Submission in regard to the discussion paper by national chiropractors board.

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There are a number of points in this paper that I take objection to. In fact I feel insulted that our board would view chiropractors with such distrust and skepticism.

We should be proud that our profession has developed to where it has. Many of the people that formulated parts of this document need to reflect on the hundreds of thousands of lives chiropractic has changed and that the public (who may need protection from a tiny minority) are not stupid. Thousands of people, elderly, elite athletes, mums and dads, active healthy children and babies go to chiropractors every day and continue to go because they feel better. It is safe, effective and gets results.

I believe everybody should have their spine checked. Just like we find it imperative we get our teeth, blood pressure, weight and skin checked. Is our spine less important. Ask the public that come into our offices…They are not stupid. Would they fork out hard earned money for no benefit and continue to do so. This document in part makes chiropractors appear to be coercive, deceiving and money hungry.

As a profession we are positioned to continue to work with symptomatic patients and do what we do well but also assist the growing trend of people that see true health as being the best you can be all of the time and taking proactive steps to avoid ill health.

It seems that broad ranging restrictions are being placed on the profession as a whole due to an inability of associations or state boards to handle complaints themselves and there is a slant in this document that reeks of certain people in positions of power trying to control the way people practice because on some personal level they don't agree with what someone else has done.

There are codes of practice that allow associations and registration boards to deal with complaints and other breaches of behavior. This document is heavy handed and delves into areas that can be dealt with by codes of practice and not through legislation.

Points of objection

Spinal screenings

A spinal screening is done so that we can identify if more thorough examination procedures are required. Of course anxiety is possible in a few cases, just as it is when a patient has high blood pressure or a breast lump is found, however just like these we do further tests that either relieve or justify their anxiety. My experience with screenings is that by far the majority of people know there is something wrong and they are looking for confirmation.

Financial and Management plans should not extend beyond 3 months at any time

This assumes that we are that good that we are going to have everyone functioning perfectly forever with 3 months of chiropractic care. If my patients outcome is to be as good as they can be and they are chronic I would be doing them a disservice by telling them that we can't look beyond 3 months. I don't do long term care plans as standard in my practice, but don't limit me because you don't agree with people that do.

Understanding the principles of immunization against communicable diseases and being immunized against relevant communicable diseases.

If you can show me categorical evidence that immunizations have not done harm I will get immunized. I will also openly recommend it to people. You on one hand want us to give a balanced viewpoint and then put this ridiculous clause that again reeks of someone in a position of power trying to impose their personal views by putting it into this document. Medics have difficulty understanding why many chiropractors don't immunize themselves or their families. It's because we read and take a balanced view of the risks vs benefits. I do not ever influence my patients but encourage them to read and review information and make their own informed choice.

Health care records must be able to provide data for peer review, public health purposes or teaching and research.

What does this mean. I am quite happy for a registration board to view my records however this looks like you are trying to open up avenues to single out practitioners that are not conforming.

As a side point we have strength and also weakness in our diversity. Although I don't agree with everything every practitioner does I also don't see it as "my way or the highway" which this document seems to be slanted toward.

If photographs of people are used in advertising…. Must have been patients of that treatment.

Have the people producing this document ever run a practice. The cost of this alone in regard to pamphlets posters etc is huge. Certain product suppliers are likely to go out of business because of this point alone if allowed to pass.

Substantiation of Claims

This point is likening us to the drug industry who have killed millions of people worldwide. The risks of stroke for example are miniscule in comparison to drug side effects. We have informed consent done on every person that comes into the practice. That should be enough. Do we want such an insignificant risk to be repeated 500 times in the yellow pages. In fact, with the cost of advertising most chiropractors will not be able to advertise at all. Do medical doctors need to advertise a full range of adverse reactions that may result from coming to their office.

Professional Qualifications

I agree that we can't advertise something we are not. However if our practice provides for larger families such as having a dedicated children's area, large rooms staff that will care for children during adult treatment etc we should be able to let people know that is our focus.

Practicing in accordance with the current and accepted evidence base of the health profession, including clinical outcomes.

If you want evidence for everything you should start dedicating your time in convincing governments to direct research spending toward chiropractic research, instead of limiting scope of practice waiting for research to catch up.

Chiropractic was never about treating symptoms and having A+B=C outcomes. It is about checking people identifying subluxation (joint restriction, mechanical joint dysfunction..whatever you want to call it) and helping the spine and thus the nervous system communicate, work and function better.

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As a profession we are positioned to continue to work with symptomatic patients and do what we do well but also assist the growing trend of people that see true health as being the best you can be all of the time and taking proactive steps to avoid ill health.

I hope some of the comments will be taken on board along with comments from other colleagues. We have had very little time to comment on the changes and consult collectively.

Kindest regards

Dr.Glenn Farrant