

# Chiropractic: The Right Choice All Along

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*Why was your freedom to  
choose chiropractic care  
threatened all the way to  
the Supreme Court?*

Dear Reader:

As you know, there's been a lot of news about chiropractic lately. Chances are you've heard about it on T.V., or read about it in newspapers and magazines, or heard your friends or relatives discussing their experiences with chiropractic.

Everyday, more and more people are becoming familiar with the healing discipline of chiropractic. Thousands of new patients are attesting to the natural, holistic approach to health by doctors of chiropractic. They are discovering that there is indeed an alternative to the disease and drug orientation of modern medicine. They are being introduced to a large network of highly trained and skillful health practitioners who are getting people well and keeping people well, in many cases, without the use of surgery or drugs.

For many years, chiropractic was one of health care's best kept secrets. You didn't hear much about it and when you did, it may have been something of a derogatory nature. "They're nothing but quacks," or, "They can really hurt you," were commonly heard phrases by those who did not know about this natural healing art called chiropractic.

But millions of loyal satisfied chiropractic patients spread the word: "Chiropractic works! I've never felt better!" The number of chiropractic patients grew substantially as people learned of this healing art through the world's best advertising medium — word of mouth.

Today chiropractic is the world's second largest primary health care profession. To what can we attribute this phenomenal growth? Actually, there are several reasons for chiropractic's success, many of which are addressed in this booklet.

But, first and foremost — chiropractic gets results! Chiropractic has helped when other treatment has failed and studies have shown that chiropractic patients are more satisfied with the care they receive from their chiropractic physicians than are the patients of any other primary health care provider. If the well-established principles of chiropractic were not fundamentally sound, the profession would have ceased to exist years ago. This is especially true when you consider that the profession has been attacked, maligned and discriminated against by the American Medical Association (AMA) for nearly all of chiropractic's existence.

Chiropractic has grown and will continue to grow. Since its largest single detractor — the American Medical Association — has been forced by U.S. courts to stop trying to eliminate chiropractic as a competitor, chiropractors no longer have to endure an onslaught of unrelenting harassment which was nationally orchestrated by the AMA. The chiropractic profession is now freed of the self-serving AMA propaganda and the truth about chiropractic can now be told. And the public is learning that it has viable choices for health care. The more the truth is known, the more chiropractic grows. Its survival is a tribute to its efficacy.

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# What is the Truth About Chiropractic?

TODAY, there is a rapidly growing number of doctors of chiropractic. This makes chiropractic care more readily available to individuals in almost any town or city in North America. In addition, chiropractors are now practicing in 69 countries around the world. The growing number of chiropractors makes the profession much more visible and therefore, more accessible.

Chiropractic care has been included in most health insurance plans, and is currently being included in hospitals and health maintenance organizations (HMOs) throughout the country. Where once chiropractic was locked out, patient demand has forced its inclusion. As a result, many people are receiving chiropractic care for the first time.

## Q. *So, just what is chiropractic?*

Chiropractic is a primary health care profession. Doctors of chiropractic are portal-of-entry physicians — that is, they are qualified to initially see patients exhibiting any type of complaint, then to determine that patient's course in the health care system. Chiropractors utilize a wide variety of diagnostic techniques including x-rays, CAT scans, MRI, blood tests, urinalysis, physical and neurological exams, etc., to determine the nature of a patient's complaint. If the chiropractor determines that treatment of the illness is beyond the scope of chiropractic care, he is ethically and legally obligated to refer the patient to the proper health care specialist. Many patients today are co-managed by medical and chiropractic providers, each participating in their unique way for the patient's benefit.

## Q. *Doesn't chiropractic only deal with spine problems?*

In recent years, chiropractors have become well-known for their successful treatment of back and neck pain ... so much so, in fact, that some people believe that is what chiropractic is all about. The truth is, chiropractic is much more. It is a comprehensive system of health care that believes good health can be achieved and maintained in many instances without the intervention of surgery and/or drugs. Chiropractors are physicians who are trained in all phases of health care — from embryology to geriatrics — and who are trained in a naturalistic,

wholistic approach to that care. Chiropractic care considers the needs of the entire individual, not just his or her back and neck. Chiropractors are concerned about their patients' nutrition, posture, gait, blood pressure, internal organ problems, work environment stress level — in other words, the total person, including their emotional state.

Certainly. A chiropractic physician is qualified and capable of helping patients deal with many diseases and ailments including musculoskeletal and organic disorders. Chiropractors, however, treat organic problems without the use of drugs or surgery, using chiropractic adjustments, lifestyle changes and nutritional remedies. Also, within chiropractic you will find specialists —just as within any other branch of health care. Some chiropractors use only upper cervical (neck) adjustments to treat their patients. Some adjust the entire spine and extremities. Some concentrate on nutritional therapies, while others specialize in sports, industrial injuries, ergonomics and rehabilitation. But for all, the goal is the same — the ultimate healing and well-being of their patients.

Many people fear that the chiropractic adjustment is going to be painful, or perhaps even do harm. Such fears are quite unfounded. Most chiropractic patients find that the adjustment actually feels good. In many cases, the adjustment brings immediate pain relief and provides a sense of well-being. It's certainly nothing to fear. A shot from a medical doctor can be much more distressful. And as for harming you — there are much greater odds of being harmed by a reaction from medication (iatrogenic) than from a chiropractic manipulation. No treatment is 100 percent safe, but fewer therapies are safer — or more effective.

“Quacks” was just one of the labels tacked onto chiropractors by the American Medical Association in its decades-long campaign of misinformation about chiropractic. It may be hard to believe, but the AMA for years sponsored a direct, vicious crusade designed to “eliminate the chiropractic threat.” Though the public was unaware that the AMA was spending millions to eliminate freedom of choice in the health care field, that is exactly what was taking place as medical doctors were taught — and then taught others — that chiropractic health care was a “fraud.” AMA doctors influenced their patients, prejudiced the media, even

compelled educational institutions to weave their web of distortion about chiropractic. But finally the truth came out. The AMA was found guilty by a federal judge in 1989 of conspiring to eliminate the profession of chiropractic, and now the public can and will hear the truth about the healing art known as chiropractic. This happened because, a number of years ago, four chiropractors got fed up with the tactics of the AMA.



THE AMERICAN MEDICAL ASSOCIATION SPENT MORE THAN 25 YEARS and millions of dollars in an effort to contain and destroy the profession of chiropractic. From 1963 until 1975, the AMA's Committee on Quackery (originally called the Committee on Chiropractic) implemented a well-organized and well-financed campaign to "contain and eliminate" chiropractic as a health care alternative.

The Committee on Quackery supervised a team of more than a dozen medical doctors, lawyers and support staff whose job it was to eliminate "the chiropractic threat." In addition to their campaign of disinformation, the AMA brandished a club over the heads of medical doctors, threatening them with censure if they associated professionally on any level with chiropractors.

The AMA sent its agents around the country to medical schools and organizations and referred to chiropractors in very demeaning tones, describing them as “rabid dogs,” and “killers,” who are “unscientific” and “cultists” and “quacks.”

Finally, four chiropractors had enough. Dr. Chester A. Wilk of Chicago, Dr. Michael Pedigo of California, Dr. James Bryden of Missouri, and Dr. Patricia Arthur of Ohio retained a top antitrust law firm, headed by its lead antitrust counsel, Mr. George P. McAndrews, and filed suit in October 1976 against the AMA and a number of related medical societies.

The lawsuit became a bitter legal battle that lasted over 14 years, with trials, retrials, and appeals. In the end, the AMA was declared guilty of violating antitrust laws by conspiring with its members and other medical professional societies to destroy the competitive profession of chiropractic in the United States.

On August 27, 1987, after an eight-week trial in U.S. District Court, Judge Susan Getzendanner wrote a 101-page opinion which concluded that the AMA had engaged in “lawless” behavior in instituting a nationwide boycott of doctors of chiropractic by declaring it to be unethical for medical doctors to associate professionally with chiropractors. The illegal boycott included inducing hospitals under the control of medical doctors to bar diagnostic assistance and facilities to doctors of chiropractic and their patients; involved interference with chiropractors’ educational institutions; involved interference with health insurance programs designed to reimburse patients of chiropractors for chiropractic health care services; and involved a covert, nationwide propaganda effort to ruin the reputations of doctors of chiropractic.

Unrepentant, the AMA appealed Judge Getzendanner’s decision to the U.S. Court of Appeals. On February 7, 1990, the appeals court affirmed the AMA’s defeat.

Finally, the U.S. Supreme Court refused in November 1990 to review the case. At every level, the AMA was found “guilty!”

## You Make The Judgement

**I**N 1967, THE AMA WAS TOLD BY JOHN C. WILSON, JR., M.D., chairman of the AMA’s section on Orthopedic Surgery and, later, president of the American Academy of Orthopedic Surgeons that medical doctors and orthopedic surgeons were essentially ignorant of the causes or corrections of low back problems:

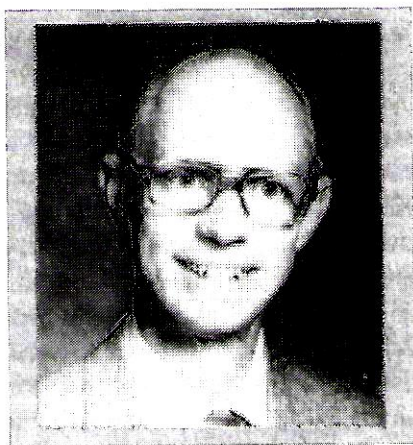
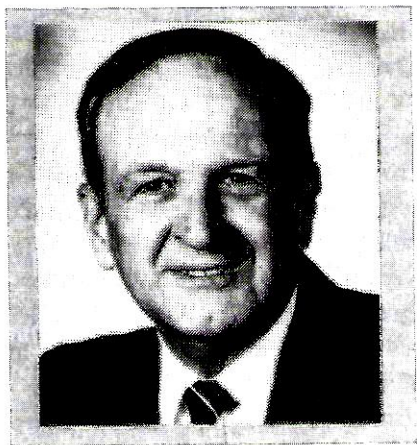
When queried about the lower back, a medical student soon to graduate revealed an enormous gap in his professional education.

One instructor had given him a list of 125 causes of low back pain, from which

the student had concluded that probably everyone with sciatica had a ruptured disc requiring surgery; another instructor had delivered a one-hour lecture on anterior interbody fusion. This young man, well informed concerning the cause and treatment of cardiac arrhythmias, electrolyte imbalance, and alterations in the DNA chain, displayed a disturbing ignorance of the cause and treatment of low back and sciatic pain — one of mankind's most common afflictions. The teaching in our medical schools of the etiology, natural history, and treatment of low back pain is inconsistent and less than minimal. The student may or may not have heard a lecture on the subject, he may have been instructed solely by a neurosurgeon, or the curriculum committee may have decided that clinical lectures are "out" and basic sciences "in." The orthopedic surgeon, to his distress, often sees his hours in the curriculum pared to the barest minimum. A survey of orthopedic residents graduating from an approved program in a large urban area disclosed several alarming deficiencies in their training. They know very little about the natural history of degenerative disc disease in the lower part of the spine. At the postgraduate level, symposia and courses concerning the cause and treatment of low back and sciatic pain are often ineffective because of prejudices and controversy.

These inconsistencies in knowledge and interpretation spawn disastrous sequelae:

- 1.) Patients operated upon after inadequate evaluation.
- 2.) Reliance by physicians on poor quality x-ray films.
- 3.) Surgery done only because of an abnormality in a myelogram without reference to plain films of the lower spine.
- 4.) Exploratory surgery upon the lower back done without sufficient clinical basis.
- 5.) Extensive surgery done for solely subjective complaints.
- 6.) Repeated attempts at spinal fusion — sometimes six or eight, by surgeons of limited experience.
- 7.) Surgery authorized by industrial accident commissions comprised exclusively of laymen.
- 8.) Extensive removal of posterior vertebral elements by neurosurgeons, making stabilization of the lower portion of the spine technically difficult if not impossible.



Left: Plaintiff CHESTER A. Wilk, D.C. Right: Plaintiff JAMES BRYDEN, D.C.

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In 1980, fully thirteen years after the warning by Dr. Wilson, medical orthopedist and professor of psychiatry at eight American medical schools, John McMillan Mennell, J.D., testified, under oath, that medical physicians have almost no education in the musculoskeletal system:

A. I think my testimony was that if you ask a bunch of new residents who come into a hospital for the first time how long they spent in studying the problems of the musculoskeletal system, they would, for the most part reply, "Zero to about four hours." I think that was my testimony.

Q. *The musculoskeletal system comprises what portion of the body?*

A. As a system, about 60% of the body.

Q. *Is it your testimony that the residents to whom you just referred told you they had no training whatsoever relating to problems as to 60% of the body?*

A. And that is just about right.

— *Transcript of testimony of John McMillan Mennel, M.D., who taught at numerous medical schools from 1950 through 1980. (Wilk v. AMA) transcript pp. 2090-2093.*



Dr. James Bryden, a chiropractor in Sedalia, Missouri, was concerned about certain patients who came to him with retrosternal pain. He would run an EKG on them, trying to determine whether or not the pain was referred from a joint dysfunction or whether the pain was from heart problems. Dr. Bryden would send the EKG tapes to Dr. Block, an MD cardiologist who had offices in Sedalia.

A surgeon in the Sedalia hospital heard a rumor that Dr. Block was "dealing" with chiropractors. So the surgeon had his secretary call various chiropractic offices in the town, saying that her elderly mother was coming to live with her and that her mother had always gone to a chiropractor but also had heart trouble, and she wondered who the chiropractor would utilize in case her mother experienced heart problems. Of course, the chiropractors, including Dr. Bryden, said they would use Dr. Block. Within two weeks, Dr. Block was summoned before the Bothwell Memorial Hospital Ethics Committee.

Even though Dr. Block had done nothing in the hospital involving chiropractors, the ethics committee threatened his hospital privileges. They, in effect, informed him that if they allowed any member of the medical staff to deal with a chiropractor, the medical physician, being unethical, could not be allowed to remain on the hospital medical staff.

Dr. Block, realizing that losing hospital privileges can be economic suicide for a medical doctor, was forced to stop dealing openly with chiropractors. But Dr. Block also realized that Dr. Bryden was doing the right thing in seeking consultation for any contraindications to spinal adjusting or chiropractic care. So Dr. Block simply told Dr. Bryden that he would continue his consultations covertly, informing Dr. Bryden of his diagnoses over the telephone rather than by official written reports.

Dr. Patricia Arthur, one of the plaintiffs in the Wilk trial, set up practice in a small Colorado town after leaving school. Without the resources to purchase the x-ray equipment, Dr. Arthur applied to the local hospital for the privilege of using their radiological services. The hospital denied her patients access to the needed services.

Then, according to Dr. Arthur:

"While appealing the denial by eight medical physicians on the medical staff, my patients had to travel 60 miles through the mountains to the closest chiropractor for necessary x-rays. The appeal process resulted in having my profession unfairly defamed by the AMA propaganda machine and the resulting news coverage upset my efforts to build a practice in the small community.



“My decision to abandon my practice and leave the State of Colorado is illustrative of what the AMA has been able to do to me and possibly hundreds, if not thousands, of other licensed professionals.”

Evidence was presented at trial that showed the AMA moved directly to undercut chiropractic education. Proof was shown that in three instances medical societies tried to upset working relationships between chiropractic colleges and state universities or private colleges.

So, while the AMA was maligning the ever-improving education of chiropractors, it was using its bullying tactics to try to impede the quality of chiropractic education.

The AMA barred any medical physician from teaching in a chiropractic college. If they were caught teaching in a chiropractic college, they were black-listed. They could never be employed anywhere in the medical system because they were, per se, unethical.

Did the AMA employ these bullying tactics in the name of “patient care?” Or were these steps — just a few of hundreds — taken to eliminate competition in the health care field?

# The Two-To-One Argument

THE AMA DEFENDANT HAD CONSIDERABLE TROUBLE STICKING WITH the “for the benefit of the patients” defense. A jury didn’t buy it. A number of federal judges didn’t buy it. It’s unlikely that the AMA itself believed it.

Nevertheless, the medical doctors persisted and tried to prove that chiropractic was an inferior service and was, in fact, an “unscientific cult.”

But the more the medical doctors testified, the deeper they dug themselves in. In fact, Judge Getzendanner noted in her lengthy opinion, “... most of the defense witnesses, surprisingly appeared to be testifying for the plaintiffs.” The AMA’s plan to depict chiropractic as unbeneficial or harmful backfired, much to the delight of the chiropractors’ attorney, George McAndrews.

“It became clear during our trial that the evidence was evolving in such a fashion that we could demonstrate that chiropractors offer not just a portion of the services offered by medical physicians, but, in fact a superior service, a better service, a more efficient service,” McAndrews stated.

“At the end we had many exhibits and much oral testimony from impeccable sources that allowed me to make an argument that what the defendants had tried to destroy was something better than anything they could offer for a significant portion of human health needs.”

McAndrews called this evidence his “two-to-one argument.”

Testimony from trustworthy medical witnesses showed that, time and time again, chiropractic got certain classes of patients well in half the time, at half the cost, of medical care. For example:

In 1971 Dr. Roland Martin, the medical director of the Workmen’s Compensation Board in Oregon, did a study of specialist care on workmen’s compensation cases. His conclusion was that chiropractors were twice as efficient as medical physicians in getting injured workers, with comparable injuries, back on the job.

By 1975, C. Richard Wolf, M.D. did a massive retrospective study of workmen’s compensation cases in California. He took 1,000 patient records — 500 of whom had been treated by MDs, 500 by chiropractors — and wrote to each patient. He received replies from 634 of them, rather evenly divided, with 296 having been treated by a chiropractor, the rest by medical doctors. He found that at every single study level chiropractors were twice as efficient as medical physicians. Twice as many patients with no lost time had been treated by chiropractors than had been treated by MDs. At every level of incapacitation, it

was clear that the chiropractors were at least (and in some cases, more) efficient as the corresponding medical care.

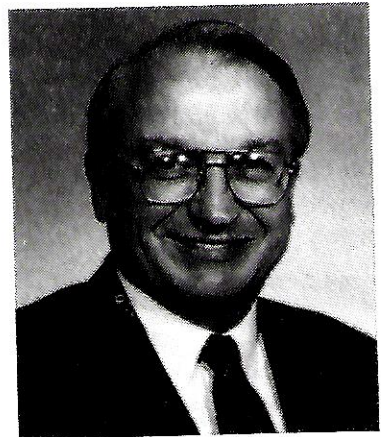
“Average lost time per employee – 32 days in the M.D.-treated group, 15.6 days in the chiropractor-treated group.

“Employees reporting no lost time – 21% in the M.D.-treated group, 47.9% in the chiropractor-treated group.

“Employees reporting lost time in excess of 60 days – 13.2 % in the M.D.-treated group, 6.7 % in the chiropractor-treated group.”

— *Industrial Back Injury*  
by Richard Wolf, M.D.

Dr. Per Freitag, an orthopedic surgeon, worked at two hospitals in the northwest side of Chicago, John F. Kennedy Hospital and Lutheran General. The JFK Hospital had, after 1985, added chiropractors to their medical staffs; Lutheran General had not. Dr. Freitag told the court he had noted at JFK that he did not have to give as many epidural steroids for pain to pregnant women who were taken care of by the chiropractors. He also said, “At JFK Hospital, I have noticed that the orthopedic patients spend an average of five, six or seven days in the hospital. At Lutheran General Hospital, the same type of orthopedic patients spend an average of fourteen days.” Chiropractic care helped reduce the length of patient hospitalization by half. Both hospitals had physical therapists; but only JFK had chiropractors giving chiropractic adjustments.



LEFT: PLAINTIFF PATICIA ARTHUR, D.C. RIGHT: LEADING COUNSEL GEORGE P. McANDREWS LED THE CHICAGO FOUR AND ULTIMATELY, THE CHIROPRACTIC PROFESSION, TO A SWEEPING VICTORY OVER THE AMA.

Such medical testimony helped convince federal judges that the AMA and, in fact, any medical doctor who read medical literature, knew that there were not only significant health benefits in chiropractic care, but that chiropractic care was superior to medical care in many instances. The “unscientific cult” got patients well — faster, and at less cost! To be precise — twice as fast, at half the cost. Two-to-one. The medical doctors proved it.

ANY FORMAL GOVERNMENT STUDIES HAVE BEEN CONDUCTED which have examined the value of chiropractic in the health care, marketplace. All found contemporary chiropractic health care to be safe, effective, and cost-effective.

The most exhaustive study conducted of this type was that done by a government commission in New Zealand. Its 377-page report, *Chiropractic in New Zealand*, followed extensive investigations conducted by the commission in New Zealand, as well as in Australia, England, Canada, and the United States. Among its findings:

- ❖ Modern chiropractic is far from being an “unscientific cult.”
  - ❖ Only chiropractors have the education necessary to carry out spinal manipulation therapy.
  - ❖ Spinal manipulative therapy in the hands of a chiropractor is safe.
  - ❖ Chiropractors are the world’s recognized experts in the biomechanics of the neuromusculoskeletal system.
  - ❖ Chiropractic adjustment can be effective in relieving musculoskeletal symptoms, such as back pain and other symptoms known to respond to such therapy, such as migraine.
- There should be no impediment to full professional cooperation between chiropractors and medical practitioners.
- Government funding for chiropractic services is recommended.

In June of 1990, an independent study appeared in the *British Medical Journal* which showed chiropractic treatment to be more effective than hospital outpatient management. Funded by the British government’s Medical Research Council and carried out by National Health Service physicians, the two-year randomized controlled study of 741 patients and 11 research centers showed:

Chiropractic treatment was more effective than hospital outpatient management, mainly for patients with chronic or severe back pain.

Potential cost savings in health care are staggering. The study speculates dramatic effects if chiropractic care was implemented across England.

Both frequency and duration of absence from work was lower with chiropractic care.

Chiropractic was particularly effective in those with fairly intractable pain; that is, those with a history and severe pain.

At a two-year follow-up, those treated by chiropractic had improved by seven percent more than those treated in hospital.

Such studies, conducted by researchers not associated with chiropractic, provide better validation for the efficacy of chiropractic than even chiropractic researchers could provide. Independent and/or medical studies attest to the effectiveness of chiropractic. Should doctors of chiropractic, therefore, be required to respond to the slanderous remarks of the AMA? Or perhaps, chiropractors can devote their energy to their patients and let the results speak for themselves.



"My CONCERN WITH WHAT APPEARED TO BE SOMETHING LACKING AND WRONG IN THE HEALTH CARE SYSTEM IN THIS COUNTRY, DATES BACK TO MY DAYS AS A STUDENT AT PALMER COLLEGE OF CHIROPRACTIC, BACK IN THE LATE SIXTIES. I DID NOT UNDERSTAND WHY STUDENTS WERE NOT ALLOWED TO UTILIZE THE LEARNING FACILITIES AT THE LOCAL HOSPITALS."

— Michael Pedigo, D.C.

THE LAWSUIT FILED AGAINST the AMA was intended

to benefit not only chiropractors, but all health care consumers. For years, the consumer was fed a steady diet of misinformation intended to limit your option in the health care field. Under terms of the court's ruling, one health care profession can no longer conspire to eliminate another health care profession from the marketplace. You will be guaranteed freedom of choice, giving you, the health care consumer, greater control of how and by whom you are treated.

Benefits of the AMA lawsuit are slowly but surely emerging. Old prejudices are hard to erase, and it will take a great deal of time and effort to implement the type of interprofessional cooperation which will be in the best interests of the health care public.

However, with the proven benefits of chiropractic care, these changes are occurring. Some examples of these changes that may be seen in your community are:

HMOs and PPOs are including chiropractic services as part of their health care package.

Most major health insurance plans now cover chiropractic services.

Chiropractors are more often being included on the medical staffs of hospitals.

Hospitals are willingly providing radiological and laboratory services for chiropractic patients.

Chiropractic and medical doctors are referring and co-treating patients with increasing frequency.

Chiropractors, as recognized experts in musculoskeletal function and injuries, are being utilized as team doctors for sporting events at all levels, from school teams to Olympic teams.

Medical doctors are serving side-by-side with chiropractors on mission fields and in other charitable health care facilities without fear of censure.

No healing art has all the answers to all of mankind's ills. No profession can treat every kind of illness and disability. It is imperative, therefore, that all of the health care professions work together in patient care — cooperating for the ultimate benefit of the patient. Let each practitioner have the freedom to do what he or she does best.

A Latin phrase in the healing arts — *salus aegroti suprema lex* — says it best: "The welfare of the ailing is the supreme law."

chiropractors are entitled by law to use the title “Doctor of Chiropractic,” or “Chiropractic Physician.”

Bear in mind that the primary philosophy behind the chiropractic adjustment is that much of illness stems from an obstruction or abnormal nerve supply caused by a lack of mobility or articulation of the vertebrae which make up the spinal column. The chiropractic adjustment is a means of restoring the spine’s mobility, and nerve function in your body. The chiropractic adjustment is the “drugless” alternative to good health. The manipulation of the spine is a very special skill requiring and dexterity to administer correctly.

Your doctor will be very interested in your “patient history.” He may ask you questions about your activities, your dietary habits, or the kind of work you do to assist him in analyzing your health problems. In addition, he may require spinal x-rays before commencing with the actual physical exam and actual treatment.

In the course of treatment your doctor will probably give you some instructions to follow while at home. Follow his instructions carefully; this will insure the quickest and most effective results.

Chiropractic is a viable form of preventative healthcare for the entire family. From the very young to the very old, chiropractic’s goal is to offer better treatment and advice for today, for a healthier body tomorrow!





# Acknowledgements

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We wish to express our heartfelt thanks to Dr. Louis Sportelli, Dr. Dana Lawrence, and Mr. Ron Hendrickson for their indispensable assistance in putting this project together. And an extra special “thank you” goes to Dr. Leon Grumling and MPI’s associate editor, Dr. Richard Tyler.

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ON AUGUST 27, 1987, THE AMERICAN MEDICAL ASSOCIATION was found guilty of attempting to "contain and eliminate" the chiropractic profession by spearheading a systematic, long-term boycott of chiropractors.

The AMA subsequently appealed the ruling and lost its appeal to the U.S. Court of Appeals and, finally, to the U.S. Supreme Court, which denied the petition.

This historic decision has opened a door that many believe will usher in a new era of interprofessional cooperation and openness which will ultimately benefit You, the health care consumers.

Now, at last, the truth about chiropractors can be told . . .