

Laboratory diagnosis in Ontario and the need for reform relative to the profession of chiropractic.
JCCA 1997; 41(4):205-220.

The clinical laboratory in chiropractic practice: what tests to order and why?
JCCA 1997; 41(4):221-230.

Pertinent case studies illustrating the need for laboratory accessibility for Doctors of Chiropractic: a clinical conundrum.
JCCA 1997; 41(4):231-236.

To the Editor:

I would like to address the concerns I had after receiving the December JCCA. The main focus of the Journal was laboratory diagnosis and chiropractic. Why does our profession feel the need to become more like the medical model when the rest of society is choosing to move away from it.

The Eisenberg study revealed that in 1990 there were 37 million more visits to alternative health care providers than traditional medicine. There is a health care paradigm shift occurring in our society and some in our profession would rather become more like what people are moving away from. Can this journal not attract articles that reflect chiropractic and it's health, wellness, and quality of life benefit. This is where the health paradigm is shifting. I recently pulled an article off the Internet by Coulter et al. in Topics in Clinical Chiropractic that stated in a three-year randomized study of senior citizens over 75 years of age revealed that patients who received chiropractic care reported better overall health, used fewer prescription drugs, and spent fewer days in hospitals and nursing homes than elderly non-chiropractic patients. These are the types of articles I would love to read in the JCCA. Lately the Journal of Vertebral Subluxation Research has been on my reading list and more often than not the cellophane stays on the JCCA. The JCCA should publish articles that reflect chiropractic today and where chiropractic should be heading tomorrow. I would hope the next issue of JCCA will not include chiropractic and the need for prescriptive drugs and surgery, but it would not be a surprise ...

Darrell J Dailey, BSc, DC
Brantford, Ontario

To the Editor:

I would like to extend sincere congratulations to all the authors, Drs. Gotlib, Injeyan, and Crawford for three extremely well written articles.

The issue of inclusion of clinical laboratories for diagnosis by the chiropractic profession needs to be addressed and it appears as though you have done this in a most comprehensive manner.

From a humanitarian perspective, it is unconscionable that access to clinical laboratories has been withheld from chiropractors in excess of 20 years in this province. There is no doubt in my mind that the utilization of laboratory science substantially increases the capacity to arrive at an effective diagnosis for patients and more comprehensive care. In the early 1970's, there were two or three different laboratories functioning in chiropractors' offices in Ontario, one of which was located in our office. At that time, we had a computerized laboratory which ran C.B.C.'s and 20 different chemistries with strict protocols and quality and quantity assurance.

I know in my own heart that without the support of the administrative arms of our profession that the pursuit of laboratory diagnosis and clinical privileges commensurate with them will remain elusive for the chiropractic profession.

Your three papers have established three important components for the pursuit of laboratory privileges: those being: 1. The historical use of laboratories by chiropractors (and the inappropriate removal without consultation about those privileges), 2. The rationale for inclusion of specific laboratory tests, and 3. Case studies demonstrating the necessity of the accessibility to laboratory privileges. I commend you for your comprehensive, well written articles and it appears to me that the only hurdle left for you is the sociologic barrier within our own profession as well as within the government.

I strongly support you in your humanitarian efforts.

W Reg Nicholson, MSc, DC
Midland, Ontario

To the Editor in reply:

We acknowledge and thank both Dr. Dailey and Dr. Nicholson for their comments and views.

We must be very clear in understanding our level of responsibility with respect to interpretation of the laws. Diagnosis is not a privilege relegated only to medical practitioners. Rather, it is also a right and responsibility of the chiropractic profession in Ontario. The ability to use laboratory tests will serve to strengthen our position both clinically and legally. This has been the single most important message embedded within our articles.

Access to the diagnostic laboratory only serves to assist in our appreciation and understanding of the complex, physiological interactions we are asked to deal with on a daily basis. Without a proper and complete understanding of these interactions our impressions and diagnoses may be compromised.

As the expanding and competitive health care market moves toward a more evidenced-based practice format, accountability and rationale for services rendered will likely become more of an issue than ever before. The public will demand this. Even though paradigms may shift, professional responsibilities remain unchanged.

It is disturbing to learn that some colleagues advance a

view that is somewhat blinded and myopic. Chiropractic as we have all studied, consists of art, science and philosophy. We must strive to more fully understand the science, especially that encompassing the chemistry of the body, for much regarding the patient's status of well-being, therefore may be uncovered in the process.

It is our duty and responsibility as primary care practitioners, to achieve such a level of understanding, in order to remain confident that the highest level of care has been administered. To ignore the existence of such technology which may be extremely useful to the contemporary Doctor of Chiropractic and beneficial to our patients, may be regarded as irresponsible by today's standards of health care.

Many of our forefathers struggled so that we may enjoy the fruits of their labours. It would be disappointing if the current generation of chiropractors considered it such that further development and evolution of our profession within the area of laboratory diagnosis was unnecessary.

We appreciate the opportunity to have responded to our readers' comments.

John P. Crawford MSc, PhD (Path), DC, FCCSS(C)
H. Stephen Injeyan MSc, PhD, DC
Allan C. Gotlib BSc, DC

ERRATUM

Côté, MJ. Letter to the Editor. Pertussis immunization. JCCA 1997; 41(4):243.

In paragraph two of this letter to the editor, the sentence appearing as:

He has failed to look at Dr. Viera Scheibner's substantial work on the subject, he has failed to read "A Shot in the Dark" by Harris L. Coulter and Barbara Loe Fisher with its 30 plus references and obviously has not listened to mothers of children who have been severely damaged by this procedure.

should have appeared as:

He has failed to look at Dr. Viera Scheibner's substantial work on the subject, he has failed to read "A Shot in the Dark" by Harris L. Coulter and Barbara Loe Fisher with its 350 plus references and obviously has not listened to mothers of children who have been severely damaged by this procedure.