Chiropractic Society of Texas Sunset review response:

The CST is a professional organization that supports principled, neurologically-based wellness care in a vertebral subluxation centered model. Our mission is to protect, promote, and advance chiropractic as a separate and distinct profession dedicated to the detection and correction of vertebral subluxation for the better expression of life. The promotion and advancement of the Science, Art, and Philosophy of pure chiropractic by use of legal, legislative, and public means. As well as the protection of the Science, Art, and Philosophy of pure chiropractic from medical or naturopathic additives by use of legal, legislative, and public means. While focused on this task, our organization would actively encourage dialogue and action from all chiropractic perspectives but never yield or compromise on the Principles of Chiropractic. The CST is an inclusive society that works to encourage unity, without uniformity. The only organization in the State of Texas that meets the criteria noted above is the Chiropractic Society of Texas.

As an organization Issue 5 is an area we would like to submit our concerns and recommendations for the Sunset Committee. The committee stated, “Improper practice of chiropractic may result in physical harm to patients, such as impaired range of motion, further injury, and potentially paralysis.” As with any industry, improper practice may result in some form of outcome that is unwanted by the practitioner as well as the patient. However, the assumption (*assumption used here because there is no factual evidence presented by the committee to support this claim in their report) that this is a concern for the citizens of Texas is completely inaccurate. The practice of chiropractic as a drug-free, surgery-free option for the population of Texas, allows it to be defined as a safe profession. Chiropractic is a safe profession, as evidenced by 121 years of care on millions of patients, however there is factual, researched, scientific proof of this statement as well.

The Sunset committee stated this as the “issue”, or the reason for the recommendation, to possibly change the structure of the TBCE. It is reasonable to say that the premise of the Sunset committee’s review is completely incorrect, not only from our findings as practicing chiropractors, but also as an intellectually-informed group. We would suggest the Sunset committee look into safety research prior to setting a premise of chiropractic’s need of increased regulation due to “physical harm” potential. To help, there are several studies included below for your review. These are creditable, scientifically performed including references contained. The following research will help with a better understanding of the safety of the practice of chiropractic throughout the professions’ 121 years of practice:

• December 2009 issue of the scientific periodical, the Journal of Clinical Chiropractic Pediatrics shows that chiropractic care is extremely safe for children: In research for this report, the study author undertook a review of all previously published reports of "adverse events" for chiropractic care delivered to children. In this study the author, a chiropractor from the Anglo European College of Chiropractic, and lead tutor for Advanced Practice for Chiropractic Pediatrics, Joyce Miller, B.Sc., D.C., D.A.B.C.O., set out to review and examine the chiropractic safety record for care of children in comparison to the safety record of medications given to children. In her published study, Dr. Miller reported that according to the United Kingdom’s, National Patient Safety Agency, in 2006 out of a total of 33,446 reports of medical pediatric care, 19% experienced a medication problem, 14% had a procedural safety breech, 9% showed errors in documentation, and an additional 7% had errors in medical clinical assessment. The reported results of the authors research showed that there were six separate published reports that addressed safety of what was called "Manual Therapy" for children.
delivered by either chiropractors or medical practitioners. The author specifically looked at the care rendered by chiropractors for the purpose of this study.

The results showed that over a 59 year time frame, a systematic review of the literature only uncovered 8 incidences of hurt or harm to children due to chiropractic adjustments. With an estimated 30 million pediatric adjustment visits to chiropractors made each year, the risk factor is calculated to be extremely low.

• A study published in the scientific medical journal "Spine": The article published in the October 2007 issue of the journal, was titled, "Safety of Chiropractic Manipulation of the Cervical Spine: A Prospective National Survey". The study was a prospective national survey designed to, "estimate the risk of serious and relatively minor adverse events following chiropractic manipulation of the cervical spine by a sample of U.K. chiropractors." The authors admitted that the risk of any serious side effects to chiropractic care was relatively unknown to them and the medical community. The chiropractic profession has long noted that the malpractice rates for the chiropractic profession at large, a possible indicator for injury from care, were considerably lower than any other medical health care providers. This study looked at the outcomes from 19,722 chiropractic patients who had received some form or another of neck adjustments that they referred to as "chiropractic manipulation of the cervical spine." The researchers reviewed a total of 50,276 neck adjustments and looked to see if there were any serious side effects from the chiropractic care. They defined serious effects to be those that resulted in the need to be referred to a hospital, or that caused a worsening of symptoms immediately after treatment and/or resulted in persistent or significant disability or incapacity. The results as quoted in the study were that, "There were no reports of serious adverse events." Researchers did not find any serious adverse effects in any of the subjects they studied. They summed up their findings when they stated, "On this basis, this survey provides evidence that cervical spine manipulation is a relatively safe procedure when administered by registered U.K. chiropractors."

• A research article published on August 3, 2010 in the journal, Chiropractic & Osteopathy, further shows the safety of chiropractic adjustments. The article itself was a review of numerous other studies done recently that looked at the chances of adverse events from chiropractic care. One of the studies reviewed looked at the effectiveness of chiropractic for neck pain. In this additional study, published on July 9, 2010 in the journal Chiropractic & Osteopathy, authors noted that there were no serious adverse events among the subjects and that all minor events were resolved within 1 to 3 days. One of the largest studies reviewed in this research article was one by a Dr. Cassidy and his colleagues in Canada. In this study, the researchers looked at official Canadian health records and reviewed 109,020,875 person-years of cases over a period of nine years. This study was so well constructed that it ruled out other factors so as to leave their conclusions unapproachable. The results of this study showed that the odds of a vascular adverse event occurring within 24 hours of a visit to a primary care physician was virtually the same as the chances of it occurring within 24 hours of a visit to a chiropractor. This study, reporting on several others shows that in fact chiropractic is as safe, or safer than visits to general practitioners.

• Another research article published on April 21, 2010 in the journal, Chiropractic & Osteopathy from Melbourne Australia, looked at the safety of chiropractic care for patients who had previously had disc replacement surgery. Many of these people then turn to chiropractic care in the hopes of improvement from these post-surgical problems. This study was designed to look at the safety of chiropractic care after the surgery. This study looked at eight patients who underwent lumbar spine disc replacement,
having 1 or 2 total lumbar disc replacements, and continued to have persistent, post-surgical, non-specific lower back or pelvic pain. These patients were referred for chiropractic by an orthopedic surgeon. All these patients were considered stable according to the surgical protocol. For the purposes of this study, all eight patients were given from 8 to 10 chiropractic adjustments using one of the more forceful side posture lower back adjusting techniques. Safeguards were taken along with frequent examination procedures to make sure that no patients would be subject to any harm. The results showed that none of the patients had severe or irreversible reactions after the spinal manipulations. In their conclusion the authors wrote, "During the short treatment period, no major complication was encountered by the patients. Moreover, the benign side-effects reported after lumbar spine manipulation were similar in nature and duration to those frequently experienced by the general population."

- A study published in the September-October 2009 Journal of Science and Healing showed that chiropractic care for children is safe. The study showed that the primary reason that most children went to the chiropractor was "wellness care." The study involved surveying both Doctors of Chiropractic who took care of children and parents who brought their children to chiropractors. In the survey of the doctors the results showed that out of 577 children under the age of 18, with a total of 5,438 office visits, there were only three minor adverse events reported. In the survey of parents of 239 children under chiropractic care, there were only 2 minor adverse events reported. The study noted that the adverse events were minor discomfort after the adjustment and were readily resolved with continued adjustments. Of those children who were brought to the chiropractor for health issues, the most common symptoms noted in the study were muscular conditions, ear, nose, throat, respiratory and digestive disorders. Both parents and doctors indicated a high rate of improvement with the children's presenting health issues. In addition to these improvements, the doctors and parents also reported better sleeping patterns, improvements in behavior, and improved immune system function while under chiropractic care. Dr. Joel Alcantara, International Chiropractic Pediatric Association (ICPA) Research Director and author of this study said, "This paper shows the preliminary results of the ICPA's Children's PBRN (practice-based research network) – Phase One". Dr. Alcantra then continued, "Phase Two is well under way and we have initiated similar research pertinent to pregnancy. We are pleased that a major CAM (complementary and alternative medicine) Journal respects the importance of chiropractic care for children and we foresee greater collaboration with the CAM community on the importance of chiropractic care for children." Dr. Renny M. Edelson, one of the Doctors of Chiropractic who participated in the study summed up the enthusiasm of the study results by saying, "It is wonderful to see research substantiating the safety of chiropractic care for children and the overwhelming satisfaction of parents with children under care."

- The results of a large practice based study accepted and presented at the December 2007 "14th Annual Symposium on Complementary Health Care" held at the Peter Chalk Conference Centre, University of Exeter, UK, showed that chiropractic care of children is safe and effective. The study, titled, "Treatment-related aggravations, complications and improvements attributed to chiropractic spinal manipulative therapy of pediatric patients: a practice-based survey of practitioners", was funded by the International Chiropractic Pediatric Association. In this study data was reviewed from 389 pediatric cases (181 females; 200 males, 8 not reported) attending a total of 3048 office visits. Parental age ranged from 20-57 years with an average of 36.89 years. Their children ranged in age from less than 24 hours to 18 years with an average age for this study being 6.74 years. The largest reason children reported in this study were under chiropractic care was "wellness" at 54%. After wellness, the primary reasons, the children were brought in for care were, in decreasing frequency, musculoskeletal disorders,
ear, nose, throat and respiratory disorders and dealing with a challenged child. In the review of these cases researchers found that "No treatment-associated complications were reported." Out of the 389 children and over three thousand office visits only two cases of "soreness and stiffness" of treatment-related aggravation were reported, but both were self-limiting. For those children who did have some symptoms the research noted that these children showed improvements such as decreased pain, improved mood, and increased immune function. The study also showed improvements in the children who were initially symptom free and included immune system improvements, improved sleeping, and improved emotional states. The authors of the study, Joel Alcantara, DC, and Jeanne Ohm, DC summed up their conclusions by stating, "This study provides supporting evidence on the safety and effectiveness of chiropractic SMT (spinal manipulative therapy, aka adjustments) in children based on parental reports." Dr. Ohm commented, "This survey shows us what we have known for over 100 years: chiropractic adjustments for children is safe, gentle and gets results!"

- The safety of subluxation-based pediatric chiropractic: results from a practice-based research network: Joel Alcantara, DC, Jeanne Ohm, DC, and Derek Kunz, BS. This study was funded by the International Chiropractic Pediatric Association, Media, PA, USA. Introduction: Of the practitioner-based alternative therapies, chiropractic is the most popular for children. Concerns regarding the safety and effectiveness of this popular and highly utilized alternative approach to children's health have been raised by chiropractic's detractors. In the interest of evidence-based practice, the International Chiropractic Pediatric Association created the largest and most successful practice-based research network to address the safety and effectiveness of the chiropractic care of children. Towards this effort, a prospective cohort study examining the incidence and prevalence of the chiropractic care of children was performed. Methods: This study was approved by the Institutional Review Board of Life University (Atlanta, GA, USA). In addition to sociodemographic information (i.e., age and gender, level of education), the study further characterized the nature and context of the clinical encounter (i.e., SMT rendered, # of visits, etc.) and the prevalence and incidence of adverse events (AEs) reported.

Results: Two-hundred sixty-four chiropractors reported on 512 children. A convenience sample 264 chiropractors (female=159; male =105; average age=34.95 years) participated in this study. The majority practiced in the United States with overall practice experience averaging 8.22 years. Over 50% received training in a pediatric chiropractic post-graduate program. The primary SMT technique were Diversified Technique (N=117) followed by Activator Methods (N=35), Gonstead Technique (N=24), Thompson Technique (N=20) and Sacro-Occipital Technique (N=20). Of the 679 subjects registered by chiropractors, 512 (i.e., response rate =75%) completed the study to provide data on AEs. Risk estimates for the occurrence of a first AE was calculated such that if 1 million children are monitored under chiropractic care for one year, 880 children would experience an AE, 141 would experience a second AE and 28 children would experience a third AE.

A convenience sample of 449 parents (368 females; 53 males; 28 unknown; average age=33.73) participated in the study. The parents were highly educated with 82% receiving some college education or higher. A convenience sample of 449 children (228 males; 221 females; average age=4.46 years) were reported. The motivating factors for chiropractic care was for wellness care (37%) followed by care of NMS complaints (21%). The vast majority (60%) of patient complaints were <6 months duration followed by 24% at >2 years duration and 16% at 12 months duration. Medical care was received by only 35% prior to chiropractic presentation. A total of 20 AEs (prevalence =4.45%) were reported in 17 patients. The AEs minor and self-limiting (i.e., soreness and/or stiffness). Risk estimates determined that if one million children are monitored for AEs;
978 children would experience a first AE while 172 would experience a second AE. Conclusion: This study provides supporting evidence that AEs associated with pediatric chiropractic SMT are rare. We encourage further research in this field.

• In this 2015 study, researchers analyzed Medicare claims on more than 1.1 million people aged 66 to 99 who visited a chiropractor or primary care physician to treat neck pain. They then noted the occurrence of first stroke after the office visit and compared the hazard of stroke within 30 days for the two groups: patients visiting chiropractors and those visiting primary care physicians. The specific incidence of VBS was too small to report. The researchers found that the incidence of any type of stroke among all patients was extremely low. For patients who saw a chiropractor, the risk of stroke was significantly lower at 7 days compared to the patients who saw a primary care physician (1.2 per 1,000 vs. 1.4 per 1,000). Whedon JM, Song Y, Mackenzie TA, et al. Risk of stroke after chiropractic spinal manipulation in Medicare B beneficiaries aged 66 to 99 years with neck pain. Journal of Manipulative and Physiological Therapeutics 2015;38(2):93-101.

In Closing; The premise of safety issues within our profession is simply inaccurate to the extent that making recommendations on this flawed premise presents an inaccurate assessment. Therefore, the Sunset Committee must remove “Issue 5”, and thus the second part of the key recommendation made which stated, “...postpone the decision on continuation of the Texas Board of Chiropractic Examiners until completion of the Sunset reviews of other health licensing agencies.”

We would also like to address the idea of creating a mega-board:

What makes the profession of Chiropractic work as well as it does, without need for large amounts of safety measures (because it is by its very nature, safe) is that is has been established as a separate and distinct profession. It is this non-redundant healthcare option that exists because no other profession can offer what chiropractic does. Chiropractic addresses the Vertebral Subluxation. No other profession can and does address this aberration to health on mankind. The regulation of chiropractic cannot occur by another healthcare industry in an effective manner without changing the core tenets of chiropractic. Other professions mentioned by the committee simply do not have the same education to be able to understand the practice of chiropractic in a non-invasive manner to the profession.

Chiropractic must have its own regulatory agency in order to preserve the sanctity of the chiropractic profession in Texas. Without its own separate regulatory board, the interpretation of the Chiropractic Act, for instance, will be misinterpreted. It is our strong stance that those without the education the Doctor of Chiropractic attains cannot decipher the practice of chiropractic. Nor should a Chiropractic board be in a regulatory position over any other profession. Chiropractic is a distinct and separate healing art and should be treated as such.

Thank you for allowing for comments, please do not hesitate to contact the CST for any other information regarding this very important matter.

Scott G. Walker, DC
President Chiropractic Society of Texas