

## Must we forsake chiropractic terminology?

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It is absolutely mind boggling to try to interpret, digest, and accept the various concessions on the part of many in this profession, who are so willing to forsake much of our heritage in the hope of reaching and attaining scientific and social acceptance.

The latest and most recent push is to eliminate and substitute for specific chiropractic terminologies that have been uniquely identifiable with the art, science, and philosophy of chiropractic. The advocates for such change, no doubt, are sincere and well-intentioned individuals. Their argument appears to be that unless we all speak the same language, one that is understood and accepted by all, we as a primary health care profession will remain out of the mainstream.

Specifically, as examples, in lieu of the word "adjustment", we should substitute the description of "spinal manipulative therapy" as the treatment form of the art. Instead of the word "subluxation," one would suggest "articular biomechanical deficiency." Finally, the recognition and appreciation of an inherent wisdom or innate intelligence in all living things should be referred to, reluctantly, as a "biological phenomenon."

On the surface and in theory, one can conclude that such change in verbiage, even if it is without significant thought and rationale, is justified as a modernization of description, if in fact it is more readily "acceptable". After all, what is the difference: "a rose by any other name is still a rose." Before wishful thinking leads us to any false conclusions, however, let us examine both sides of the story.

Who will deny that orthopods, physiatrists, osteopaths, physical therapists and the like can, and in fact do, physically administer spinal manipulative procedures? If in fact this is so, then what is so special about what we as a profession have to offer sick and suffering humanity as an alternative? Why should we not as a profession promote and defend the "adjustment"? Does it not in fact represent



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a specialized rendering of purposeful procedures that are specifically intended to help adjust not only structure and function, but also the life of the patient and the patient's ability to cope with the daily stresses of existence? Can this be reduced to and truly equated with "spinal manipulative procedures?" Without a complete realization of the dis-

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tion the only result can be no difference from what is already available in the allopathic scheme of manipulative therapies and procedures. May I suggest, therefore, that this interpretation and appreciation of the chiropractic concept and procedure never be denied or lost.

"The subluxation", since its original inclusion within the chiropractic principles in 1895, has been the identifiable lesion of prime concern warranting chiropractic care. It is the very essence of structural cause in many cases of physiological malfunction. Philosophically, scientifically, and as an application of the art, the basis for the chiropractic approach is the location, reduction, and ultimately the removal of such an entity. This embraces the understanding that such a structural interference, as a factor in adversely affecting the nervous system, is on a par with the chemical causes of disease. Clinically, its reduction and/or removal continues to prove the subluxation's relationship to cause and effect. Why then the fear or apprehension of its existence and significance? Why not defend, if we truly believe and accept, what has been recognized since 1895? Will imposing alternate descriptions of the very basis of the chiropractic concern make us more scientific? Why cede knowledge born of experience in favor of science which has come lately, and only vaguely with its own impoverished vocabulary, to recognize the importance of our concepts?

Probably the most controversial phrase in chiropractic, in modern day terminology, is "innate intelligence". Apparently, its connotations are just too metaphysical for

acceptance by the "scientific minds" within our profession. Again, in order to avoid any embarrassment and still maintain a relationship with the mainstream in scientific thinking, we will concede to the alternative possibility of "biological phenomena" as a description. Is it not paradoxical that we will attempt to refrain from the usage of such terminology and in turn accept the possible recognition and existence of such by some of the greatest scientific minds in our modern day? Have we become so egotistical and sophisticated as to deny the existence of the inherent abilities and capabilities of the human organism to heal and maintain itself? Why should we then be so ashamed to allude to the possibility that such an inherent intelligence exists? Just how many times have you and I heard the good surgeon, referring to the prognosis of postoperative patient say, "It's now up to God," or "mother nature," etc. We can not, in the name of science or categorization, drain the Universe dry of every entity with a name warmer or more connotative than "biological phenomenon?"

I truly believe that we, in all of the health disciplines, can in many contexts draw upon the same core language. However, there should be no condoning the suggested denial, substitution, and/or compromise of our very specific descriptive language, which is uniquely chiropractic. If we are to preserve our unique understanding and approach, we must uphold our exclusive participation as a special and distinct health discipline which can be described and defended, in both concept and procedure, only by specific terminology.