Chiropractic Draft Guidelines Submission
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Andrew Mutzig o natboards
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To the Chair
Chiropractic Board of Australia

I wish to comment on the proposed guidelines of the Code of Practice and CPD guidelines.

Firstly I would like to express my dismay and annoyance about the brief period the board has given the profession to digest the document that will have an immense influence over our future livelihoods. Why the Board has not personally written an disseminated the guidelines to each and every chiropractor in Australia is beyond comprehension.

While one of the purposes of the board is to protect the public it must also have the best interests of the profession as a priority.

We are a mature profession, yet these guidelines are condescending and demeaning and filled with contradictions that will unfairly limit the chiropractic profession and suppress the public's access to complete information.

No other National Board has issued similar restrictions on their profession as our Board has. Obviously the assumption made, is that the majority of Chiropractors are unethical and as thus require comprehensive restrictions in all areas of our practices. The following examples, I believe, demonstrate this well.

Practitioners should be aware of the validity and reliability of the tools, tests and procedures they use and they should not misrepresent the findings of any test or assessment tool as to their clinical value or significance.
The participant needs to be advised that it is not a comprehensive examination.

Any information provided to a participant at an assessment of this nature must be scientifically and clinically relevant and should not in any way engender fear, or be designed to engender fear.

Practitioners should not tout.

During the conduct of spinal screenings no attempt should be made to use equipment and/or procedures that do not constitute an integral part of the routine practice; or engender fear in the mind of the participant; or

of the chiropractor.

No attempt should be made to deliberately create a false outcome

Practitioners should be aware that 'screening' for health problems may be associated with harms such as false positives which may generate anxiety and unnecessary treatment

The findings of diagnostic tools/ tests should not be used in marketing and advertising, as members of the public may be misled as to the value of those findings in relation to their own situation.

That the services can be a substitute for public health vaccination/immunisation.

Why does this document also refer to many items that have no relevance to the chiropractic profession?

For example

6.2 Use of warning statements for surgical or invasive procedures

6.4 The Psychology Board advises registered psychologists that use of the title 'doctor' in their practice, has potential to mislead members of the public. Specifically, patients or clients may be misled into believing that the practitioner is a psychiatrist when they are not. Therefore, registered psychologists may not use such a title unless they hold a doctoral qualification from an approved higher education provider as listed in Part 2-1 Division 16 of the Higher Education Support Act 2003 (Cwlth), or an overseas institution with an equivalent accreditation status. Where a registered psychologist holds a doctoral qualification that meets the above standard, if they advertise their services to the public, they should make it clear when using the title 'doctor' that they are not a registered medical practitioner or psychiatrist, for example:
Dr Vanessa Singh (Psychologist) or
Dr Ivan Hassam (Doctor of Psychology)

I would now like to point out some specific concerns I have about the Guidelines.

1) Advertising

Chiropractic is struggling as a profession with incomes and practice volumes plummeting. To severely over restrict patient education is cutting another lifeline to business survival.

We live in a mass media world in which a vast amount of expensive medical advertorials and medical TV serials present thousands of testimonials that promote medicine. Chiropractic has no counter to that advertising and is outmanoeuvred in the marketplace. Most new patients are anxious about coming to a chiropractor simply because of the majority of public opinion. An opinion that is almost totally unfounded and yet continually perpetuated. Of course that anxiousness is gone once they have experienced chiropractic for themselves.

Section 5 in the Guidelines for Advertising states *advertising of services must not use testimonials or purported testimonials about the service or business. Testimonial means a statement in support of a particular truth, fact, or claim, a personal recommendation.*
Does that mean for example a chiropractor cannot state the truth that: "Chiropractic works"?

Further the guidelines state that *advertising includes any form of public or private communication that could reasonably be seen as an intention to promote the profession, the individual practitioner or chiropractic practices.*

This effectively prohibits private communication that mentions third party reports, cases or previous discussions about others cases. This is suppression of freedom of speech.

Also, this definition is not intended to apply to *material issued by a person or organisation for the purpose of public health information or as part of a public health program.*

Please define "public health information". Is not the information of a regulated health service or health profession, "public health information"? You contradict this in Section 1.1 in the Code of Conduct: Practitioners have a responsibility to protect and promote the health of individuals and the community.

Practitioners should not allow the services they provide to be advertised or make themselves available for 'advertorials', media reports or magazine articles to promote particular health services or therapeutic goods unless they have made specific arrangements to approve and sign off the content and have had reasonable opportunity to ensure that the published version of the advertorial or article adheres to these guidelines.

Does this mean that chiropractors will not be allowed to speak with the press from now on? Press interviews do not allow the luxury of pre-approval before going to air.

2) Code of Conduct

Section 9.2 Practitioner health.

a) Whether one attends a general practitioner or another practitioner or no-one has nothing to do with "good practice". You can not enforce the way I care for my health.

c) *Understanding the principles of immunisation against communicable diseases and being immunised against relevant communicable diseases.* Forced medication should never be a condition of registration in a free society.

Section 2.10.7 *In planning chiropractic management of children, practitioners should consider:*

frequent chiropractic checks or treatment of children without symptoms or signs has not been supported by current available evidence and is currently not recommended, except for assessing developmental milestones. Should a parent elect to have their child undergo regular chiropractic examination or treatment in the absence of any clinical justification then it is the responsibility of the practitioner to provide the parent with a balanced view of the factual evidence relating to such examination or treatment as part of the informed consent process;

This is no different for any other group of the population – It is standard practice in many health care disciplines to undergo examination in an asymptomatic state. Why single out children?The majority of procedures used in health professions have insufficient evidence anyhow, of a gold standard nature. However if you were to do a literature search, you would actually find much evidence supporting this care. I am concerned by the overall lack of knowledge of the Board when it comes to understanding the level of research that is present in the literature. This does not apply to just this section, but to the Guidelines generally. The demeaning attitude present throughout the document is found here again.

2.11.1 *These frequency and duration of care guidelines are provided to assist chiropractors in their clinical decision-making. The primary goal of chiropractic care is to promote and optimise good health and function, maintain it, and prevent the recurrence of injury and dysfunction.*

Where did this definition come from? It is at odds with the ACCC, the CAA and the WFC definitions? Maybe the Board should use the current definition found in the Western Australian Chiropractic guidelines. One that actually encompasses what Chiropractic is truly about.

In addition, the fact that the Board has modelled many of its guidelines on the United Kingdom's GCC guidelines is abhorrent. The controversy and outrage that that document has created should have alerted you to the inflammatory nature of its content. Why couldn't the Board have relied upon the Australian Acts and guidelines? Western Australia has had Chiropractic registration since 1964. We have only recently had a new Act of Parliament to operate under. However, such was the nature and length of the consultation process prior to its enactment, that the succession was barely noticeable. I am not as confident that the same, minimal impact will be felt if these new guidelines are introduced without considerable amendment.

Yours sincerely,
Dr Andrew Mutzig
Chiropractor

Further Submission regarding Draft Guidelines

Andrew Mutzig to: natboards 08/04/2010 11:47 PM

To the Chair, Chiropractic Board.

I have just been informed that the CBA is the only registration board to produce a profession specific code of practice.

All other Boards have either chosen to use the cross-professional code of conduct or to use a code of conduct already endorsed by a peak body (such as the Code of Conduct of the Australian Psychological Society, in the case of psychologists).

I am frustrated that this profession continues to destroy itself from within. If the Board wishes to perpetuate this, then these draft guidelines are the answer.

I implore the Board to reconsider the Code of Conduct that has been drafted. We are at a crossroads where there is a wonderful opportunity to establish a document that will inspire a thriving profession. Wouldn't the Board prefer to leave that as their legacy, rather than produce such a subversive instrument that has the potential to wreck the livelihoods of many Chiropractors and lead the profession into oblivion.

Sincerely

Dr Andrew Mutzig
Chiropractor