

## **Drugs and Chiropractic: Exposing the Red Herring and the Trojan Horse**

By James Edwards, DC

In my opinion, for some time, the pro-drug forces within the chiropractic profession have repeatedly told untruths in an attempt to gain support for their pro-drug position. These untruths include the claim that they only want authority to prescribe drugs so they can take patients *off* medications, and the claim that doctors of chiropractic could lose the right to offer nutritional supplements if we do not have the authority to prescribe drugs. But the biggest two lies they repeatedly tell are what I call the "red herring" and the "Trojan horse," and it's time to expose both.

### **The Pro-Drug Red Herring**

*"If doctors of chiropractic are to ever achieve primary care status, we must have the ability to prescribe drugs."* This is one of the most-often repeated reasons for adding drugs to chiropractic practice – and the most easily refuted, because achieving prescriptive rights is *not* required to achieve primary care status.

If you need proof, you have to look no further than the Alternative Medicine Integration's (AMI) favorable data as reported in *JMPT*.<sup>1</sup> DCs served as primary care providers, but did not have prescriptive rights. In 2004<sup>2</sup> and 2007,<sup>3</sup> *Dynamic Chiropractic* reported on this positive data relative to doctors of chiropractic successfully functioning as PCPs without the authority to prescribe prescription drugs.

So, how were the AMI patients able to obtain medication when the chiropractic PCP had no authority to prescribe? Here is how the president of National University of Health Sciences recently described the program:

"The Alternative Medicine Integration (AMI) study reported by Dr. Richard Sarnat and me in 2004 revealed that in the case of DCs in Illinois functioning as PCPs with the ability to 'prescribe' by having the allopathic doctor prescribe in their behalf, the use of pharmaceuticals was reduced by 50+% over comparable

allopathic HMOs that were used for comparison."<sup>4</sup>

There you have it. DCs could not legally prescribe, but the MD prescribed "in their behalf" based on the chiropractor's diagnosis. We know that system works by the positive data that has been compiled. It also sounds like a good program because it reduced drug usage by over 50 percent.

But I would like to take it one step further and suggest that the MD is really not needed in the equation. Instead, wouldn't the best model be for *pharmacists* to be legislatively authorized to prescribe and dispense medication based on a chiropractor's diagnosis? After all, pharmacists are unquestionably the medical professionals with the most expertise and training in drugs.

Now before someone yells, "Edwards is in favor of drugs; go get a rope and hang him!" let me emphasize in the strongest possible terms that I am adamantly opposed to doctors of chiropractic obtaining prescriptive rights – and the list of reasons why is very long indeed. However, if pharmacists became legislatively authorized by states to prescribe and dispense medications based on a chiropractor's diagnosis, this profession would avoid the many landmines I detailed in [my last article](#).<sup>5</sup> Moreover, it would allow chiropractic to remain a drugless profession because only the patient and pharmacist would make the actual decision about whether a drug is desired or indicated.

Yes, I know the fervent pro-drug folks will oppose the idea of pharmacists prescribing because it does not give them what they really want, which I will discuss next in the "Trojan horse" section. And I also know that many fervent anti-drug doctors will oppose it because it does not keep chiropractic as a "pure" drugless profession. But isn't it time to explore, discuss and debate this possible solution to a volatile issue that truly has the ability to divide and destroy this profession? And at the very time the public is seeking alternatives to drugs, shouldn't this profession be solidifying our position and "cultural authority" as the pre-eminent *nondrug, nonsurgical* spinal care experts? And isn't a pharmacist having the authority to prescribe medication based on a *chiropractic* diagnosis the best of both worlds?

### **The Pro-Drug Trojan Horse**

"*We have no economic incentive in obtaining prescriptive rights for doctors of chiropractic.*" For well over a decade, I have remained perplexed about why the pro-drug forces within our profession fight so hard for prescriptive rights, because when the pharmacist fills a prescription, the doctor receives no compensation whatsoever. It just did not make any sense. Well, it was finally explained to me recently by a doctor – from

a state in which the drug issue has been raging – who understood the motivation and incentives.

It's all about injectables, not "scripts" for muscle relaxants and pain pills, which many of us think might be beneficial in some cases. It's all about injectables, because that's where the money is. For documentation regarding the injectable focus, the 111-hour New Mexico Advanced Practice weekend training program devotes three full seminars (the program has only nine seminars total) specifically to injectables.<sup>6</sup>

Unquestionably, injectable procedures have been the "Trojan horse" that, until now, the pro-drug forces have been able to successfully hide.

Again, I repeat: Prescriptive rights have been presented to the profession as the ability to prescribe medication when a patient is in acute pain and for that reason, many caring doctors of chiropractic can fully understand how that might be beneficial. So, from a practitioner's standpoint, being able to prescribe a muscle relaxant or pain pill sounds well and good.

But that's not what this issue is about. In the final analysis, this is about in-office, injectable procedures that in some instances would be reimbursable by insurance. The light came on for me when I learned this, and hopefully, the light has now come on for you. Folks, this whole drug push is about being reimbursed for injectable procedures!

If you don't believe it, then sit back and watch the pro-drug forces oppose pharmacists being authorized to prescribe medication based on a chiropractic diagnosis when that proposal is submitted to the ACA House of Delegates in mid-September. Know why they will oppose it? Because it would not automatically authorize them to perform or be reimbursed for what they want most: in-office injectable procedures.

### **What's Best for the Public**

Now, let's focus on what is best for the public. Is there really a need for more drug prescribers in our overmedicated society? Absolutely not! Where is the public outcry that DCs need the authority to prescribe? Are there any independent citizen groups urging that DCs should have the authority to prescribe drugs? I think not.

So, if chiropractic prescriptive authority is not in any way related to what the public wants or needs, why are the pro-drug forces driven to adopt the osteopathic model, when osteopaths today have zero identity and precious few of them practice any form of spinal manipulation? I submit that it is about two things: money and the hollow ego gratification of being viewed as a "real" doctor.

The truth, as I see it, is that there are only a handful of DCs – who mistakenly attended the wrong health care college – arguing for this revolutionary change that would forever adversely affect the chiropractic profession. And sadly, I believe they are only doing it for their own monetary and personal self-aggrandizement, with absolutely no regard for how it will affect this profession.

More importantly, the pro-drug forces have absolutely no concern for how it would affect future generations of humankind because if this profession ever adopts drugs, it will only be a matter of time before we repeat history by going down the exact same path as the osteopaths. While that path might be financially beneficial for some current-day doctors of chiropractic, the chiropractic manipulative healing art will eventually be lost forever. We are truly the last defenders.

Armed with this information, it is my sincere hope that mainstream chiropractic will challenge this small group of pro-drug doctors whenever and wherever they attempt to portray their "red herring" and "Trojan horse" statements as the truth.

#### *References*

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