

What is Chiropractic?

Introduction – Goals – Techniques – Education – Safety – Outcomes

Introduction

Chiropractic is concerned with the diagnosis, treatment and prevention of mechanical disorders of the musculoskeletal system and the effects of these disorders on the function of the nervous system and the general health. There is emphasis on manual treatments including manipulation / adjustment.

(World Federation of Chiropractic, 1999)

By restoring normal function to the musculoskeletal system, chiropractors can play a major part in relieving the condition and any accompanying pain or discomfort arising from accidents, stress, lack of exercise, too much exercise, poor posture, illness and the daily wear and tear that everyone is subject to. The chiropractic approach to health care is therefore an holistic evaluation of the whole body in the context of a person's medical history, life experience, mental state, occupation, sporting history, hobbies and so on. The forces and pressures from the outside acting on the body are identified (e.g. gravity, sport, gym, posture, ergonomics); and the adaptive capacity of, and dynamics within the body to these outside forces assessed and considered; from which appropriate treatment may then be applied.

The **goal of treatment**, in broad terms, is to help restore function to the human body via the neuro musculoskeletal system – whatever the condition; thereby assisting the body to reach its natural equilibrium by breaking the cycle of noxious stimulus and thus facilitating its self-healing mechanisms

Brief history

Chiropractic has evolved over many hundreds of years. Its origins lie in the various hands on techniques used by ancient and medieval physicians and healers ("bonesetters" and the like) and became named as a distinct entity in 1895 in the United States. The Greek work "chiro" means "hands" and "praktikos" translates loosely as "done by". As suggested in the name itself, no drugs or medication are involved and as such, this type of healthcare is quite

literally hands-on. Neuro-musculoskeletal manipulative research, chiropractic technique and therapy continues to strengthen and develop.

In 1925 the British Chiropractic Association was formed and remains one of the professional bodies of UK chiropractors. In Scotland, the Scottish Chiropractic Association undertakes the same role.

In 1965 the Anglo European College of Chiropractic (was founded in Bournemouth, followed in 1997 by the Welsh Institute of Chiropractic) in Glamorgan. In 1994 following many other countries leads, chiropractic was ratified by the UK parliament, bestowing the profession Royal Assent to the profession and in 2001, the General Chiropractic Council (GCC) was established, validating the profession and protecting the title of “chiropractor” to only those who have undertaken the appropriate education and training. Like the General Medical Council for Medical Doctors, the GCC also acts as the regulator of the profession and serves to protect the public from miscreant chiropractic practice.

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Chiropractic is now incorporated (in the UK) within the guidelines/diagnostic triage and referrals for Medical Doctors for back pain care – as prescribed by the NHS-based National Institute for Clinical Excellence (NICE).

Scope of practice, education, techniques, safety and outcomes.....

There is a reasonably **wide scope of practice** and individual chiropractors may favour particular styles, techniques, avenues of treatment and clinical protocols, depending on their own ability and experience. Some chiropractors may prefer to treat children and infants (paediatrics), some are strictly oriented towards sports injuries while others may specialise in elderly (geriatric) care. Most chiropractors, however are well-versed in all of these and other areas of practice (such as cranio-dental and obstetrics) as they comprise an integral part of the undergraduate training at college and thereafter as a post graduate Continuing Professional Development (CPD). Chiropractors are trained to refer for and interpret **X-rays** and **MRI** scans to

assist with diagnosis. If appropriate, a patient, may be required to undergo further diagnostic X-ray or MRI screening before any further treatment is considered.

Common **techniques** that a patient may become familiar with include spinal manipulative therapy (or “adjustments”) – involving low-amplitude, high velocity thrusts to designated intervertebral segments, or “motion units” of the spine (or other joints) to restore and maximise movement. Performed skilfully, these are generally painless but the process may feel slightly awkward at first (a patient would be introduced to this gently). Some temporary discomfort may follow some hours afterwards – which is not unusual – as the body takes a little time to get used to a new position and changed muscle tone. Chiropractic treatment delivered in skilled hands can be applied safely to humans of any age and condition (infants to geriatrics, rugby players to pregnant ladies).

The scope of chiropractic care is therefore not limited only to backs, but invariably includes shoulders, arms, elbow, hands, hips, knees, ankles and feet....not least **because** most of these are involved in the overall chain of movement of the entire body.

It is very important for both patient and chiropractor to understand that some cases may take a while to recover; as many years’ build-up of ingrained abnormal, dysfunctional body movement patterns need to be “undone” – and the patient may initially experience a series of different aches and pains over the course of treatment. In general, the longer the condition has existed, the longer the regime of treatment may take. Some conditions will never be “cured” but rather palliative management and control over the condition attained. Once again, the degree, intensity and duration of any treatment regime will largely depend on each individual’s condition – which will always be discussed in detail and delivered only subject to that patient’s agreement and consent.