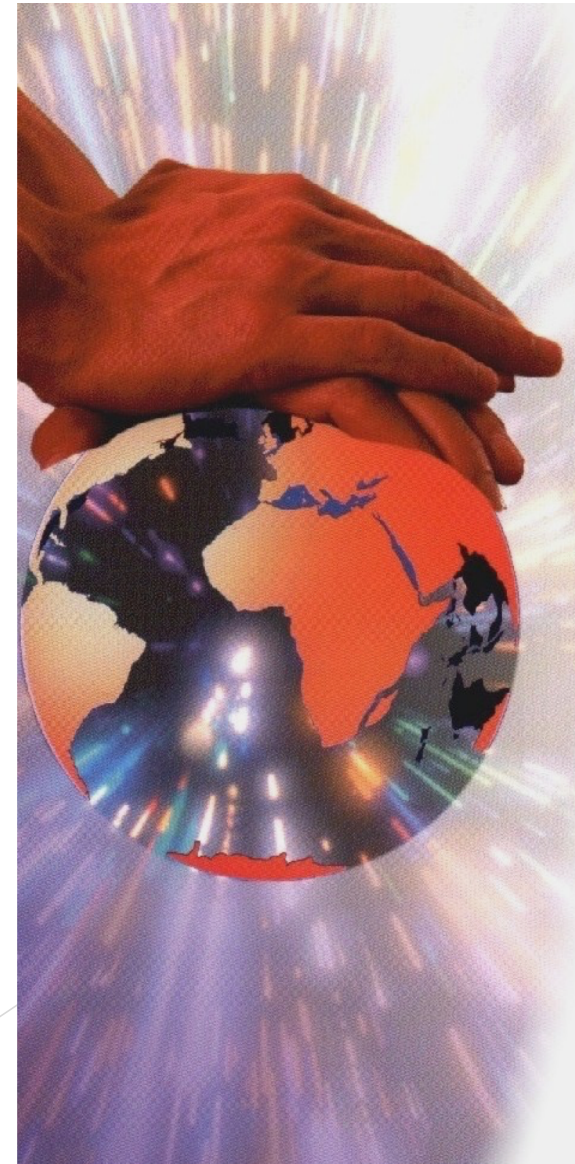




International Chiropractors Association

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Are You Aware ? U S Chiropractic is Being Attacked From Outside the United States?

Dynamic Chiropractic

COVER STORY

WFC RESEARCH COUNCIL IN HOT WATER WITH ICA

*ICA files formal complaint
against council for anti-
philosophical behavior.*

BY EDITORIAL STAFF





WFC Complaint

**What was said in Berlin about
subluxation oriented DCs?**

**“... they have long advocated for the
continued necessity of radiographs for
the purpose of identifying vertebral
subluxations, *or whatever they
imagine they are treating...*”**

Member of the WFC Research Council



Are You Aware ?

U S Chiropractic is Being Attacked From Outside the United States?

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Chiropractic & Manual Therapies

DEBATE

Open Access

Chiropractic, one big unhappy family: better together or apart?



Charlotte Leboeuf-Ribe¹, Stanley L. Innes^{2*}, Kenneth J. Young³, Gregory Neil Kavchuk⁴ and Jan Hultigren^{5†}

Abstract

Background: The chiropractic profession has a long history of internal conflict. Today, the division is between the evidence-friendly faction that focuses on musculoskeletal problems based on a contemporary and evidence-based paradigm, and the 'traditional' group that subscribes to concepts such as 'subluxation' and the spine as the centre of good health. This difference is becoming increasingly obvious and problematic from both within and outside of the profession in light of the general acceptance of evidence-based practice as the basis for health care. Because this is an issue with many factors to consider, we decided to illustrate it with an analogy. We aimed to examine the chiropractic profession from the perspective of an unhappy marriage by defining key elements in happy and unhappy marriages and by identifying factors that may determine why couples stay together or split up.

Main body: We argue here that the situation within the chiropractic profession as regards very much to that of an unhappy couple that stay together for reasons that are unconnected with love or even mutual respect. We also contend that the profession could be conceptualised as existing on a spectrum with the 'evidence-friendly' and the 'traditional' groups inhabiting the end points, with the majority of chiropractors in the middle. This middle group does not appear to be greatly concerned with either faction and seems comfortable taking an approach of 'you never know who and what will respond to spinal manipulation'. We believe that this 'mere majority' makes it possible for groups of chiropractors to practice outside the logical framework of today's scientific concepts.

Conclusion: There is a need to pause and consider if the many reasons for disharmony within the chiropractic profession are, in fact, irreconcilable. It is time to squarely debate the issue of a professional split by engaging in formal and courageous discussions. This item should be prioritised on the agenda of national associations, conferences, teaching institutions, and licensing/legislation as well as accreditation bodies. However, for this to happen, the middle group of chiropractors will have to become engaged and consider the benefits and risks of respectively staying together or breaking up.

Keywords: Allied health, Attitude of health personnel, Chiropractic, Professionalism, Social perception, Trends

Background

Health care is becoming increasingly evidence-based. Over the past decades, governments, society and patients have an increasing expectation of an evidence-based approach to health care and as the knowledge base has become larger and more widely accepted, the space available for alternative modalities has become smaller [1–4]. This has resulted in a greater contrast between mainstream and fringe medicine. Also, in the musculoskeletal area there are now different demands on indications for treatment and positive outcomes than what was seen only

a few decades ago [5]. Increasingly legislation is being brought to bear to enforce such approaches. Chiropractors have for many years balanced at the crossroads between mainstream and alternative medicine, with this development posing particular challenges for chiropractic organisations, who have tried to cater for both [6–8]. Although chiropractors, officially, are part of the evidence-based movement in relation to musculoskeletal problems, we were late adopters, and some are not prepared to adopt this approach at all.

The consequences for chiropractors

To the public, chiropractors are known to be 'back pain doctors' [9–12]. This is potentially a 'good' niche,

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Chiropractic & Manual Therapies

RESEARCH

Open Access

Chiropractic conservatism and the ability to determine contra-indications, non-indications, and indications to chiropractic care: a cross-sectional survey of chiropractic students

Gullacme Goncalves^{1,2*}, Marine Demerutis^{1,2,3}, Charlotte Labouf-Yde^{1,2,4} and Hårik Wedderkopp⁴

Abstract

Background: While there is a broad spectrum of practice within chiropractic two sub-types can be identified, those who focus on musculoskeletal problems and those who treat also non-musculoskeletal problems. The latter group may adhere to the old conservative 'subluxation' model. The main goal of this study is to determine if chiropractic students with such conservative opinions are likely to have a different approach to determine contra-indications, non-indications and indications to chiropractic treatment versus those without such opinions.

Method: An anonymous and voluntary survey on 3rd to 6th year French chiropractic students was conducted between November 2017 and January 2018. Level of chiropractic conservatism (10 items) and the ability to determine contra-indications (2 cases), non-indications (4 cases) and indications (3 cases) were evaluated through a questionnaire. Answers to these cases were dichotomized into 'appropriate' and 'inappropriate' answers, as defined by previous research teams and the present team. The level of conservatism was classified into four groups (group 4) corresponding to the highest score. Descriptive data are provided, and bi- and multivariate analyses were performed through logistic regression to test the associations between the level of conservatism and the ability to determine the suitability of chiropractic treatment.

Results: In all, 209 of 536 (39%) students responded to the questionnaire. They generally recognized a number of contra-indications and indications to treatment. However, they found it more difficult to identify non-indications. The more conservative students were more likely to intend to treat their patients, even if this was indicated (non-indications). For example, those who were most conservative (group 4) were much more willing than those in group 1 to treat 'chiropractically' a 5-year-old child with no history of back pain or disease to prevent future back pain (OR = 14.7) and also to prevent non-musculoskeletal disease (OR = 22).

Conclusion: It is concerning that students who adhere to the subluxation model are prepared to 'operationalize' their conservative opinions in their future scope of practice, apparently willing to treat asymptomatic people with chiropractic adjustments. The determinants of this phenomenon need to be understood.

Keywords: Chiropractic students, Conservatism, Subluxation, Contra-indications, Non-indications, Indications, Survey

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Are You Aware ?

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Are You Aware ? U S Chiropractic is Being Attacked From Outside the United States?

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Chiropractic &
Manual Therapies

RESEARCH

Open Access



A perspective on Chiropractic Councils on Education accreditation standards and processes from the inside: a narrative description of expert opinion, part 1: Themes

Stanley L Innes^{1*}, Vicki Cope¹, Charlotte Lebonouf-Yde^{1,2} and Bruce F. Walker¹

Abstract

Background: The aim of this study was to report on key informant opinions of Councils on Chiropractic Education (CCE) regarding recent research findings reporting on improving accreditation standards and processes for chiropractic programs (CPs).

Methods: This qualitative study employed in-depth semi-structured interviews with key experienced personnel from the five CCEs in June and July of 2018. The interviews consisted of open-ended questions on a range of issues surrounding accreditation, graduate competency standards and processes. All interviews were audio-recorded and transcribed verbatim. The transcripts were analysed to develop codes and themes using thematic analysis techniques assisted by NVivo coding software. The study followed the COREQ guidelines for qualitative studies.

Results: Six themes were isolated from the interview transcripts; they were: professional differences; keep it in the family; to focus on outcomes or be prescriptive; more resources please; inter-profession integration; and CPs making ends meet. Most respondents saw a need for CCEs standards and processes to improve interdisciplinarity while at the same time preserving the 'uniqueness' of chiropractic. Additionally, informants viewed CCEs as carrying out their functions with limited resources while simultaneously dealing with vocal disparate interest groups. Diverse views were observed on how CCEs should go about their business of assessing chiropractic programs for accreditation and re-accreditation.

Conclusions: An overarching confounder for positive changes in CCE accreditation standards and processes is the inability to clearly define basic and fundamental terms such as 'chiropractic' and its resultant scope of practice. This is said to be because of vocal, diverse and disparate interest groups within the chiropractic profession. Silence or nebulous definitions negotiated in order to allow a diversity of chiropractic practice to co-exist, appears to have complicated and hindered the activities of CCEs. Recommendations are made including an adoption of an evidence-based approach to accreditation standards and processes and the use of expertise from other health professions. Further, the focus of attention should be moved away from professional interests and toward that of protection of the public and the patient.

Keywords: Accreditation, Chiropractic, Competence, Qualitative

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Chiropractic &
Manual Therapy

RESEARCH

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A perspective on Councils on Chiropractic Education accreditation standards and processes from the inside: a narrative description of expert opinion, part 2: Analyses of particular responses to research findings

Stanley L. Innes^{1*}, Vicki Cope¹, Charlotte Leboeuf-Yde^{1,2} and Bruce F. Walker¹

Abstract

Background: This is the second article reporting on a study that sought the views of people with extensive experience in Councils on Chiropractic Education (CCE) on research that has raised concerns about variability in accreditation standards and processes for chiropractic programs (CPs) and chiropractic practice in general.

Methods: This qualitative study employed in-depth semi-structured interviews that consisted of open-ended questions asking experts about their thoughts and views on a range of issues surrounding accreditation, graduate competency standards and processes. The interviews were audio-recorded, and transcribed verbatim in June and July of 2018. The transcripts were reviewed to develop codes and themes. The study followed the COREQ guidelines for qualitative studies.

Results: The interviews revealed that these CCE experts were able to discern positive and negative elements of the accreditation standards and processes. They were, in general, satisfied with CCEs accreditation standards, graduating competencies, and site inspection processes. Most respondents believed that it was not possible to implement an identical set of international accreditation standards because of cultural and jurisdictional differences. This was thought more likely to be achieved if based on the notion of equivalence. Also, they expressed positive views toward an evidence-based CP curriculum and an outcomes-based assessment of student learning. However, they expressed concerns that an evidence-based approach may result in the overlooking of the clinician's experience. Diverse views were found on the presence of vitalism in CPs. These ranged from thinking vitalism should only be taught in an historical context; it was only a minority who held this view and therefore an insignificant issue. Finally, that CCEs should not regulate these personal beliefs, as this was potentially censorship. The notable absence was that the participants omitted any mention of the implications for patient safety, values and outcomes.

Conclusions: Expert opinions lead us to conclude that CCEs should embrace and pursue the widely accepted mainstream healthcare standards of an evidence-based approach and place the interests of the patient above that of the profession. Recommendations are made to this end with the intent of improving CCE standards and processes of accreditation.

Keywords: Accreditation, Chiropractic, Competency, Qualitative, Council on chiropractic education, Vitalism

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Are You Aware ?

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Chiropractic &
Manual Therapies

REVIEW

Open Access

The schism in chiropractic through the eyes of a 1st year chiropractic student

Bob Strahjnevich^{1*} and J. Keith Simpson²



Abstract

Since its inception, the chiropractic profession has been divided along ideological fault lines. These divisions have led to a profession wide schism, which has limited mainstream acceptance, utilization, social authority and integration. The authors explore the historical origins of this schism, taking time to consider historical context, religiosity, perpetuating factors, logical fallacies and siege mentality. Evidence is then provided for a way forward, based on the positioning of chiropractors as mainstream partners in health care.

Keywords: Chiropractic, Status of profession, Future trends, Vitalism, Biopsychosocial model, Organicism, Holism

Background

Asking a deceptively simple question such as what is chiropractic inevitably results in a complex answer. Perhaps at the very core of this complexity is the fact that chiropractic is a divided profession, plagued by internal and external conflicts.

Internally, the divergences have manifested themselves as an identity struggle, with many chiropractors seeking a moderate, evidence based position while others strive to retain vitalistic ideas [1, 2]. The disparity between these groups has divided the profession and limited risks taken from both the scientific community [3] and the public at large [4]. Additionally, disagreements around scope of practice [5], vocabulary [6] and ethics [7] have negatively affected public opinion [8], cultural authority [6, 9] and inter-professional relations [8]. Externally chiropractic has been embroiled in conflict with political medicine practically since chiropractic was 'discovered' in 1895 [6].

Over several decades, researchers have sought to determine the origins of these conflicts [10–13] and offered solutions [6, 14–17]. Condensed to simplest principles, the division reflects a deep ideological gulf which has historically been described as the schism between 'mixers and straighties' with a cooptance or rejection of treatment modalities other than 'the adjustment' as

the dividing point [1, 10, 11, 18]. This however is an overly simplistic and patently misleading understanding.

Phillips framed the schism more accurately and succinctly around 'beliefs and questioners': those who believe the foundational vitalistic premises of Innate Intelligence (II) and Universal Intelligence (UI) should act as the guiding light of chiropractic versus those who question the relevance of basing patient care on unverifiable, a-priori assumptions and importantly, the role that science plays in both factions. For believers science is explanatory whereby science will prove what believers know. That is, 'beliefs are based on evidence derived from observations that support the universal, the Major Premise'. This is in contrast to questioners for whom science is investigatory – 'a search for understanding and clarification of what it is that chiropractors do, and determine if it is effective'. [19] p4.

Unfortunately, entrenched ideologies, based on a misunderstanding of science and motivated in the fear of losing a 'unique and distinct' (from all things medical) identity [20] have prevented chiropractic from fully uniting and moving forward. Ultimately, progress can only come about from a shared, scientifically sound vision.

This paper had its origin as an essay assignment by a first year chiropractic student (BS). This expanded version of the essay will review the historical origins of the schism in chiropractic (schism) and examine the influence the schism has had on the profession. It will consider the many reasons that the schism has persisted for

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Chiropractic &
Manual Therapies

RESEARCH

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The prevalence of the term subluxation in chiropractic degree program curricula throughout the world

Matthew F. Funk^{1*}, Aric J. Frisna-Deyo¹, Timothy A. Mirtz² and Stephen M. Perle^{1,3}

Abstract

Background: The subluxation construct generates debate within and outside the profession. The International Chiropractic Education Collaboration, comprised of 10 chiropractic programs outside of North America, stated they will only teach subluxation in a historical context. This research sought to determine how many chiropractic institutions worldwide still use the term in their curricula and to expand upon the previous work of Mirtz & Perle.

Methods: Forty-six chiropractic programs, 18 United States (US) and 28 non-US, were identified from the World Federation of Chiropractic Educational Institutions list. Websites were searched by multiple researchers for curricular information September 2016–September 2017. Some data were not available on line, so email requests were made for additional information. Two institutions provided additional information. The total number of mentions of subluxation in course titles, technique course (Tech) descriptions, principles and practice (PP) descriptions, and other course descriptions were reported separately for US and non-US institutions. Means for each category were calculated. The number of course titles and descriptions using subluxation was divided by the total number of courses for each institution and reported as percentages.

Results: Means for use of subluxation by US institutions were: Total course titles = .44; Tech = 3.83; PP = 1.50; other = 1.16. For non-US institutions, means were: Total course titles = .07; Tech = 2.7; PP = .44; other = 0. The mean total number of mentions was 694 in US vs. 683 in non-US institutions. Similarly, the mean course descriptions was 650 in US vs. 672 in non-US institutions.

Conclusions: The term subluxation was found in all but two US course catalogues. The use of subluxation in US courses rose from a mean of 5.53 in 2011 to 6.50 in 2017. US institutions use the term significantly more frequently than non-US. Possible reasons for this were discussed. Unscientific terms and concepts should have no place in modern education, except perhaps in historical context. Unless these outdated concepts are rejected, the chiropractic profession and individual chiropractors will likely continue to face difficulties integrating with established health care systems and attaining cultural authority as experts in conservative neuro-musculoskeletal health care.

Keywords: Chiropractic, Professional education, Curriculum, Philosophy, Accreditation, Licensure, Evidence-based practice

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Archives of Physiotherapy

RESEARCH ARTICLE

Open Access

The “subluxation” issue: an analysis of chiropractic clinic websites



Alexandro R. Marcon, Blake Murdoch and Timothy Caulfield*

Abstract

Background: Vertebral subluxation theories are controversial in chiropractic. Divisions are evident in the chiropractic community among those who align their practices to subluxation theories and those who do not. This study investigated how many clinics offering chiropractic in the Canadian province of Alberta promote a theory of subluxation, which health ailments or improvements were linked to subluxation, and whether the subluxation discourse was used to promote chiropractic for particular demographics.

Methods: Using the search engine on the Canadian Chiropractic Association's website, we made a list of all clinics in Alberta. We then used Google searches to obtain a URL for each clinic with a website, totaling 124 URLs for 369 clinics. We then searched on each website for “subluxation” and performed content analysis on the related content.

Results: One hundred twenty-one clinics (33%) presented a theory of vertebral subluxation. The health ailments and improvements discussed in relation to subluxation were wide ranging. An observed trend was the marketing of chiropractic for children, which was observed on 29 clinic websites (8%).

Conclusions: Based on the controversy surrounding vertebral subluxation, the substantial number of clinic websites aligning their practice with vertebral subluxation should cause concern for regulatory bodies.

Keywords: Chiropractic, Subluxation, Websites, Marketing, Regulation

Background

The concept of vertebral subluxation – also called chiropractic subluxation or the vertebral subluxation complex – remains controversial, even within the chiropractic community [1–5]. The theory of vertebral subluxation, originally posited by D.D. Palmer at the turn of the century, has played a central role in the development of the practice of chiropractic [1, 5]. However, a considerable amount of research and commentary – often produced by the chiropractic community – has highlighted that there is no science to support the concept of vertebral subluxation [1–4, 6]. The concept is essentially implausible, and there is no evidence to support the idea that it is associated with any ailment or the promotion of general health [1–5]. As such, in some jurisdictions, chiropractic organizations have taken a stand against vertebral subluxation. In 2010, for example, the General Chiropractic Council in the UK stated, “The chiropractic vertebral subluxation complex is an historical

concept but it remains a theoretical model. It is not supported by any clinical research evidence that would allow claims to be made that it is the cause of disease” [7]. Similarly, in 2015, various international bodies, including chiropractic schools, put forward a position statement that declared “the teaching of vertebral subluxation complex as a etiologic construct that claims that it is the cause of disease is unsupported by evidence. Its inclusion in a modern chiropractic curriculum in anything other than an historical context is therefore inappropriate and unnecessary” [8]. The Alberta College and Association of Chiropractors’ 2018 position statement on the “Definition of Subluxation” makes no reference to vertebral subluxation but states that “the ACAC acknowledges and understands that the definition of a chiropractic subluxation may be ‘different from the current medical definition, in which subluxation is a significant structural displacement, and therefore visible on static imaging studies’” [9].

Indeed, divisions are evident among chiropractors over the role of subluxation and its related health problems [1, 5, 10]. The chiropractic community differs greatly in

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What Is The Common Theme of These Papers?



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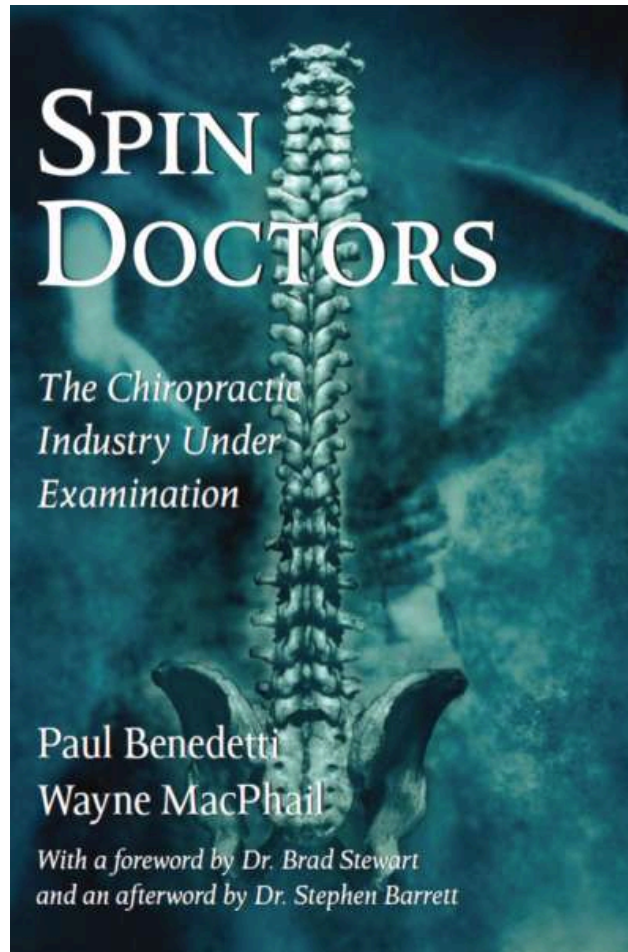
What Is The Common Theme of These Papers?

**Subluxation-Based Chiropractic
vs
Evidence-Based Chiropractic**

**Science
vs
Pseudoscience**



WHY?





Who is Paul Benedetti?

Paul Benedetti is an award-winning journalist, author, and writer. His essays have appeared in the *Globe and Mail*, *Canadian Living*, *Reader's Digest*, and regularly in the *Hamilton Spectator*, where he has a widely read Saturday column. He has won the Ontario Newspaper Award for Humour Writing and Canada's National Newspaper Award for Best Short Feature, and he teaches journalism at the University of Western Ontario. Paul lives in Hamilton, Ontario.



Green Shield Canada Podcast

April 10, 2019

“Some chiropractors feel that there is a neurological benefit from a chiropractic adjustment that is not simply MSK, and that opens the door to all kinds of treatments, because as soon as you creek that door open, then you are back to D.D. Palmer. Then you are back to the idea that there is a relationship between spinal adjustment and visceral disorders and that gives license to a scope of practice that is all encompassing.”

*Paul Benedetti,
University of Western Ontario
Co-Author of Spin Doctors: The Chiropractic Industry Under Examination*



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RYAN ARMSTRONG
EXECUTIVE DIRECTOR



Ryan became interested in science activism after encountering unscrupulous claims by regulated health professionals who offered implausible therapies to vulnerable patients. Initially interested in science education and communication as a PhD student, he shifted his focus to science justice after witnessing the harm of pseudoscience as a tool to de-educate the public for profit. As the Executive Director, Ryan hopes to mobilize passionate science advocates to work for stronger and smarter science-based regulations that protect the public from false claims and dangerous therapies.



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Bad Science Watch is an independent non-profit consumer protection watchdog and science advocacy organization dedicated to improving the lives of Canadians by countering bad science. We are driven by a vision of a safer, healthier, and more prosperous Canada where critical thinking and sound science are paramount in the making of important societal decisions.



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What constitutes “bad science”?

Bad science comes in the form of the media’s frequent misreporting and exaggeration of the results of scientific studies; laws and regulations being devised based on selective interpretation of data; and even plain fabrication and fraud in advertising and industry. Bad science (sometimes called “pseudoscience”) also describes claims that are made using scientific jargon or presented as being scientific, but in reality lack support and plausibility or are untestable.



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We Fought This Battle in the U.S Over 30 years ago...

NOW WHAT?

Contain vs Eliminate



Which is Best for Chiropractic? Every Organization Existing in Its Own Small Tent?





Or Coming Together? In One Big Tent





Let Me Introduce You to...

The ICA



Our Vision Statement

To empower humanity in the expression of maximum health, wellness, and human potential through universal chiropractic expression and utilization.



Our Mission Statement

To protect and promote chiropractic throughout the world as a distinct health care profession predicated upon its unique philosophy, science, and art of subluxation detection and correction.



Our Value Statements

Respect:

We acknowledge and honor the diverse perspectives and approaches in the practice of chiropractic and in promoting health, healing, and well-being. We pledge to conduct ourselves with kindness, compassion, direct and honest communication.



Our Value Statements

Equitability:

We advocate for a healthcare system that is just, fair, and free from discrimination. We believe that all people should have equal access to services that promote health and wellbeing, including chiropractic care. We support the inclusion of all licensed health providers that are practicing within the scope and standards of their profession and advocate for compensation that is commensurate and fair for services provided.



Our Value Statements

Empowerment:

We advocate for a health care system that gives people control of their own health and health promoting practices. We foster the development of health promoting capacity in individuals, organizations and health professions through education, knowledge and information, advocacy, access, communication, and collaboration.



Our Value Statements Collaboration:

We are dedicated to working in respectful dialogue and supportive partnership with others to address the needs of individuals and society for better health and healthcare systems.



Our Value Statements Transparency:

We act in a way that is easy for others to see what we are doing and why we are doing it. We make available full information required for collaboration, cooperation, and collective decision making.



**Our Practices are Scientific
and Evidence-Based**

Vertebral Subluxation Correction

The Utilization of X-rays

Pediatric Adjustments



ICA Commitments

Chiropractic Practice is
NOT just
Musculoskeletal....
It **IS**
Neuromusculoskeletal



ICA Commitments

**Subluxation-Based
Chiropractic Practice
IS
Scientific
and
Evidence-Based**



The ICA Affiliation Program

If you want to support the International effort to counter the announced targeting of chiropractic as practiced by the majority of chiropractors around the world , all interested associations are invited to affiliate with the ICA.



Join us in the Big Tent

INTERNATIONAL CHIROPRACTORS ASSOCIATION (ICA)

Mission, Vision and Values
[Affiliation Agreement](#)



**Bringing Chiropractic
to the
World**

Thank You

