

# History Of The Documentation Of The Subluxation

*Does the solution to our future lie in our past?*

by Dr. John Maltby



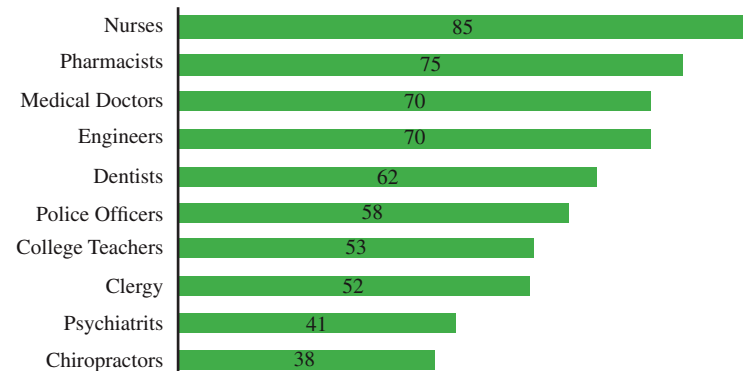
No matter what you think of Bartlett Joshua (BJ) Palmer, he seems to have been on to something. In 1938, the public's view of chiropractic was at an all-time high. Now, according to the most recent Gallup Poll numbers, it appears we have hit an unprecedented low. The truth about the 2016 Gallup Poll, which those touting its value are hiding, is shown clearly in the infographic below. So what is it BJ knew in 1938 that we may learn from today?

Many years ago, while a student at Palmer, I stumbled into a basement room of Palmer College where I found boxes of the BJ Palmer Clinic's patient files from the 30s and 40s. What became obvious is that BJ knew and valued science. I found pre and post x-ray, and a variety of other scientific measures used to test patients pre- and post-adjustment. He appeared to know, that if we could prove through scientific means that subluxation correction was measurable, we would have what he called "incontrovertible evidence." In 1938 he wrote:

**"Medical contention is: If a patient gets well under chiropractic care, it is a matter of OPINION. In the BJ Palmer Clinic, we go 'scientific with a vengeance.' They DEMAND LABORATORY PROOF. These things we set out to prove in this clinic by use of scientific instruments, with scientific means, in a scientific manner: proofs**

## Gallup Poll: Americans Have Low Opinion of Chiropractors' Honesty and Ethics

Medical Doctors, Five Other Health Occupations Rate Higher



**which are the last word and will be incontrovertible."**

Is it possible that in 1938 BJ was warning us that the world would be more impressed by data and science than philosophy? We all know our philosophy is what separates us from other professions, but in reality is it what patients and the public are most impressed with? We've tried

sports endorsements, extensive practice management approaches, well-thought-out scripting and patient education campaigns, and are still viewed according to Gallup (and our statistics) as the last choice of the public when it comes to healthcare. Although BJ was eccentric, he may have had a wisdom that we need now more than ever. When I ask doctors what they consider objective data, they respond, "Visually assessing range of motion." Really?

What made me extremely aware of the power of BJ's desire for more science in the profession was when I took my vehicle to the auto mechanic for repair. He said, "Your wheels are out of alignment and need repairing or your tires will wear out." In my head I was thinking, "Sure I do...you're just trying to sell me your services." He quickly showed me a computer-generated graph proving the wheels were out of alignment. Did I have a choice? He provided objective proof of the problem, and I said "Okay, fix it."

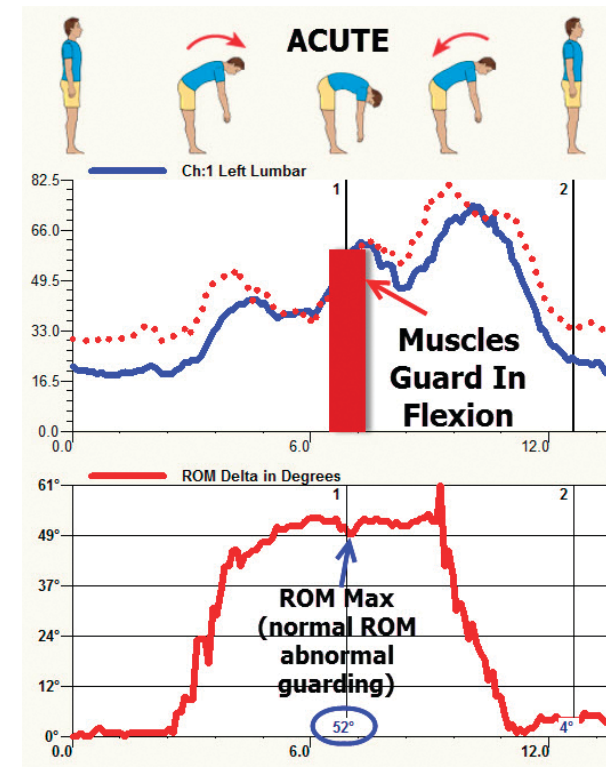


Is it not obvious that if we had the equivalent of the mechanic's alignment tool we would have so much more credibili-

ty with the public? Well...we do. We just fear embracing it and there are many reasons for these fears, including whether or not the technology will support our beliefs about our techniques. The sooner we overcome our irrational fears and embrace technology the more likely we will appeal to a higher percentage of the public, thus helping more people. What is the worst thing that can happen? That the technology does not support our beliefs about the effectiveness of our techniques? The real result? We'll become better, more effective doctors by using this feedback to hone our skills, and we'll stop losing patients for reasons unknown.

There is a technology which has been instrumental in not only winning the respect of the public, including attorneys, but also ensuring that we as chiropractors are seen as the experts in spinal health. I truly want to see a day when surgeons instantly send the patient to the chiropractor first. To achieve this dream we need to integrate BJ's mindset, since everyone including surgeons are data-driven. Last year, I utilized this tool for a chiropractor in an auto accident. This case became so high profile that the insurer hired the most expensive expert witness in the U.S. as my opposition. He was a UCLA Professor and "Super Doctor." The attorney wanted to settle at \$25,000, solely based upon the fact that this MD's opinion would overshadow mine. I said, "Trust me. In our data-driven world, data is indisputable and easily wins over the status or rank of those offering medical opinions." She trusted me, and the case settled for over \$750,000. The patient won, the attorney won, and now I receive constant referrals from top-notch attorneys.

The tool I used is a new device which increases sensitivity



of range of motion (ROM) by adding muscle guarding to the measurement, and is recognized as the Gold Standard by the AMA. It is known as DynaROM as it measures both range of motion and muscle guarding simultaneously. Why? Because over 50% of soft tissue cases have normal MRI and normal ROM. The principle is simple: When we bend into flexion, there is a reflex established in the scientific literature as the flexion-relaxation response.

Essentially, individuals not in pain hang off the ligaments in flexion, and muscles shut off. We cannot control this reflex. Those in pain experience a severe degree of muscle guarding in response to pain in this motion. It takes the same time as range of motion, but has the ability to more accurately assess for injury. More importantly, this paradigm shift protects us from handing insurers ammunition to use against our patients. How common is it to see normal ROM with muscle guarding and pain? Yet we send in our range of motion data which provides insurers with the objective proof that the patient needs no further care. This clever trick on the part of insurers is addressed so effectively with DynaROM that they questioned the validity of it all the way to the Supreme Court in Florida, where the insurers lost and the tool was established as an "approved diagnostic device" by the state legislature. This landmark case in chiropractic protected our rights to see PI patients...the patients that need us the most!

"Are you mechanistic or vitalistic?" seems to be my number one question with this paradigm presented. My response has always been "no." Why? The reality is that we are a mix of both, and the last thing we need as a profession is to add more fuel to anything which divides us as such. These types of silly arguments have been used in the past to create rifts and divisions which the world uses against us to make us appear undefined and without identity.

Perhaps BJ knew science could provide the proof we need to establish our identity once and for all. Those who reject the integration of science into our profession simply fear finding out that their beliefs are limiting them, with a world of new possibilities available to them by way of a minor shift in mindset. A great benefit is that objective data helps chiropractors fine-tune their skills, making them better doctors. We live in a data-driven world. It is time as a profession to embrace this, and not fear it. The worst that can happen is that we are perceived by the public as the knowledgeable professionals we know we are. We just have to show it. Heinlein said it best, "If it can't be expressed in figures, it is not science; it is opinion." BJ Palmer may have been eccentric, but he may have also been right. *(References Available On Request)*

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