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If after reading the booklet you are interested in obtaining copies, you will find the appropriate information at the end of this letter.

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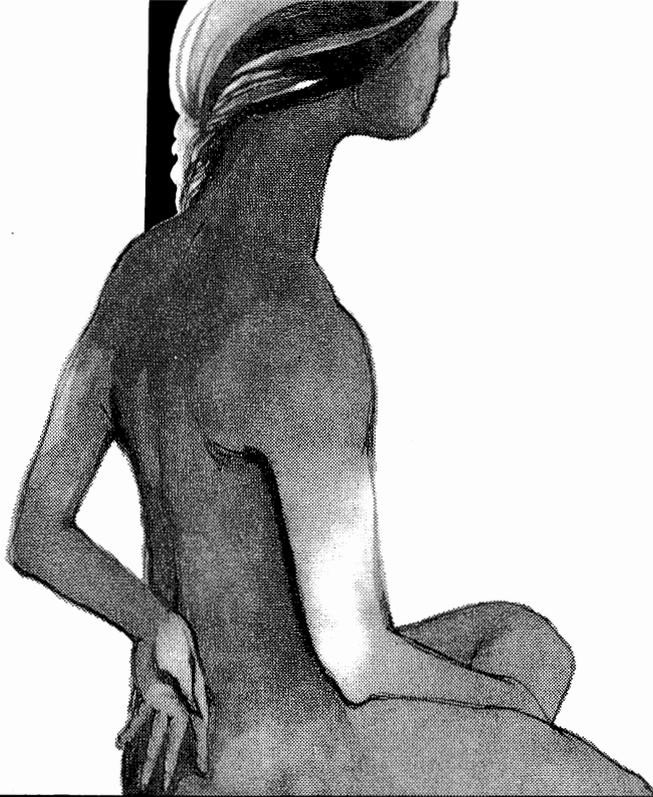
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# CHIROPRACTIC

**A VIEW FROM WITHIN**

**by Richard A. Palermo, D.C.**

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1976

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in any form without express permission of the author.

***Dedicated to the practice of chiropractic, that ennobling art which enables human hands to relieve human suffering.***

***Special thanks to my wife Marge for her patience and help,  
and to my sister, Mrs. V. Mandracchia for her invaluable  
professional advice***

**Illustrations by Mrs. Doris Booth of Stony Brook**

**“The discovery of truth should be the sole object of investigation and discussion.”**

**“Advance we must; intellectuality, the passkey of this age, is opening up new lines of thought.”**

**The Science, Art and Philosophy of Chiropractic, D.D. Palmer, 1910.**

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# *Introduction*

Chiropractic is the newest, least understood, and most controversial of the healing arts. Its image in the minds of many is a composite of confusion and misconception. This is compounded by the blatant propaganda emanating from its adversaries and a small number of its advocates.

The chiropractor has been characterized as everything from charlatan to miracle-healer. Those laying claim to opinions on chiropractic tend to express themselves in emotional extremes of harsh condemnation or passionate endorsement. In all truth, it must be said that most of those who condemn chiropractic have never experienced it, while those who extol it, have. Between these two extremes are the majority of laymen. Professing little knowledge of the subject, their usual attitude is one of qualified skepticism.

This booklet is not intended as a definitive, scientific exploration of chiropractic. Rather, its purpose is to give succinct, honest answers to questions most frequently posed by those who are interested and curious.

Although it would be more informative to read the entire pamphlet from question one through ten, it is not absolutely necessary to do so. Each question and answer can be read and understood individually.

# **1. What is Chiropractic?**

The word "chiropractic" derives from the Greek "chiro" - and "praktikos" and means "to do efficiently by hand". It is a system of healing which maintains that the primary or contributory cause of certain diseases is altered nerve function due to structural and mechanical abnormalities of the spinal column, and that reduction of these abnormalities by manual manipulation can effect a cure.

Historically, chiropractic is eighty years old and had its origins in mid-west America. Like most new fields its inception was the result of the curiosity and empiric investigation of a small number of men. Foremost among them was D. D. Palmer, generally considered the father of chiropractic. Much abuse has been directed at this brilliant man by organized medicine<sup>1</sup> because he was not formally educated. One wonders how they would evaluate Abraham Lincoln and Thomas Edison.

Since its birth, chiropractic has, in the face of blind opposition and outright persecution, made enormous strides. Its practitioners now number twenty thousand in the United States alone and thirty million Americans have received chiropractic care.

Comprehension of chiropractic begins with a basic understanding of the spine. The spine or spinal column consists of twenty-four movable vertebrae and the sacrum and coccyx.<sup>2</sup> It supports the skull on top and rests upon the pelvis below. (See *Figure 1*) Separating each vertebra (with the exception of the first two) is a disc. This is a tough, rubbery structure which has hydraulic shock-absorbing properties and is frequently an important factor in spinal problems. (See *Figure 2*)

1. "Organized medicine" refers to those individuals and departments of the American Medical Association and its state affiliates whose primary function is the protection and perpetuation of medicine's vested interests. These include economic status, political power and social prestige. In this context, the great majority of practicing physicians are not part of organized medicine.

2. The first seven vertebrae comprise the neck and are called the cervical spine. The next twelve are the thoracic or dorsal spine, and the last five, the lumbar spine. The last, or fifth lumbar vertebra, rests upon the sacrum, a bone which resembles an inverted arrow-head. Attached to the bottom of the sacrum is a smaller, similarly shaped bone called the coccyx (tailbone). The sacrum and coccyx, while part of the spine, also form a portion of the rear wall of the pelvis.

Housed inside the bones of the spine is the spinal cord, a cable of nerves passing to and from the brain. Emanating from the spinal cord are the spinal nerves. The spinal nerves pass between the vertebrae, distributing themselves throughout the body . (See *Figure 3*) For example, nerves from the neck supply the shoulder, arm, hand and to some extent the head. Those from the lower spine supply the lower back, buttocks, thighs, calves, and feet. These nerves contain thousands of fine filaments or branches, each of which has a specific destination and function. Thus, a spinal nerve carries branches that cause muscles and blood vessels to contract and glands to secrete, while other branches of the same nerve carry impulses of pain, temperature, touch and balance.

The functions of the spine are many; however, it can be said to have four major ones. These are:

1. To support the head and trunk.
2. To provide motion for the head and trunk.
3. To house the spinal cord and provide exits of transmission for the nerves of the body.
4. To provide points of attachment for muscles and ligaments.

It was previously stated that chiropractors believe that some diseases are caused by altered nerve function resulting from structural and mechanical abnormalities of the spine. Precisely, what are these spinal abnormalities?

1. *Subluxation* - a minor displacement or misalignment of an individual vertebra with reference to the vertebrae above and below. (See *Figure 4*)
2. *Fixation* - a condition where a vertebra is "locked" into position. It may be a perfectly straight position but the vertebra is unable to move properly when the need arises. [See *Figure 5*)
3. *Gross Distortion* - a condition where a number of vertebrae, usually three to seven, have deviated from the midline of the back. An example is a curvature of the spine as seen from the front or back. (See *Figure 6*)
4. *Deviational Distortion* - similar to gross distortion except that it relates to alteration of the normal spinal curves. The ideal spine when viewed from the back or front should be straight, but when viewed from the side has three curvatures. When one of these is reduced, exaggerated or reversed, it becomes

abnormal. For example, the neck when seen from the side should have a forward convexity. If this is altered, it constitutes a deviational distortion. (See *Figure 7*)

Any of the above structural and mechanical abnormalities cause several adverse effects. Tissues contained within and adjacent to the spine are irritated. These include muscles, blood vessels and ligaments. Stress on spinal discs and vertebral joint surfaces is substantially increased. The most important effect however, is compression and irritation of the spinal nerves that exit between the vertebrae. Since these nerves travel to various parts of the body, and since their functions are so varied, such irritation can cause pain and other symptoms either in the vicinity of the spine or at a distance from it. For example, a subluxation or fixation of one of the upper neck vertebrae can cause neck pain or headache. If one of the lower neck vertebrae were involved, pain and numbness of the neck, shoulder, arm and hand could occur. The causal relationship between these spinal abnormalities and altered nerve function has been irrefutably proven both clinically and scientifically.<sup>3</sup> It follows logically that reduction of such abnormalities by manual manipulation results in cure or diminution of symptoms.

Philosophically, chiropractors espouse an approach to health that is eminently rational. Having profound respect for the body, they see it as a sophisticated organism composed of highly integrated and interdependent cells and tissues, rather than as a collection of separate organs and parts. They define health as a state of physiological harmony and balance. Preservation of such a state is contingent upon structural, bio-chemical, nutritional, psychological and environmental factors. For this reason, chiropractors advocate treating the "total" man rather than the symptoms of his illness. They view spinal manipulation not as a panacea, but as one of a number of valuable contributions toward this end.

Finally, it should be emphasized that chiropractic is not static. Its theories and techniques are undergoing a continual process of expansion and refinement.

3. The effects of compression subluxations on nerves have been established by laboratory experiments conducted by both medical and chiropractic researchers. The most impressive results were obtained by Dr. W. V. Cole. Dr. Cole, an osteopathic physician, created artificial vertebral fixations or subluxations on test animals. He was able to demonstrate pathological changes microscopically in those tissues neurologically associated with the affected vertebrae.

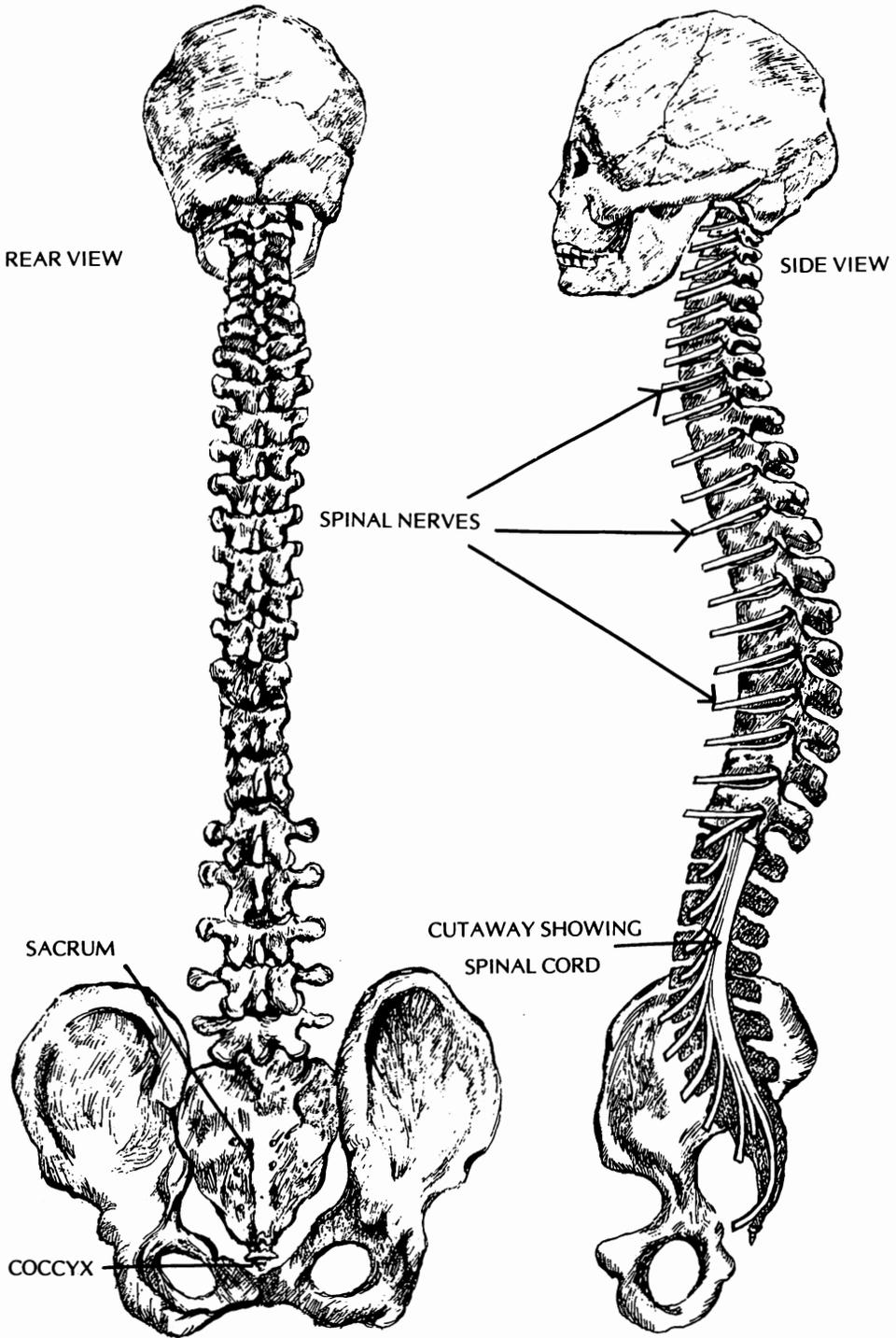


FIGURE 1: THE SPINAL COLUMN, SKULL AND PELVIS

SIDE VIEW OF LOWER SPINE

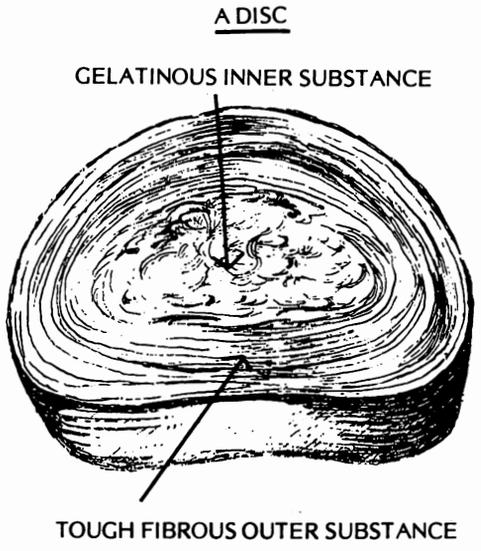
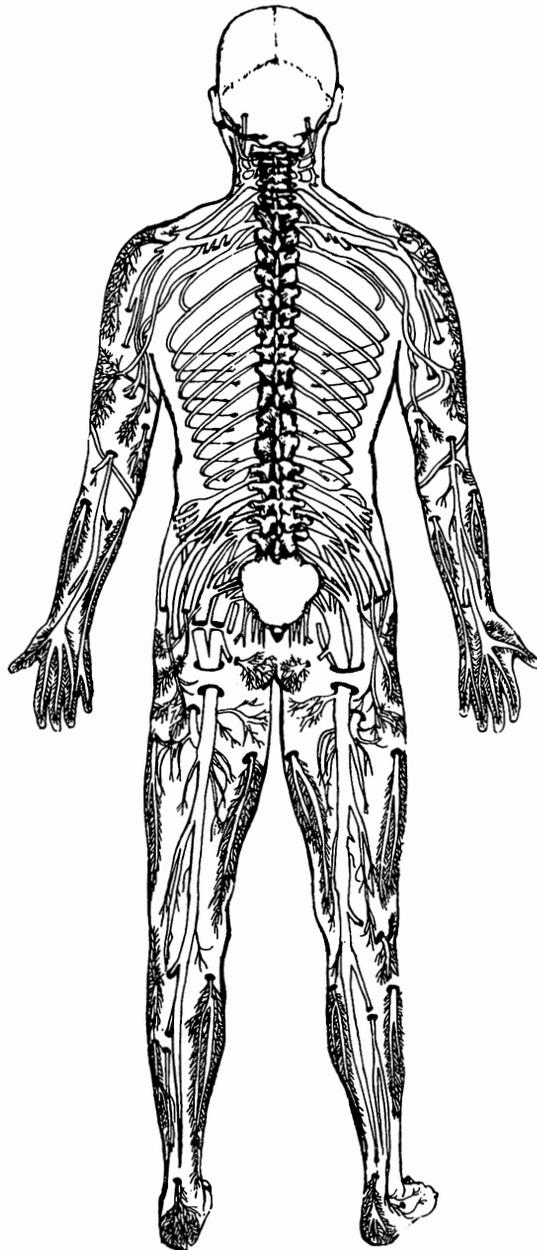
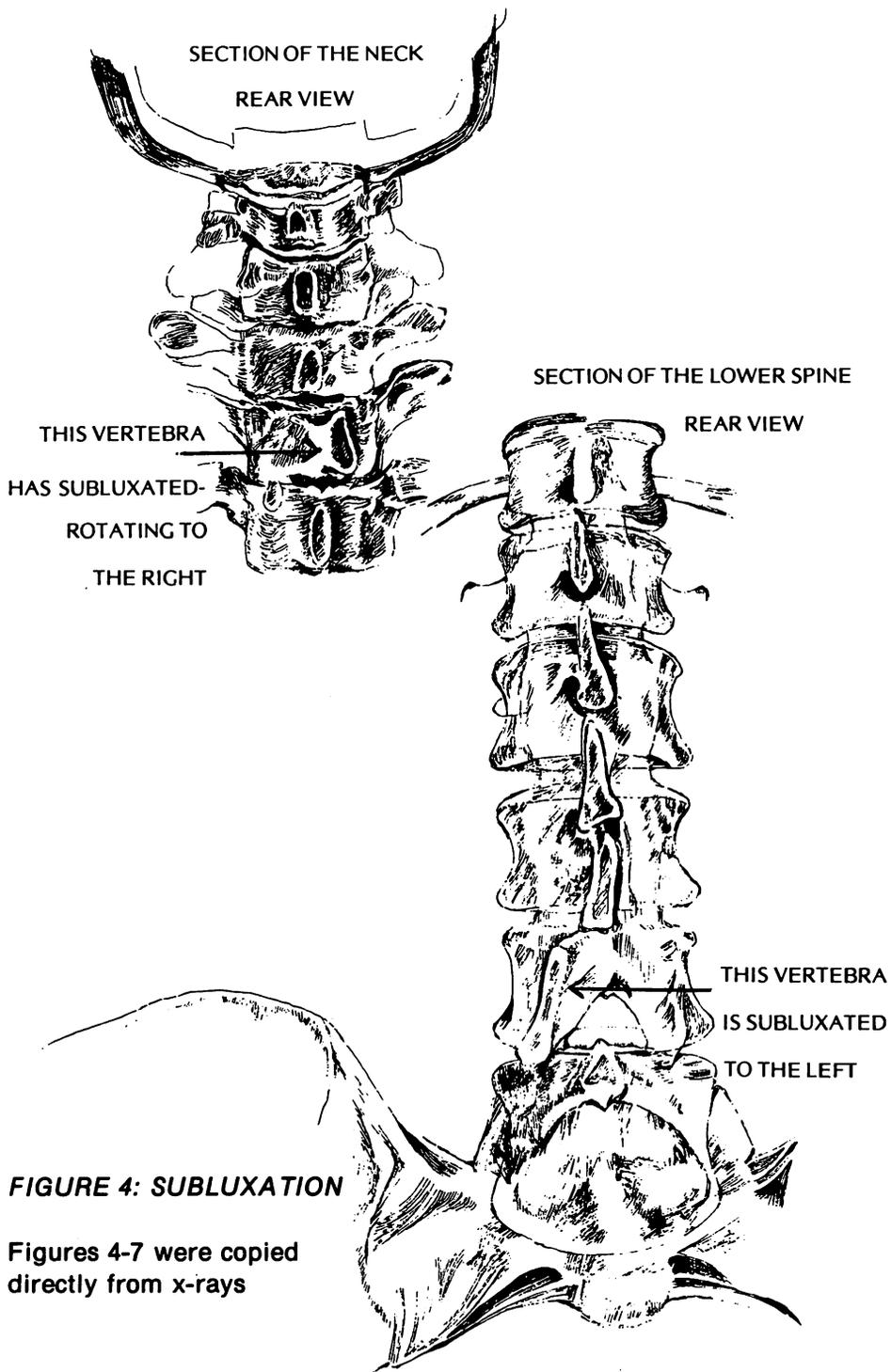


FIGURE 2: THE SPINAL DISC

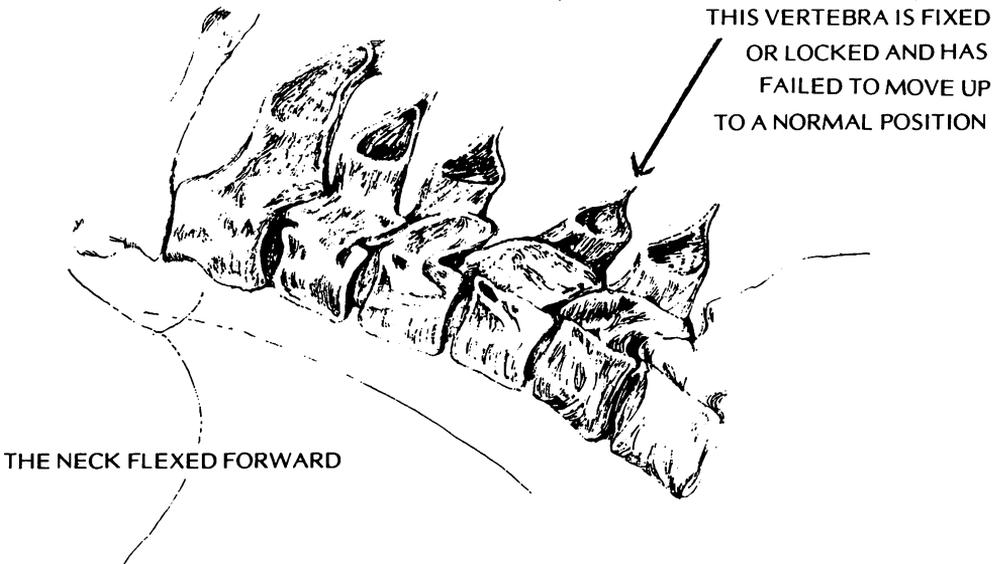
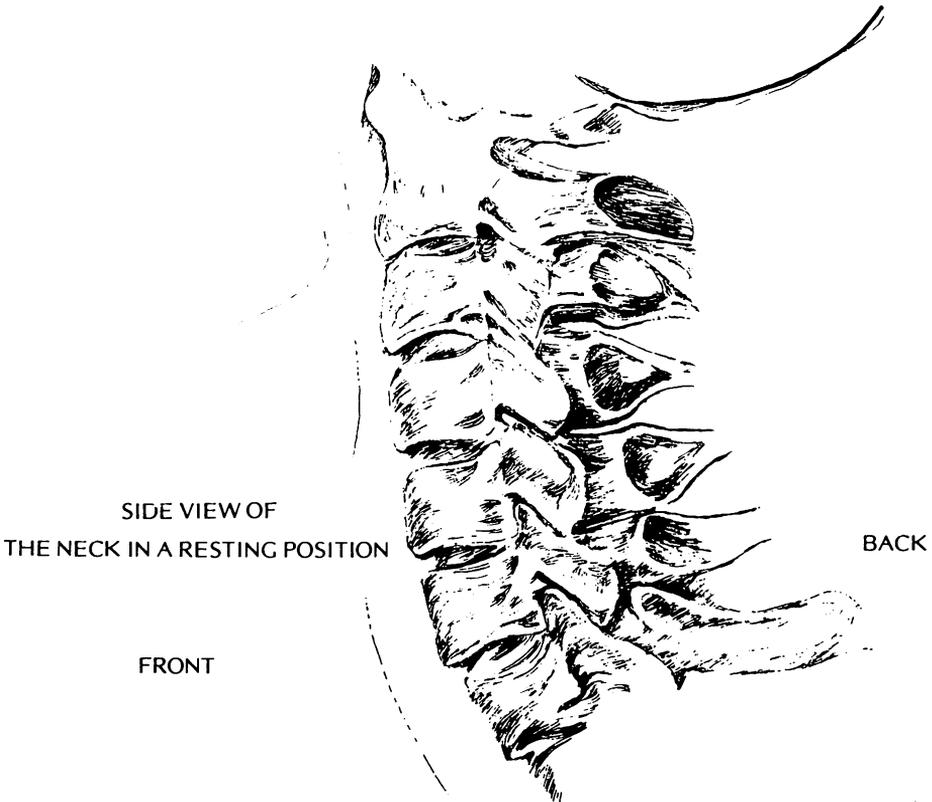


**FIGURE 3: THE SPINAL NERVES AND THEIR DISTRIBUTION**

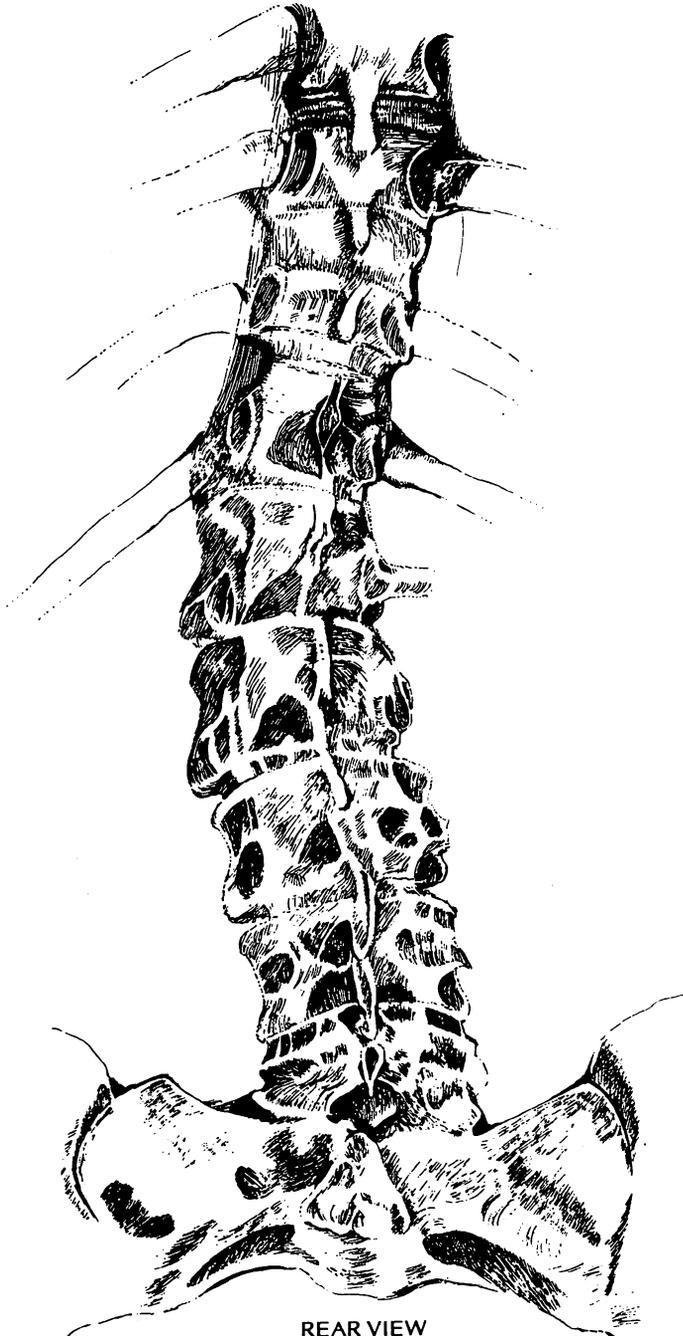


**FIGURE 4: SUBLUXATION**

Figures 4-7 were copied directly from x-rays

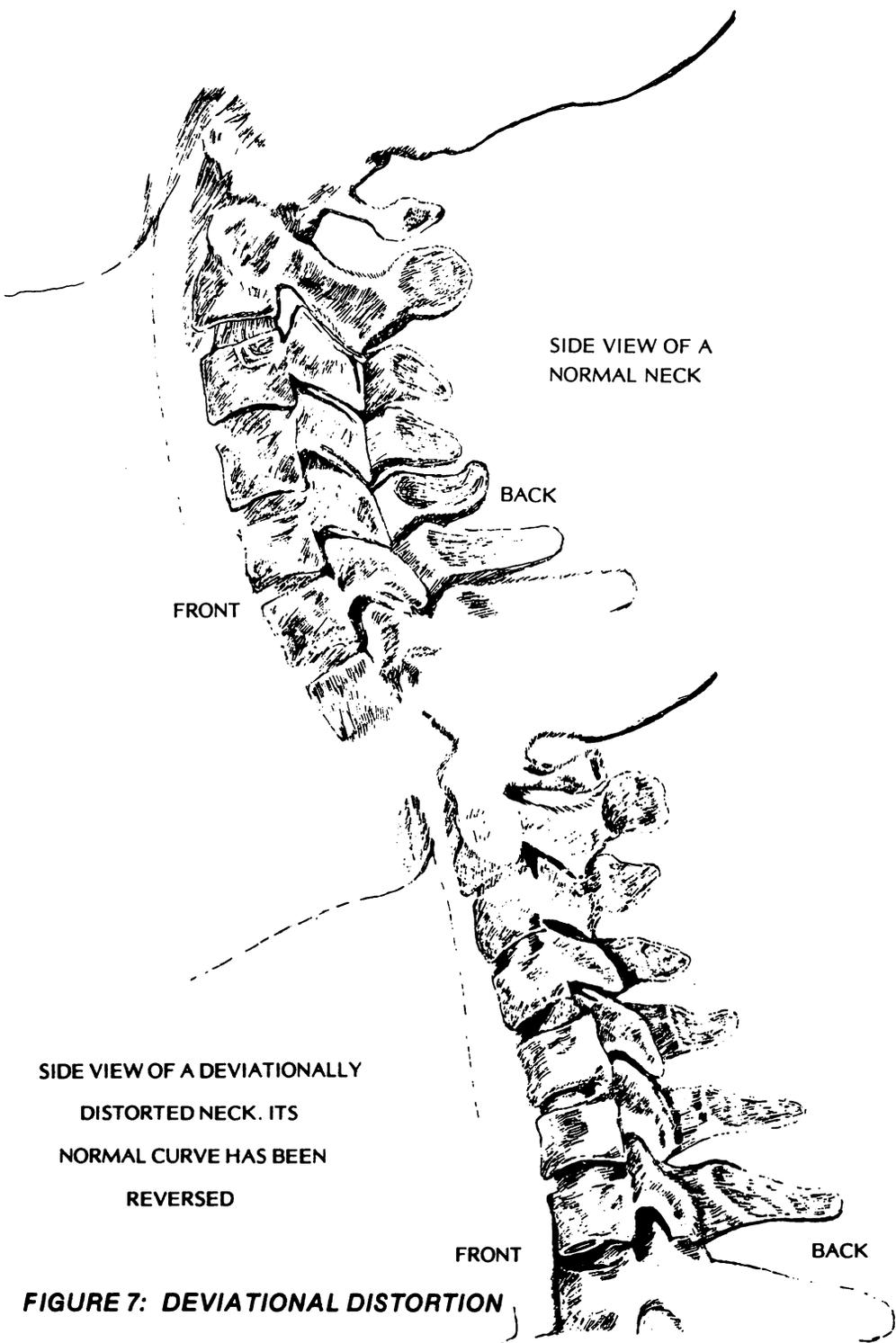


**FIGURE 5: FIXATION**



REAR VIEW

**FIGURE 6: SECTION OF THE LOWER SPINE  
SHOWING GROSS DISTORTION**



SIDE VIEW OF A  
NORMAL NECK

FRONT

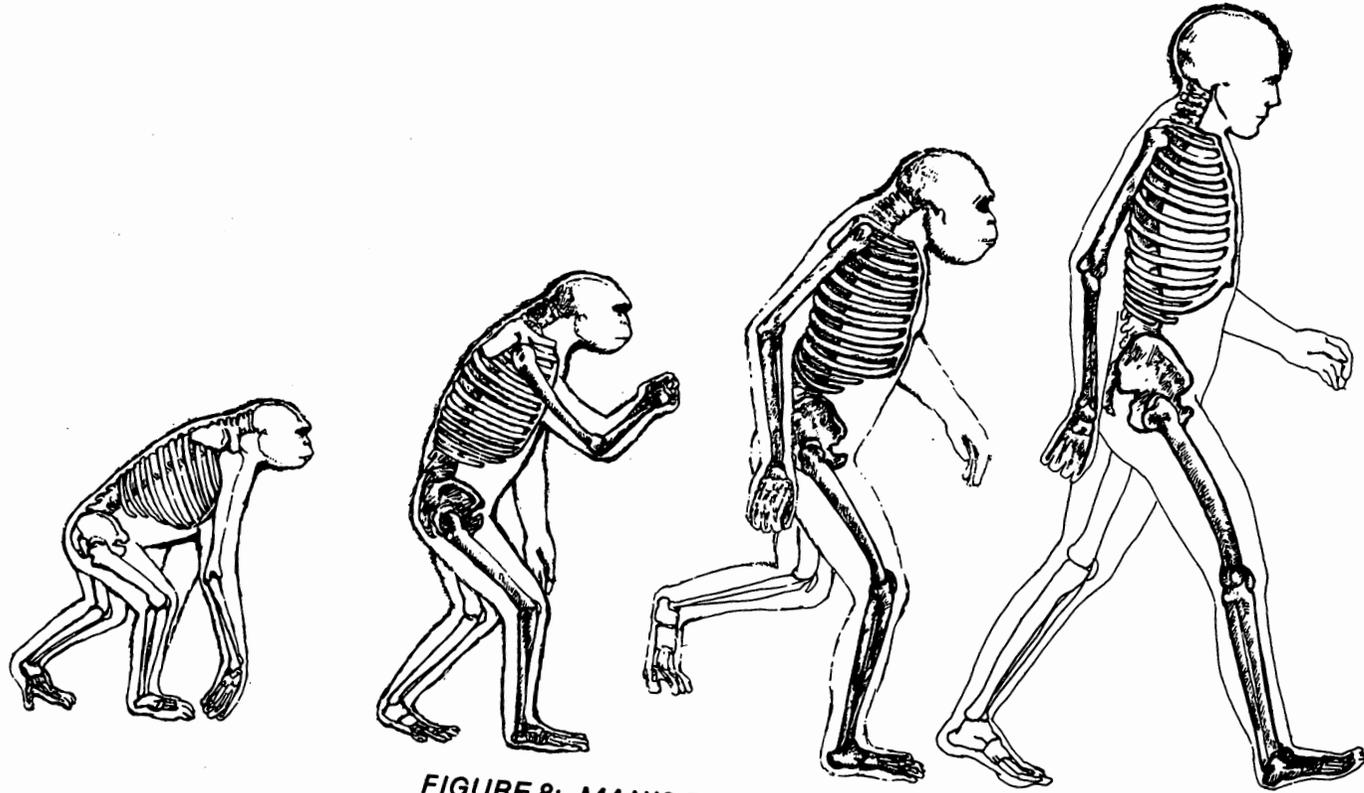
BACK

SIDE VIEW OF A DEVIATIONALLY  
DISTORTED NECK. ITS  
NORMAL CURVE HAS BEEN  
REVERSED

FRONT

BACK

**FIGURE 7: DEVIATIONAL DISTORTION**



**FIGURE 8: MAN'S POSTURAL EVOLUTION**

## **2. Why do these spinal problems occur and whom do they affect?**

Virtually all of us are prone to structural and mechanical problems of the spine. Indeed, a recent government survey indicated 80% of the adult population suffers at some time from low back pain. The reason for this almost universal susceptibility is the deleterious effect of gravity on the vertical or upright spine. This effect is called gravitosis. Man's spine was designed originally for a creature who would function horizontally and be supported by four legs. Such an arrangement distributes weight-bearing stress equally throughout the spine insuring a stable and balanced situation.

As man evolved over the centuries, he assumed an upright posture and gradually developed arms. This gave him much greater mastery over his environment, but at the cost of seriously compromising his postural integrity. He now had a vertical spine which had to support his entire trunk and head against gravity. In so doing, it is subjected to enormous stress, particularly in areas such as the lower back and neck. (See Figure 8)

This basic weakness of the vertical spine is a common starting point of spinal distortion for all of us. In addition, there are a number of acquired factors which contribute to its further development. Chief among these are:

1. Injuries - Most of us are victims of a number of minor and in some cases major physical injuries. These can have an adverse effect upon the spine. A common example is the "whiplash" type injury to the neck.
2. Poor Posture - When this is sustained over a period of time it contributes greatly to spinal distortion.
3. Occupational Factors - This can best be illustrated by giving examples:

The mailman or laborer who carries on one side, the typist and truckdriver who continually turn their heads and necks in one direction, the office worker, barber and dentist who slump forward throughout a large part of their day and the housewife who spends hours vacuuming in a bent position are but a few

examples of occupational factors that can induce spinal distortion.

4. **Emotional Tension** - This causes a contraction of muscles which exert a "pulling" effect upon the spine. When it is sustained over a long period, it contributes to chronic spinal distortion. Almost everyone has had the experience of being emotionally tense and noticing concurrent discomfort in the neck, shoulders or lower back.
5. **Heredity** - Many individuals inherit patterns of spinal distortion just as they inherit other illnesses.
6. **Previous Illnesses** - Those which affect muscles, nerves or bones such as polio can contribute to distortion of the spine.
7. **Childbearing** - Pregnancy places a great stress upon the lower back and many women begin to experience back pain prior or subsequent to childbirth.

Thus, we see that the structural and mechanical abnormalities of the spine are caused by a combination of the basic inherent weakness of the upright posture and by a number of acquired factors.

### **3. What conditions do chiropractors treat?**

Chiropractors treat a large variety of cases but with a highly disparate frequency. To maintain the utmost objectivity, this publication will confine itself to those cases constituting the bulk of the average chiropractors daily practice. The clinical effectiveness of chiropractic in treating such cases has been indisputably established by a consistently high rate of success over a period of many years.<sup>4</sup>

Before proceeding, a distinction should be made between diseases of "musculo-skeletal" origin and those of "organic" origin. The former includes conditions involving joints, muscles, ligaments, tendons and nerves. Major causative factors of musculo-skeletal disease are mechanical irritation, postural stress and trauma. Organic disease refers to conditions in which there are demonstrable pathological tissue changes such as tumors, ulcers or infectious lesions. These usually involve an internal organ. This distinction is imprecise and there are frequent overlapping exceptions and qualifications. It will however, suffice for our purpose.

A specific example is low back pain. If caused by a displaced vertebra it would be classified as "musculo-skeletal" in origin. If, however, it were caused by cancer of the prostate gland, it would be classified as "organic" in origin.

Those conditions treated most frequently by chiropractors are:

- 1 - Low-back pain of musculo-skeletal origin - all varieties, including sciatica and disc problems.
- 2 - Neck pain of musculo-skeletal origin - including "whiplash" and disc problems.
- 3 - Headaches of non-organic origin - all varieties, including tension headaches and migraines.
- 4 - Shoulder - arm - hand pain of musculo-skeletal origin.
- 5 - Middle and upper back pain of musculo-skeletal origin.

4. Detractors of chiropractic attempt to downgrade its effectiveness by labeling these cases "psychosomatic". Eighty to ninety percent of such cases are diagnosed and unsuccessfully treated by physicians prior to their coming under chiropractic care. They present objective symptoms and signs of physical illness. Many have documented histories going back years. To glibly assert that they are psychosomatic is irrational.

- 6 - Neuralgia of musculo-skeletal origin.
- 7 - Neuritis of musculo-skeletal origin.
- 8 - Chronic bursitis.
- 9 - Rheumatism
- 10 - Some cases of osteo-arthritis.
- 11 - Chest pain of musculo-skeletal origin.

Next, we have a category of conditions seen less frequently by chiropractors. Victims of these illnesses frequently receive chiropractic and medical care concurrently.

- 1 - Allergies
- 2 - Asthma
- 3 - Sinus conditions
- 4 - Epilepsy
- 5 - Rheumatoid arthritis
- 6 - Nervous tension
- 7 - Insomnia
- 8 - Functional digestive disorders
- 9 - Hypertension (high blood pressure)
- 10 - Chronic fatigue due to postural stress.

## **4. What does a chiropractor do?**

Initially, a chiropractor examines a patient and takes a case history. While the questions he asks will be similar to those asked by a physician, his examination will focus more on the spine. Most chiropractors will then X-ray the patient's spine. The purpose of X-rays is twofold. First, it allows the chiropractor to determine whether there is anything that would contra-indicate his treatment such as a fracture. Secondly, it enables him to determine which vertebrae are in need of corrective manipulation, thereby guiding him in his treatment.

The essence of chiropractic treatment is a manipulation of the spine, called an "adjustment." To do this, the chiropractor places his hands in a very specific fashion on those areas of the spine and pelvis<sup>5</sup> which require correction. Using certain portions of the vertebrae as levers, he then performs a series of skillful "thrusts" or "moves". These are dependent for their effectiveness on speed and proper direction, rather than force. The purpose of the adjustment is to alter the position of vertebrae and reduce fixation. It bears no resemblance to massage or physio-therapy. The entire procedure is totally harmonious with the natural propensity of the body toward self-correction.<sup>6</sup>

As an adjunct to their adjustments, many chiropractors use "soft-tissue" techniques. These usually involve light to medium pressure on certain muscles, nerves and ligaments. Some also use various modalities (diathermy, ultra-sound, etc.). In addition, a chiropractor may prescribe exercises and give nutritional advice. The number of treatments given varies, depending upon the nature and chronicity of the case.

5. Pelvic mechanics exert a profound influence on spinal mechanics, and chiropractors include the pelvis in their manipulations.

6. There are a number of different chiropractic manipulative techniques. Individual chiropractors tend to utilize those with which they are most familiar. All have the same objective, namely, the reduction of vertebral lesions. Some chiropractors also manipulate peripheral joints (shoulder, elbow, knee, etc.).

## **5. Is chiropractic treatment painful or dangerous?**

The reluctance of many people to seek chiropractic help is directly attributable to their fear of incurring pain or injury. This fear has diverse origins.

It stems partly from the apprehension normally associated with the unfamiliar or the unknown. Its primary sources however, are the invidious allegations about the "dangers" of chiropractic disseminated by its detractors. The "incidents" upon which these allegations are based are never documented. Rather, they usually consist of vague, apocryphal stories.

The chiropractic adjustment is a highly skilled technique which a chiropractor spends years learning and practicing. The treatment that he renders is painless. Indeed, many patients find it an enjoyable experience.

Is chiropractic treatment dangerous? Rather than indulge in a lengthy polemic, let us go directly to a source of information totally devoid of human emotion or prejudice, one that is the essence of objectivity. The statistics relating to the cost of malpractice insurance provide such a source. These costs are predicated on a very simple formula, the higher the risk the greater the premium. Chiropractors pay one to six-thousand per cent (1,000%-6,000%) less than medical doctors for malpractice insurance. These statistics make any further discussion of the potential dangers of chiropractic treatment superfluous.

Before concluding, we must answer another allegation frequently made by organized medicine. It contends that a victim of serious illness (cancer is invariably used because of its frightening implications), who consults a chiropractor will be endangered by the chiropractor's inability to recognize the nature of the illness. This is untrue. Today's chiropractor is thoroughly trained in diagnosis. He must pass the same or similar state examinations in this subject as physicians, and possesses sufficient diagnostic acumen to recognize those diseases which fall outside the scope of his practice. Furthermore, over eighty-five per cent of chiropractic patients have previously consulted one or more physicians. The existence of an occasional incompetent in chiropractic proves nothing. Unfortunately, a small minority of incompetents exists in every profession and trade.

## **6. What education is required to become a chiropractor?**

Present day standards of chiropractic education are two years of college followed by four to five years of professional school. These are essentially the same standards required of other professions. Years ago, the amount of education required to become a chiropractor was minimal, as it was with all professions in their infancies. Since then, there has been a constant upgrading of educational requirements. This upgrading has been accomplished voluntarily by the profession without benefit of public funds and subsidies such as have been available to medical schools.

The chiropractic student studies the same basic science subjects as the medical student. These are: anatomy, physiology, chemistry, bacteriology, diagnosis,<sup>7</sup> pathology and public health. In addition, he is taught chiropractic principles and techniques as well as nutrition and x-ray. He is not taught materia-medica (the use and study of drugs), surgery or the treatment of wounds.

7. Diagnosis is classified in many states as a clinical science rather than a basic science.

## **What is the legal status of chiropractic?**

Chiropractic is now licensed in all states and territories of the United States.<sup>8</sup> In addition, it is licensed in a number of foreign countries including Canada, Germany, Switzerland and New Zealand.

A chiropractic candidate for licensure must pass difficult state board examinations. Usually these consist of a basic science portion, (anatomy, physiology, bacteriology, chemistry, pathology, diagnosis and public health) and, a portion dealing with principles and practice of chiropractic and x-ray interpretation. In twenty-three states the basic science portion is precisely the same as that taken by physicians. The prerogatives enjoyed by chiropractors vary widely from state to state depending upon the liberality of licensure. Thus, for example, in Florida, a chiropractor is permitted to do his own laboratory work (blood chemistry, urine analysis, etc.) while in New York this is prohibited.

In the forensic area, a recent landmark decision by the Appellate Division of the New York State Supreme Court ruled that chiropractors are expert witnesses when testifying about cases they are licensed to treat.

The supervision of all professions, including chiropractic, is under the auspices of each state's department of education. In addition to examining applicants for licensure, these agencies create and enforce rules and regulations governing professional ethics and behavior. In addition, most chiropractors belong to both a state and national professional organization which also promulgate and enforce strict ethical codes.<sup>9</sup>

8. The saga of chiropractic efforts to procure licensure is one of heroic proportions. It encompasses years of sacrifice, frustration and heart-breaking failure before ultimate success was achieved. Much of the credit belongs to the patients of chiropractic. These loyal people refused to permit the abrogation of their freedom of choice in matters of health. At their own expense, they mounted grass-root campaigns that were immeasurably helpful to the profession.

9. The two national organizations are the International Chiropractors Association and the somewhat larger American Chiropractic Association. Although there are philosophical differences between the two, both have done an admirable job in promoting chiropractic education and research. They have also, against great odds, successfully advanced the cause of chiropractic in state and national legislatures.

## **8. *Is chiropractic care covered under health insurance plans?***

The vast majority of insurance companies and union welfare plans now pay benefits for chiropractic care. In some states, two exceptions are Blue Cross and G.H.I., both of which have strong ties with the medical profession. Twenty-six states, which include 64% of our entire population, have passed insurance equality laws. These require insurance companies to recognize and pay chiropractic claims on an equal basis with medicine. Chiropractic is covered by Workmen's Compensation in forty-two states, by Medicaid in twenty-five and by Medicare in all fifty.

## **9. *Do chiropractors believe in the value of medical care?***

Yes, they do. Years ago, many chiropractors summarily dismissed medical care as worthless or harmful. This attitude had several roots. To some extent, it was an emotional reaction to medicine's constant and often vicious persecution of chiropractic. It was also a result of ignorance and extremism on the part of some chiropractors. Finally, it was frequently a judicious outcry against some very real medical abuses and shortcomings.

At this stage of history however, chiropractors certainly recognize the necessity and value of medical care and advise their patients accordingly. When encountering a case that is beyond their scope of practice, they refer that case to a physician. Unfortunately for the public, this is not reciprocated by a majority of physicians.

Finally, it is true that chiropractors can be classified as ultra-conservative regarding the use of drugs. While recognizing their value, they believe drugs should be used with the utmost discretion and selectivity.

## **10. Why is medicine so hostile toward chiropractic?**

To understand this, one needs historical perspective. Analyzing it without such perspective would be like an attempt to explain the Great Depression without reference to industrialization, the First World War or the stock market crash of 1929.

Medicine has consistently made certain accusations against chiropractic. These are:

1. Chiropractors are poorly educated.
2. Chiropractic is based on unscientific and simplistic theories.
3. Chiropractors treat diseases which they should not.
4. Chiropractors indulge in unprofessional advertising.
5. Chiropractors condemn everything medical.

While these accusations contained an element of truth forty to eighty years ago, they are no longer valid. Furthermore, they must be considered in their proper chronological context.

At the time chiropractic came into existence (circa 1895), the state of medical knowledge, education and practice was a sorry one. Indeed, by today's standards, it was almost primitive. Antibiotics were unknown, as were sophisticated surgical techniques. Even basic antiseptic procedures were largely ignored. The body of available scientific knowledge was perhaps 5 to 10% of what it now is, and some of the medical theories of disease then prevalent would be considered ludicrous today. It was not uncommon for people to die in those days from pneumonia, influenza, appendicitis and many other diseases which are now almost routinely curable. The education of the physician was frequently substandard and his ethics often questionable. In short, virtually the same accusations made against chiropractic, could have been made at that time against medicine. The medical profession, after having reigned supreme in the healing arts for centuries, was still in 1895, in the pre-adolescent stage of its development.

Into such circumstances was chiropractic born. Its founders were men possessing intellectual curiosity and a disdain for conformity, qualities which have always marked the innovator. Theirs, however, was an infant profession having little wealth, power or prestige.

Limited membership and lack of money imposed severe limitations on the quality of chiropractic education. While the manual skills of the early practitioners were superbly developed, the rest of their education was very poor by today's standards. This, together with the limited body of available scientific knowledge, resulted in their propounding simplistic and unscientific theories to explain the consistently remarkable results observed in their practices.<sup>10</sup>

It is also true, that years ago, chiropractors treated a number of organic illnesses rarely seen by them today. This was amply justified by medicine's failure to provide solutions to these illnesses at that time.<sup>11</sup>

Because of their relative anonymity and lack of public relations, chiropractors were frequently confronted with the problem of economic survival. To cope with this, many indulged in what we would now consider crass and unprofessional advertising.<sup>12</sup>

Finally, they were the constant targets of medical condemnation and medically inspired legal harassment. (Prior to a State Supreme Court ruling in 1940, a chiropractic treatment was legally considered "the practice of medicine" in New York.) Their efforts to achieve legislative relief through licensing laws were repeatedly frustrated by medical lobbies. Such unrelenting persecution, in conjunction with a knowledge of medicine's abuses and shortcoming made their reaction predictable. They became very militant and roundly condemned everything medical. There was yet another factor which contributed to their antipathy toward medicine. This was a belief in a unitary theory of disease subscribed to by some of the early practitioners, a philosophical base which the profession quickly outgrew.

10. An appropriate analogy may be drawn. The early physicians utilized some remarkably effective herbs and potions. Explanations of the results they observed sometimes bordered on lunacy. This did not detract from the inherent value of their therapy. It merely demonstrated a chronological gap between technique and knowledge.

11. Do chiropractors still make extravagant claims about diseases they can cure? Those who do constitute a very small minority of practicing chiropractors. Being extremely vocal, they attract a disproportionate degree of public attention. Unfortunately, this often leads to their being regarded as spokesmen for the entire profession and accounts for the "bad press" chiropractic sometimes receives.

12. Physicians were more fortunate. The drug industry did their advertising for them. Have you ever seen an ad which read, "If pain persists see your chiropractor?"

Harboring extreme convictions, many of these early chiropractors were admittedly parochial in their outlook. It was precisely these convictions, however, that enabled them to survive the harassment that sometimes included abrogation of their civil rights.<sup>13</sup> Despite their tenuous existence and their shortcomings, these men cured a great many sick people and laid the groundwork for the successful growth and development of modern chiropractic.

It was during these early years that the seeds of anger and bitterness between medicine and chiropractic were so deeply sown.

In 1910 an investigation sponsored by the Carnegie Foundation culminated in publication of the Flexner Report. This report concluded that of 155 medical schools then in existence, all but 31 were woefully substandard.<sup>14</sup> These were subsequently closed, and the medical profession with massive government financial aid, rapidly began to upgrade itself. Chiropractic also began to upgrade itself, but the process was much slower and more tortuous. No financial aid was available. Its energies and finances had to be expended in a desperate struggle to survive and gain legal recognition. Despite these handicaps, it ultimately succeeded in achieving recognition and elevating itself. Its schools and ethical codes rival those of any other profession and its theories are fully consistent with scientific realities.

Why then does the average physician continue to harbor a tarnished image of chiropractic? He does so because of his parent organization, the American Medical Association.

Medicine is the "establishment" in the healing arts. It has money, power and prestige. It also has a moral obligation to evaluate objectively any new method of healing before passing judgement on it. Instead, it has arrogated to itself the role of supreme authority in matters of health and ruthlessly pursued the destruction of

13. Chiropractors in unlicensed states were occasionally charged with "practicing medicine without a license" for merely performing their professional skills.

Some were convicted and served jail sentences. Prospective jurors in these cases were asked if they had ever received chiropractic care. An affirmative answer assured summary dismissal! The entire process was based on the now defunct concept of legal entrapment. It was abandoned when it became obvious that juries would not render convictions.

14. Abraham Flexner, a renowned Doctor of Education, was threatened with litigation and physical violence. His report precipitated profound changes in medicine.

chiropractic. Anti-chiropractic literature incorporating the archaic rhetoric of forty to eighty years ago still flows in profusion.<sup>15</sup> This literature contains no acknowledgement of the enormous upgrading of chiropractic education, ethics and theory. It is as if the minds of those in the A.M.A. who shape such policy, stopped functioning in 1935.

On the legislative front, medicine's heavily financed lobbies repeatedly seek the passage of laws inimical to chiropractic and attempt to block every effort by chiropractors to secure their basic rights. Even state licensing laws, so clearly in the public interest, were bitterly opposed by medicine.<sup>16</sup>

Organized medicine's record as one of the most reactionary groups in modern American history provides an insight into its behavior toward chiropractic. It has opposed psychology, optometry, podiatry, osteopathy, private and public health insurance, union clinics, Social Security, Workmen's Compensation and Medicare. In addition, many useful innovations made by individuals in the healing arts, have met with summary condemnation. Witness, for example, the scorn and hostility faced by Sister Kenny when she initially propounded her theories in this country. In short, organized medicine has followed a policy of blind opposition to whatever has posed a threat, real or imagined, to its vested interests. Its rancor toward chiropractic is further exacerbated by the latter's outspoken criticism of medical shortcomings and abuses. These include its attempts to monopolize the health field, its failure to control the promiscuous dispensation of drugs by some physicians, and its unwillingness to take an early and definitive public stand on the hazards of smoking, pollution and adulterated foods.

15. This literature tends to indulge in highly sophisticated name-calling, such as "quack" and "cultist". A classic example was an odious booklet published in the late 1950's. Entitled with infinite subtlety, "What Price Your Life", it was sent to thousands of physicians for distribution. Included in it was an undated table of statistics purporting to show how defectively educated chiropractors were. The statistics were indeed appalling. Diligent research uncovered the not-so-surprising fact that they were fifty years old!

16. Licensure, while beneficial to chiropractic, also gave states the power to regulate and control the profession.

Perhaps the saddest commentary of all is the disparity between the treatment received by chiropractic at home and that which it enjoys abroad. Introduced in Germany in the late '40's, it was warmly embraced and has been consistently praised by the medical profession.<sup>17</sup> In our country, the birthplace of chiropractic, its practitioners are still being vilified.

There are however, some hopeful signs. Forty-eight percent of American physicians are no longer members of the A.M.A. There appears to be a younger, more liberal element emerging in medicine. Medical publications now speak of spinal manipulation as being useful. More significant is the fact that a number of physicians have become chiropractic patients, and an even greater number are referring cases to chiropractors. These events have not occurred because of rapport on an official level, but because individual physicians and chiropractors have come to know and respect one another. Understanding and tolerance between the two professions is contingent upon the development of a rational dialogue free from the emotionalism of the past. Hopefully time and the emergence of a new generation of more enlightened physicians and chiropractors will make such a dialogue possible.<sup>18</sup>

#### 17. Some Examples:

"We must recognize-insofar as we have been concerned therewith-that many ailments or diseases are enormously accelerated in their improvement by spinal therapy; indeed many a cure thereby becomes possible for the first times." (Dr. K.R. von Roques, of Berlin in an article in *Neurelmedizin*, June, 1954.)

"Experience and critical observers of chiropractic...see in it a substantial enrichment of our present methods of treatment and treasure it because sometimes, under a practiced chiropractor, it gives astonishing success quickly and painlessly." (Dr. A.A. Hochfeld in *Zeitschrift fur Arztliche Fortbildung*, a journal of medical education, Nov. 1, 1956.)

"We have been permitted in certain cases unsuccessfully treated for years, even decades, to demonstrate the usefulness of chiropractic." (Dr. G. Gutmann, *Hippokrates*, Aug. 31, 1957.)

18. Chiropractors have for so long been conditioned to anticipate hostility that they frequently bypass opportunities to establish meaningful relationships with physicians. The latter on the other hand, sometimes indulge in intellectual obfuscation. Reports of chiropractic successes are either denied consideration or summarily dismissed.

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## *Concerning the author*

**Dr. Richard Palermo attended St. John's University before graduating with honors from The Chiropractic Institute of New York in 1954. In 1962 he was elected to a two year term as a director-at-large of the Chiropractic Association of New York. As a member of its legislative committee, he was ultimately involved in the bitter struggle for licensure. This culminated in 1963 with the passage of a Chiropractic licensing law in New York State. He also served as a member of the Ethics Committee of the Chiropractic Association of New York and as chairman of the Education Committee of the New York State Chiropractic Association. Dr. Palermo resides in St. James, New York.**