

# A Case for Ethics – Enhance Your Practice – *By Doing It Right*

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“Reading an ethics paper is hard work. It is not something that can be done when the mind is comfortably placed in neutral. A silent dialogue with the work is necessary, and this means approaching it with questions you want the answers for. What is the work about? What questions is the author trying to answer? What conclusions does he reach?”

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Are the arguments that the writer uses any good?”<sup>1</sup> Ethics papers are difficult to read not because the writer attempts to be ambiguous but because the concepts of philosophy, of which ethics are a part, are complex. They have been the source of great debates by philosophers for centuries. What is truth? Whose interests are being served? What and who is right? All these and many more are questions of ethics.

### Proposed questions

The author’s proposed questions are:

- Should bioethics be an integral part of a chiropractic practice?
- Can the use of bioethics increase a professional’s income?
- What is involved ‘In Doing It Right’?

This paper will introduce bioethics, that part of ethics that encompasses all aspects of health care. The challenge to ‘*do it right*’ was idyllically captured when a wise individual was posed the thought-provoking question: “If you could live your life again – whom would you choose to be?” His answer was not to be some great historical figure or famous personality but rather his response was, “I would like to be the individual I could be and should be”.

### The ethical imperatives in chiropractic

An ethical individual is referred to as someone whose behavior matches the values they talk about or promote. It is ‘walking the talk’ and it’s all about ‘how we behave and how we treat one another’. Ethics is the integration of the timeless wisdom of truth, beauty, goodness and unity. Plato suggested that truth, in its highest form, should always be sought. Albert Einstein felt: “Concern for man himself and his fate must always be the chief interest of all technical endeavors ... in order that the creations of our minds shall be a blessing and not a curse to mankind.” Applying these principles to chiropractic provides an ex-

pectation for *‘Doing it Right’*. The ethical practice of chiropractic requires only two things: first the highest form of truth in our communication, and secondly, a primary focus of the chiropractor’s efforts directed towards benefiting the patient’s goals before their own.

### **The commitment**

Commitments are difficult. There have been millions who have changed their lives by making the following commitment. By changing only one word, spiritual to ethical, it becomes a guide to becoming a principle-based chiropractor. “Many of us explained, ‘What an order! I can’t go through with it.’ Do not be discouraged. No one among us has been able to maintain anything like perfect adherence to these principles. We are not saints. The point is, that we are willing to grow along spiritual lines. The principles we have set down are guides to progress. We claim spiritual progress rather than spiritual perfection.”<sup>2</sup> Striving for progress is being a principled-based chiropractor.

### **Universal standard of ethics**

Providers of cures and caring are often called upon to make decisions that go beyond the facts at hand for the discipline they practice. Such decisions are ethical in that they appeal to what one may do, should do or ought to do. The following is a universal standard for patient care that applies to all health care providers. It supersedes all ‘codes of ethics’ regardless of what groups many believe their particular scope of practice to be. There is an activity, which if executed well, makes that person, a good professional. The theory is grounded in three phenomena of the healing relationship and in the realities and actualities of the clinical encounters.

*The fact of illness:* Persons become patients when they acknowledge that they are sufficiently concerned over physical or psychological symptoms to believe they need help. In this state, to varying degrees, they are anxious, dependent, in pain, disabled, and extremely vulnerable and exploitable. They are no longer free to pursue the things they want out of life without impediments. If they are to be helped, healed and cared for they must seek out a health professional, someone who possesses the knowledge to accomplish the ends for, and with, them.

*The act of profession:* “How may I help you?” Implicit in the

question is the promise that the health care professional possesses the knowledge needed to help and to heal and intends to use it in the interest of the patient and not at the expense of the patient’s vulnerability. This “act of profession” is an act of implicit promise that establishes a covenant of trust. This self-imposed trust covenant imposes obligations on the professional from the moment it is made.

*The act of healing:* The promise made to the dependent patient directs the knowledge, techniques, and personal commitment of the professional provider – in helping and healing. The diagnostic, prognostic, and therapeutic acts – which are manipulative, judgmental, cognitive, and so on, must be directed to what is necessary to heal and to help this patient, to a technically correct and morally good decision and action.<sup>3</sup>

These three acts must be the basis of all codes of health care providers. In the ‘act of illness’ it is very definite that a patient is required to have a physical or psychological symptom to be a patient. Questions could be asked about some of the chiropractic practices; the extended care given to the symptom free patients or the attempts to developing a patient/doctor dependency or even offering care to healthy children to extend their longevity? ‘Acts of profession’ assumes we possess good knowledge for the particular problem. Is chiropractic all things for all people? There is some incongruence among chiropractors. There are those that would suggest to parents not to have their children immunized but rather receive only the adjustment. There are others who would support immunization, as the primary protocol and chiropractic as supplemental care. Who among us has good knowledge? ‘Act of healing’ is often the question of third party stakeholders. How long do we treat a patient? Until the patient is better is not the answer.

### **Adjusting to change**

Chiropractic science and theories have been built upon and refined since 1895 but some have a difficult time with change and dedicate themselves to a strict adherence to an out dated past.

One may argue in favor of a theory, based upon available research evidence, but scientists recognize that new data and better hypotheses may overturn theories. A classic example of this was Sir Isaac Newton’s theories of a mechanical uni-

verse, which were accepted as gospel for several centuries. Eventually, Newton's ideas were overturned by those of a lowly patent clerk in Vienna: Albert Einstein. But, like its predecessor, the newest theory of relativity is not necessarily 'truth' but only our best current, meager attempt to understand the physical world around us. Relativity may itself be replaced by a better theory someday.<sup>4</sup>

### ***Skepticism***

Last summer, I saw a shirt that said, "Always remember it's not a lie if you believe it". How often that happens without us giving it much intellectual thought. Our beliefs can and have trapped us into areas of questionable actions.

"The beginning point for the modern era starts in Europe in the early seventeenth century with Rene Descartes and his two ideas. The world was an orderly place; governed by universal scientific laws and the best way to discover these laws was through scientific method. The question for Descartes was, why trust observation itself? Each of us has found at times our observations are mistaken. This worry, that our senses might somehow mislead us, is known as the philosophical problem of skepticism."<sup>5</sup> Chiropractors have been skeptical of science and some have discarded science in favor of practice guided only by their values and/or beliefs.

### ***Importance of ethics***

"One then might conclude that if we wish to live in concert with our values, we ought to engage in ethical analysis. That is, to reflect on what our values ought to be and let them guide our decision-making. How is an examination of our values helpful? First, ethics allows us to be clear on why we do the things we do and allows us to better justify our attitudes and behavior. Secondly, such analysis allows us to unearth assumptions that may be hidden from view. Thirdly, analysis allows for more genuine social discussion about the right thing to do."<sup>6</sup>

"The new patient places a great deal of trust in the provider as well as putting him or herself in a position of extreme vulnerability. This is why it is imperative that the attitudes and practices of individual health care providers and the health care system be exposed to the scrutiny of ethical analysis – to protect the vulnerable group that the system is meant to serve. In fact, this is one of the reasons often cited for why market economies are inappropriate for the provision of health care services."<sup>7</sup>

### ***Presenting problems***

Paul Carey, President of the Canadian Chiropractic Protection Association recently had this to say: "There continues to be far too many chiropractors that make bold unsubstantiated claims. There are also those who are using unproven, silly, or marginal techniques. I remind you that the first obligation of any health professional is to look after their patient's welfare. We as a self-regulating health profession, have the duty and obligation to put our patient's concerns and welfare first. I would suggest that excessive and prolonged treatment plans with marginal, or no results are not in the patient's best interest. We have an obligation to deliver care to the patient when and, as they need it."<sup>8</sup>

The new patient game, that constant chase for new patients, is essential to maintaining a volume of patients in a chiropractic practice. In business it is considered easier to retain a client than get a new one. Over 50% of the patients attended to by chiropractors are there only briefly. The statistics in Alberta are: 20.26% are seen only once, 15.06% are seen only twice, 11.17% are seen three times and 8.39% are there for four visits.<sup>9</sup>

"More than 70% of people that distrust chiropractors have been to a chiropractor." An extensive study prepared for the Canadian Chiropractic Association found: "The research clearly establishes that the struggle can be summed-up in three words: AUTHORITY – RESPECT – TRUST."<sup>10</sup>

"Today, as chiropractic education enters the halls of university-based academia in the USA and around the globe, it is especially important that we sort out in our own minds what we mean by philosophy, science and the identity of chiropractors. Certainly, we can hold little hope that the public will develop a coherent picture of the chiropractic profession, i.e. who we are and what we do, if we have not reached consensus among ourselves."<sup>11</sup>

### ***Words of caution***

A word of caution at this point is necessary. There are few easy answers to ethical dilemmas. There are however, a number of different models that can be applied to difficult and complex questions. Selecting the right model becomes the task in bioethics. This paper offers you a number of different situations where concerns may arise and offers you some examples of models you can follow when exploring ethical issues and developing defensible solutions.

Before you would consider looking to bioethics for a solution, you might first want to identify the problems and concerns of the chiropractic profession.

### ***Utilization of ethics in situations***

There are other strengths and concerns that beg our understanding. Many of the identifiable concerns that appear to be pressing the system could be resolved with a bio ethical approach.

- Issues that have resulted from rapid changes in science.
- Who is right? How are outcomes determined?
- Providers, who make false claims, use questionable practice and abuse patients.

### **Ethical tracts**

An ethical relationship with the new patient may begin when she/he first hears of your reputation. It then develops mutually with personal contact during their first visit to your office. This encounter presents an opportunity to address the first ethical concern: Whose goals are going to be primary? The goal of the patient is relief from pain and distress. The goal of the chiropractor is far too often one of self-interest. This self-centered goal may be to make a lifetime patient out of this first visit patient or it could be, to fit that patient into a program that provides the greatest income for the practice. There may be other conflicts that prevent the doctor from putting the patient's interest first.

The suggested ethical tract to follow on the first visit, as well as subsequent visits, is capsulated in three principles that are the basis of informed consent. Informed consent provides the entire foundation for your care. It involves the principles of respect for the patient, it involves the patient in decision-making and it is the vehicle for patient education. An understanding of the importance of each step can build a lasting relationship of trust with patients. The first step, 'the information component' of informed consent refers to full and complete disclosure of information about their condition and their treatment options. The second step is that the 'disclosure is made' in a manner the patient can comprehend. The third component refers to a 'patient's voluntary decision and agreement' to undergo a recommended procedure. This decision by the patient must be made independent of threats or manipulative influences. There are some office procedures used that border on harassment and many use high-pressure sales tactics.

### **Balance of power**

"Another ethical concern surrounds the balance of power in the doctor/patient relationship. Issues of trust and honesty are worthy of your consideration. First the provider tends to be the expert in their field while the recipient often has little or no knowledge. The patient is further compromised by his/her need for help and loss of well being. In a sense then the provider can have a double power advantage over the recipient of care: both in terms of knowledge and well-being. A patient is placing a great deal of trust in the provider as well as putting him or herself in a position of extreme vulnerability. This is why it is imperative that the attitudes and practices of individual health care providers and the health care system be exposed to the scrutiny of ethical analysis – to protect the vulnerable that the system is meant to serve. In fact, this is one of the reasons often cited for why market economies are inappropriate for the provision of health care services."<sup>12</sup> Practicing ethically challenges you to choose a theory that best fits the situation you may be working in. The following are theories that could be well utilized in a chiropractic setting.

Hippocratic: The Hippocratic principle of *primum non-nocere*, (above all, do no harm) is the oldest and seemingly least controversial moral rule in medicine.

Virtue Theory – is composed of what traits are of good character. Some examples are compassion, courage and love.

Value Theory – is composed of things that are intrinsically valued. Examples are happiness, beauty, truth and morally good character.

Principle of Respect for Autonomy (PRA) – is to acknowledge that person's right to hold views, to make choices and to take action based on personal values. Patient decisions are considered to be autonomous if the patient is (1) deemed to be sufficiently competent to make decisions, (2) makes reasonable choices from a set of available options, (3) has adequate information and understanding about the available choices, and, (4) is free from explicit coercion towards (or away from) one of the options.

Virtue in health professions – virtue is the oldest, most durable concept in ethics. For any professional, there is an activity, which, if executed well makes that person a good



professional. The good nurse or physician (or health care provider) is defined in terms of the ends of the health professions- helping, healing and caring. These are three basic virtues in health care: (1) Predicament of illness, (Vulnerability – Patient is someone who suffers) (2) Act of profession, (Declaring aloud that I may be able to help you. I will use my knowledge in your interest. I invite you to trust me.) (3) Act of medicine/health care, (I am expected to take action to return you to health or to alleviate pain.)<sup>13</sup>

When striving to practice in an ethical manner, challenges and conflicts do arise on occasion. One example may be a situation of moral distress where professional codes of ethics and personal moral judgments conflict with situational arrangements. Fortunately there is an excellent framework to assist us in making your ethical decisions. This framework is posted on the Center For Applied Ethics: <http://www.ethics.ubc.ca>. I would encourage you to visit this site.

If we as chiropractors are expected to maintain this code of ethics, what responsibilities do other health care providers have? Recent investigations have found that some physicians have been extremely unethical and have deliberately and maliciously misinformed the public about alternative services. Positive findings of treatments outside medicine are seldom published and rarely recognized by the official gatekeepers. I believe, this action is not in keeping with the first principle of informed consent or the basic virtues of healthcare. The findings of Pran Manga should be communicated to medical and other health providers.

Pran Manga, noted that in 16 of 24 studies, average total costs favored chiropractic treatment. He states that, “There is an overwhelming body of evidence indicating that chiropractic management of low-back pain is more cost-effective than medical management. The lack of any convincing argument or evidence must be noted. “He adds: “For patients with low-back pain in whom manipulation is not contraindicated, chiropractic certainly confers worthwhile, long term benefits in comparison to standard hospital outpatient management.

In the U.S. lower back surgeries exceed 250,000. A Congressional Committee found that 44,000 of these were unnecessary which amounted to a cost of \$484 million.”<sup>14</sup>

### **A question for us to ask**

In ethical terms one might quietly consider what are the national costs of unnecessary chiropractic care in a given period? We can validate that chiropractic care can be beneficial when given in the acute or chronic phase of condition. What are the risks to care? What do we treat and for how long? What is reasonable and responsible care? One of Manga’s major points was that medicine recognizes that back pain is an enormous business. Such a business must be protected. When ethical models don’t serve the best interest of the larger group (medicine), social power becomes the effective model to follow. There have certainly been some major ethical violations among some of the medical fraternity. Changes have to be made for the benefit of the public and patients we serve. Understanding the power structure is vital to evoke change.

In the postmodern world, it has become something of a culture fashion to believe that there are no objective, universally accepted standards of any kind. Instead, there are different social groups with different levels of social power. The more powerful groups impose their particular standards on the less powerful groups and in so doing, enforce the pretense that their standards are objectively valid. The idea is that the less powerful groups given the same chance would do exactly the same thing. The second problem in the postmodern world is selfishness. People are thought to be naturally selfish, a thought that is reinforced by certain interpretations of scientific laws of evolutionary biology. The more power you have, the more free rein you can give to your inherent selfishness; the less powerful you are, the more you must appear to accept the social rules that are supposedly there to benefit everyone.<sup>15</sup>

The medical profession has traditionally been the self-appointed gatekeeper of health care. Tribal differences like position and power do exist within our health care. Positions of authority can be changed, and frequently are, with the influence of only two groups. In the past and still today unions initiate change but most frequently it is achieved under the influence and demands of the public. A majority is not required to make change but an understanding of critical mass, estimated at approximately 13%, will drastically bring total reform. Chiropractors must form alliances with their patients and extend that relationship of trust and validity to the public. This can be accomplished

by using good models, some of which are presented in this paper. Integration is no longer an option but rather it is a necessity. It will be individual members who will bring integrity and validity to the chiropractic profession. Chiropractic alliances must not only be made with other health care providers, alliances must be developed with unions, industry, public action groups and many other mutually supportive relationships. Much of what we do may not be supported by evidence-based science but much of what we do has good evidence with an abundance of clinical support, which requires further investigation.

### The future

“In a remarkable few years, science has brought us to the threshold of a new era with its’ promise of a better life and its concomitant maelstrom of legal and ethical dilemmas. Medical science fascinates and frightens us. It promises to cure disease and improve the quality and length of our lives. It allows us to imagine where all children are born healthy and where the diseases of old age no longer ravage us.”<sup>16</sup> The role of chiropractors in our society continually changes, as do our responsibilities. We are a part of a scientific world challenged with progressive change and an ethical application of knowledge. Chiropractors, over the past one hundred years, have fought to be recognized, as a valued health provider, as a part of a university system and in legislative assemblies. Each chiropractor is charged with being the warden of this profession. It will be the individual member who will bring integrity and validity to the profession. There is a purpose to life. This story may help to clarify yours.

“Just imagine the earth’s population dropped to a tiny village of only 100 people. If all existing human ratios remained the same our village would look like this ... 57 Asians, 21 Europeans, 14 North and South Americans and 8 Africans. Of these numbers, 30 of the people would be white, 50% of the entire world’s wealth would be in the hands of only 6 people – all 6 would be citizens of the United States, 60 would suffer from malnutrition, 70 would not be able to read, 80 would live in substandard

housing and one person would have a college education.”<sup>17</sup>

A view of the world from this incredibly compressed perspective makes our good fortune glaringly obvious. We have but one life to live. Why not live it with respect and honor? “You have not lived a perfect day, even though you have earned your money, unless you have done something for someone who will never be able to repay you.

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