

Chiropractic History

David C. Drum, DC, FCCS(C): an accomplished, multi-faceted individual

Douglas M. Brown, DC¹

Pablo Picasso (1881-1973) is quoted as saying, “The meaning of life is to find your gift. The purpose of life is to give it away.” With these few words Picasso captures the essence of David Drum’s existence. From his birth in Moncton, NB, through his formal education in Toronto, ON, to his so-called “retirement” in Crystal Beach, ON, this paper spans 72 years, unveiling the broad range of opportunities for growth David Drum has encountered in his life’s journey and documenting his acceptance of the obligations for proud philanthropy that accompany them. Dr. Drum’s many accomplishments, gifts, and contributions to the profession and world of art are discussed.

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Pablo Picasso (1881-1973) aurait déclaré : « Le sens de la vie est de trouver son don. Le but de la vie est de le partager. » Par ces quelques mots, Picasso saisit l’essence de la vie de David Drum. De sa naissance à Moncton, au Nouveau-Brunswick en passant par ses études à Toronto, en Ontario jusqu’à sa prétendue retraite à Crystal Beach, en Ontario, ce document couvre 72 ans et dévoile la vaste gamme d’occasions de croissance vécues par David Drum pendant son périple de vie, en plus d’indiquer sa fière acceptation des obligations de philanthropie qui les accompagnent. Le grand nombre de réalisations, dons et contributions du Dr Drum envers la profession et le monde artistique sont discutés.

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Growing pains

David Clayton Drum was born 20 minutes after his twin sister Lana, in Moncton, NB, August 9, 1944. This surprised his 20 year old mother, Barbara Phyllis, who was expecting just one bundle of joy, while his father, Wilfred Clayton, a pilot in the Royal Canadian Air Force (RCAF) Coastal Command, was overseas and would not see his babies for the first 2 years of their lives. Coming home in 1946, Wilfred rejected a job with Air Canada to become sales manager of a printing and lithography business in downtown Toronto. "Dad was a fine artist, superb athlete, loved jazz and played the piano. In 1954 he built me a studio and taught me how to use oil paints. When I was nine, my mother left the Anglican Church to become a Jehovah's Witness. She enrolled me in their public speaking school and hoped I would become a boy evangelist. I did my best but my heart was never in it and I resigned after 10 years of growing dissatisfaction, to attend anatomy and human dissection courses, to improve my drawing of the human figure." (Drum CD, old unpublished CV)

David painted every day in grades 10 through 13 under the guidance of Alex Fraser, a wonderful teacher at Gordon Graydon Secondary School. Summers were spent painting landscapes at his uncle's Gatineau cottage, in the Québec Laurentians and in 1961, at age 17, he won the Canadian National Exhibition (CNE) mural competition and was hired by several companies to illustrate their catalogues.

The Canadian Memorial Chiropractic College (CMCC)

Graduating from high school as class valedictorian in 1963, David intended to embark on a career in art, however a misplaced application to the Ontario College of Art dashed his chances for a scholarship that year so he enrolled at CMCC, where he had a full bursary to attend anatomy and human dissection courses. Moving into the original college at 252 Bloor Street West, David was given free reign of the anatomy-pathology museum and library. Lyman C. Johnston, CMCC's Director of Research, commandeered him on the first day.¹ Soon David was illustrating Dr. Johnston's and other professors' papers, along with the text of "Segmental Neuropathy."² As well, he illustrated every undergraduate course for the student note service and served as coordinator of special occasions such as seminars, dances and "Practichiro," a

minstrel show, named and created by Dr. Rich Luck, during his college years (CMCC 1950-54). After winning the J.M. Wallace Award for the highest marks in the freshman year, David decided to stay at the College. "I was just having too much fun." That summer he prepared sets of histological and pathological slides under instructor Dieter Reschka. In his third year, David met Diane Strickland, a ballet dancer who took him to see "Swan Lake" on their first date. He had never experienced a production that beautiful and fell deeply in love with Diane. "Marriage followed swiftly in 1966." In his final year, David developed a course in chiropractic biomechanics and wrote and illustrated the text of, "An Introduction to the Study of Spinal and Postural Mechanics."³ David termed the study an introduction because he believed chiropractors had just begun to understand the part we have "to play in the restoration of the human spirit and movement, by correcting faulty body mechanics." Some of the chapter headings are: Gravity the Constant Stressor; A Brief History and Review of Principles of Kinesiology; The Pyramidal System of Three-Dimensional Postural Analysis; Radiographic Investigation of Functional Spinal Scoliosis; Studies of Abnormal A/P Spinal Curvatures and The Compression Subluxation, which David co-authored with Scott Haldeman, DC, PhD, MD.⁴ This chapter is divided into two sections. Section A, The Patho-Physiology of Peripheral Nerve Compression, summarizes Dr. Haldeman's original research, as recorded in his master's thesis, on the microscopic effects of nerve compression and describes its six main sequelae. Section B, covers the various ways nerve roots can be compressed at the spinal level and details nine ways this can occur.

David passed his Ontario and American board exams prior to graduating in 1967 with intern of the year honours, which he shared with Edward Demchuk (CMCC 1967). His large practice was mainly composed of dancers referred to the school clinic by his wife. In 1968, Dr. Drum joined the faculty, teaching Histology and Principles of Practice and published his first paper in the Journal of the Canadian Chiropractic Association (JCCA): "The Posterior Gravity Line Syndrome."⁵ This article was co-authored by Dr. Johnston, with whom he partnered for 20 years, clarifying ideas, designing equipment, writing papers and travelling widely to hold post-graduate seminars. Drum observed that Johnston was an outstanding educator and inventor who "conceived theories, con-

ducted research, built prototypes of his creations, then marketed and sold them.”

In 1968, David was privileged to meet Glenn Gould, one of the best-known and most celebrated classical pianists of the 20th century. David was then living and practicing in a home on Bathurst Street. Gould heard that David owned Liberace’s Heintzman concert grand piano #100,000 and wanting to try it out, arrived there unannounced one auspicious day. David did not hesitate to abandon his patients in the waiting room, for the private concert of a lifetime and was not disappointed. No one dreamed that Canada’s foremost musician would expire prematurely from a cerebral hemorrhage at the age of 50, just 14 years later.

In December 1969, Part 1 of Drum’s 2 part treatise “Disc Regeneration: The Rationale for a Positive Therapeutic Approach,” appeared in the JCCA.⁶ The author asserts his material is limited to intervertebral disc degeneration of the lumbar spine, NOT frank herniation or prolapse of a nucleus pulposus. Under the first main heading, Variable Disc Stressors, Drum identifies posture, physical fitness, occupation, obesity and pregnancy, as possible sources of lumbar disc degeneration. Fortunately, many of these factors are amenable to change by the patient or doctor. Under Anatomical-Physiological Disc Stressors, Drum discusses seven factors that contribute to the inherent instability of the low back region and asserts: “While it behooves us to be aware of their existence... there is little practical therapeutic significance in this section.” That is because there is nothing we can do to alter them.

In April 1970, Part 2 of Drum’s document on Disc Regeneration was published in the JCCA.⁷ Drum declares one of the by-products of injured disc repair to be fibroblastic production of tough, collagenous scar tissue. Although enzymes involved in a homeostatic system of collagen birth and destruction had been identified in some mammals, they had yet to be found in human beings. Regardless, Drum lists four other factors that govern repair’s effectiveness. 1. Physiological Condition of the Host: Young patients have a far greater capacity for repair than the aged. 2. Nutritional Status: Protein depletion prejudices tissue repair. Patients require nourishing diets rich in Vitamin C, which is essential for collagen formation. 3. Endocrine Function: Endocrine secretions may modify the reparative process. Adrenal steroids such as cortisone depress the rate and adequacy of repair and

should be avoided. 4. Blood Supply: Adequate circulation is crucial to the healing process. Most orthopedic authorities agree that exercise is valuable. What TYPE of exercise is left to the reader’s imagination.

Under Therapy, Drum puts “Prevention” of recurring traumatic episodes to the lumbar spine at the top of his list, including physical and emotional factors among the offenders. Because his prescription for regular athletics is seldom obeyed, Drum advises Johnston’s “Posturizer,” which exerts a pumping action on the lumbar discs. Even here, Drum warns against its use in the presence of acute inflammatory exacerbations such as rheumatoid arthritis or nucleus pulposus herniation. Drum concurs with James Cyriax when he states: “The first measure to be considered in all disc lesions is manipulation.”⁸ The form of manipulation Drum refers to is a “chiropractic adjustment” and because that has many connotations he details the rationale and protocol for handling: Fibrocartilage Hinge; Disc Bulge; Disc Thinning; Hypermobile Subluxations; Root Compression without Herniation and Posterior Facet Abnormalities. As for corsets and belts, Drum champions Johnston’s “Spine Power Belt,” which is fitted over the patient’s greater trochanters and limits motion at the L4-L5 and L5-S1 motor units. One year Drum utilized an intermittent, motorized traction table and found the results disappointing in treating disc bulge. On the other hand, practically the entire weight of the abdominal cavity impacts on the spine and its discs, so the loss of 10 to 15 pounds can contribute substantially to the management of these problems. Drum affirms our profession is in the best position to provide conservative therapy for injured and degenerating discs, “now that we possess a credible rationale behind our therapeutic approach.”

With the cooperation of its editor, Donald C. Sutherland (CMCC 1950), Dr. Drum prepared four “series of investigative case histories that will contribute to the formulation of a comprehensive concept of the pathogenesis and conservative treatment of the injured and diseased lumbar disc.”⁹ Cases are chosen for their instructional value, not because they make our profession “look good.” In the First Series, Case 3 reveals the value of the “health-team concept.” The team consisted of a chiropractor, gynecologist, neurologist and psychiatrist; all of whom were necessary for this patient’s return to normal living. The Second Series was released in March 1971.¹⁰ Case 7 was a patient Drum suspected of having ankylosing spondylitis. X-rays

confirmed this diagnosis and Drum referred his patient to a neurologist who sent him to a rheumatologist where he received Phenylbutazone. One week later he was pain free and able to resume his job. In the early stages, it is difficult to differentiate ankylosing spondylitis from lumbar disc disease. Drum quotes DePalma and Rothman in their text, "The Intervertebral Disc," as stating that "many such errors have been made and many patients with ankylosing spondylitis have been subjected to disc surgery and fusion operations on the lower lumbar spine." The Third Series came out in July 1971.¹¹ On Page 13, Drum provides a handy "Summary of Lumbar Disc Herniation: Its Diagnosis & Treatment." Acute herniation is usually "soft" and associated with trauma. Chronic herniation is "hard," more amenable to manipulative reduction and accompanied by multiple motor unit degenerations. Warning: Protracted presence of contralateral leg pain, bladder, bowel or sexual dysfunction, or signs of cauda equina syndrome, require consultation with a neurosurgeon. Drum says one of the most frustrating factors in dealing with disc lesions is their proneness to relapse and tells his patients this in advance, to avoid their loss of confidence. "To my knowledge, no long range studies have been conducted on this problem within our profession."

February 2-4, 1975, the National Institute of Neurological Diseases and Stroke (NINDS) held a workshop in Bethesda, Maryland, to discuss "The Research Status of Spinal Manipulative Therapy." Participants included 16 chiropractors, 24 medical doctors, 7 osteopaths and 11 basic scientists.¹² This marked the beginning of inter-professional dialogue on the "neutral" issues of science and research. Inter-professional rivalries were deemed unacceptable bases for scientific exchange.¹³

David Drum was invited to attend this conference and present his thoughts. The subject he chose was "The Vertebral Motor Unit and Intervertebral Foramen." The concept of a vertebral motor unit had been created by Prof. H. Junghanns, in 1950. "It gave manipulating spinal therapists a functional concept of subluxations by stressing the relationship between the morphological features of the motor unit and its dynamics." It also hastened the evolution of clinical procedures to discover altered mechanics before they became visible on x-rays and redirected attention from the osseous confines of the intervertebral foramen to the function of the structures passing through it.

Drum describes the intervertebral foramen as "an ellipsoid aperture that gives exit to the segmental spinal nerves and entrance to the vessels and nerve branches that supply the bone and soft tissues of the vertebral canal." Although its neurovascular components may be influenced by spinal discs, the foramina themselves remain anatomically unchanged. Related areas Drum covers are: The Intervertebral Disc and Other Vertebral Motor Unit Ligaments; Vertebral Motor Unit Innervation; The Posterior Spinal Articulations; The Occipito-Atlanto-Axial Atypical Vertebral Motor Units; The Vertebral Motor Unit with Congenital Variations and The Pelvic Motor Unit.

Dr. Drum buttresses his thesis with 209 specific references and closes with these remarks on the "Limitations of the Motor Unit Concept – Areas for Additional Research."

A limitation of the vertebral motor unit concept is its emphasis on segmental analysis and yet, Junghanns certainly never intended his model to be autonomous. In the introduction to his text he refers to the 'organ system spine' as appearing 'no longer, as in the past, as an isolated, segmental, skeletal organ. Today the spine appears in the light of many mutual relationships with the total body; with its equilibrium it exerts influences and also receives forces all of which are interwoven with the far-reaching chain of motion. In addition, the spine is able to exercise considerable influence upon neighbouring structures as well as upon remote organs by its action upon nerves and blood vessels. 'To fully exploit Junghanns' and other anatomical-mechanical concepts in clinical practice, will require the continuation of interdisciplinary dialogue enhanced greatly by this conference.

Expanding horizons

In 1971, David Drum opened a clinic specializing in dance-related injuries in Toronto at 2 Bloor Street East, where he was joined by his favourite student, Jean A. Moss (CMCC 1970). Dr. Moss stayed for three years, before leaving to get her MBA and rise through the ranks to assume the College presidency (1990-2014). In 1974 she was replaced by Dr. Victor Celeste, who graduated from the New York Institute of Chiropractic in 1967. He came to live with David to avoid the Vietnam war draft

and study for his Canadian board exams. "He was the best diagnostician I ever met, possessing a sixth sense that could discern clinical problems. Tragically, he inherited a rare neurological disorder that carried him off after dealing with it magnificently for 20 years." John Beal (CMCC 1972) and his wife Veronica, a registered nurse, soon became team members, as did James Matthews (CMCC 1961). In 1973, Drum began supervising interns in the CMCC outpatient clinic, teaching principles of practice to all four years and teaming with the institute's postgraduate faculty to conduct seminars in Canada and the United States. This year, Drum moved his facilities to 100 Wellesley Street, between the Wellesley and Orthopaedic and Arthritic Hospitals. "Dr. Brian Nelson (National CC 1964) moved in while his new office was being renovated and we combined our talents as art dealers in 19th Century European paintings." John Colwell, MD, a renowned orthopaedic surgeon, invited David to observe his operations and administer spinal manipulative therapy to his patients. "We were able to introduce Dr. Lyman Johnston's concepts into the Department of Biomedical Engineering at the Hospital for Sick Children with Jan Koreska, PhD." Dr. Koreska developed Johnston's models in a paper on orthogonal projection, where the spine could be visualized looking down from above. In February 1975, Dr. Drum had travelled to the NINDS conference accompanied by Dr. Charles Godfrey, as head of physical medicine at Wellesley Hospital, along with the director of epidemiology at the University of Toronto and the Editor of the Canadian Medical Journal. Together, they obtained a substantial grant from NINDS for a paper they coauthored on protocols and therapeutic goals of spinal manipulation. The year ended with CMCC conferring fellowships in the newly formed College of Clinical Sciences on Drs. Drum, Johnston, Vear, Haldeman, Ron Gitelman (CMCC 1961) and Adrian Grice (CMCC 1959). By then, Dr. Vear was administrative dean. He asked Drum to liaise between CMCC and the medical profession so David was making frequent trips to address department chairs in hospitals throughout North America. Vear also encouraged him to organize interdisciplinary postgraduate seminars for Canadian chiropractors, at our alma mater.

Constantly on the go and rapidly running out of space, in 1974 Dr. Drum purchased two adjoining townhouses, in the heart of Cabbagetown, at 115-117 Winchester Street

and immediately began renovations that provided 10,000 sq. ft. of prime real estate for his clinic/art gallery/residence. "Finally, with the space we needed, Lyman Johnston brought his Posture Research Foundation on board and was a constant presence with his 'Tension Release Therapy,' training and certifying chiropractors, three of whom stayed on staff." Howard Marcus, a retired National Ballet Principle Dancer, moved in as coach and exemplar of the Alexander Technique and Feldenkrais Method. Although the systems differ, they are considered comparable, because they train those in the limelight to perform with greater ease and less effort. Ada Mueller, a saintly German medical doctor who had struggled with women in the prison system for decades, came out of retirement and was joined by Karen Kain's sister Sandra, who was a registered nurse, a Tai Chi master, four massage therapists and a kinesiologist. "We were swamped!" When Karen Kain, Prima Ballerina of the National Ballet of Canada, followed by purchasing the townhouse next door, "the whole Canadian ballet world seemed to tag along."

In 1974, Victor Celeste's brother Anthony, a massage therapist, was employed exclusively by David to direct the operation of his co-joined clinic for treating dance injuries and art gallery, at 55th St. and 3rd Ave., New York, in the heart of Manhattan. "Art was always displayed on the clinic walls and available for purchase and we held several exhibits a year in the evening after clinic hours, with wine, food and live music." Every second Thursday night, David flew out of the Toronto Island Airport into Newark, New Jersey and returned Monday morning. On alternate weekends, he soared to San Francisco to interact with the San Francisco California Dance Theatre and the Marin Civic Ballet, with the inspiring Jodie White. "Her son David, a National Ballet dancer, was living in my home helping me comprehend the demands on male ballet dancers and Nadia Potts spent hours demonstrating the rigours of pas de deux lifts." Drum's wife Diane, cooked for entire ballet companies such as the Royal Winnipeg and Les Grands Ballets Canadiens, when they were in town and attending the clinic. Dance Canada asked for lectures as did George Brown College, Ryerson and York Universities in Toronto and Michigan State, Texas Christian, Pacific Lutheran and Brown College in the USA. "Our clinic was on standby for all Toronto live theatre, thereby we met lots of legends including famous actors, comedians, sports celebrities, musicians, conductors, composers and impresarios."

As mentioned, 1970 ushered in a decade of rapid expansion for Dr. Drum, who demonstrated financial acumen equal to his clinical and artistic skills. His first step was to apply for money from the Canada Council for the Arts, to study the prevention and treatment of dance-related injuries. "I was subjected to both written and oral examinations and awarded a \$5,000 grant, which was a lot of cash back then." His next move was to approach the National Endowment for the Arts in the United States. "This independent federal agency graciously funded my lecturing and research in the departments of dance at Brown, Penn State, Texas Christian and Pacific Lutheran Universities, for an entire season." These contacts gave Drum access to the Life Bliss Foundation, a worldwide movement for meditation and healing, that sponsored him to work with the Joffrey Ballet, a professional touring dance company, founded in 1956 and based at that time in New York City. Dr. Drum's Manhattan clinic cared for the health care and physical training needs of the Joffrey Ballet and in turn, the Ballet covered most of the clinic's operating costs. Dancers paid the usual fees to licensed therapists when in New York but in Toronto, OHIP (Ontario Hospital Insurance Plan) paid for our Ontario dancers and there was a surcharge of \$10. Drum's expenses were covered when he was in Montréal and Winnipeg by the respective companies but he did not charge the dancers nor those visiting from other countries. Instead, they gave Drum tickets to their concerts and shared their expertise with his staff. "Basically we broke even but I kept re-mortgaging my Cabbagetown properties when we ran short and was fortunate to have purchased them in a depressed market. Without the continuing escalation in downtown Toronto property values and the lowering of interest rates, I could not have sustained the clinic."

David enjoyed teaching. "I would have stayed my whole life in academia, but my political relationship to the college was becoming strained by my attitude toward adhering to the party line." David often crossed swords with Lyman Johnston. "Lyman would be furious with me when I went off topic during my post graduate lectures. He had his own agenda and wanted me to follow it strictly. I started having similar difficulties in faculty meetings when I began advocating for interdisciplinary seminars and lectures." Without approval, Drum brought in bioengineers, physical medicine specialists, orthopaedic and neurosurgeons at the under- and post-graduate levels. The

students found this enlightening and his classes enlarged with all four years attending, to the dismay of other staff who were missing students. "I never took attendance nor failed a single student. If they were having problems I gave them after hours tutoring in my clinic and did not request remuneration at the undergraduate level."

Hard times hit in the early 1980s, with the onslaught of the AIDS epidemic, which killed Anthony Celeste and decimated their dancer clientele. "Too many funerals and too many creative geniuses lost too young. I retreated to Toronto and welcomed a retired National Ballet dancer, Julie Houle (who would graduate from CMCC in 1998) and her husband, Donald Dawson, also of the National Ballet, onto the staff." Dr. Barbara Pike (CMCC 1982) joined in 1985 and the Cabbagetown clinic busied itself with dancers, musicians, actors and athletes. David and Diane toiled in tandem for most of their marriage, however in 1974, when David began flying to New York and San Francisco on alternate weekends, Diane found herself spending more time in the Canadian dance milieu. Although David cancelled these junkets in 1986, this was the traumatic year Diane's career was cut tragically short, when she succumbed to malignant melanoma.

Moving on

In 1987, David met Barbara Vance, a registered nurse with an extensive background in oncology clinical trials. One of the trials she was monitoring involved a medical doctor in private practice. "He was being paid by a pharmaceutical company for his participation but was forging the results to avoid the time and effort involved in collecting data." David recalls that, "Barbara became exasperated with Lyman Johnston's attitude toward the protocol of proper clinical trials. Discussions carried on into the night, instilling the discipline that helped me avoid premature decisions." At this juncture David's career took off because Barbara did everything for him, so he could practice part time and paint in his off days (4 days a week). After taking a six-month course in custom framing Barbara bought the framing business. Then, in 2006, she picked up the brushes and with no fear of painting, quickly developed a personal style with a daring use of colour and freshness that appeals to young and old. "Now we paint our large format abstracts at the same time, without fighting."

David divides his painting techniques into three per-



Figure 1.
Barbara Vance and Dr. David Drum.

iods. The first is realism, an artistic movement that began in France, after the 1848 Revolution. David uses this method to draw medical illustrations such as those he produced by the dozen, during his early tenure at the school. The second is impressionism, which he employs for landscapes. In the 1980s, David became immersed in the techniques of Claude Monet. Barbara took him to France to experience the famous Monet gardens at Giverny and tour the Monet Museum in Marmottan, Paris. "In those days I sported a straw hat and large beard. Japanese tourists thought I had been hired to impersonate Monet. I spent so long in the Monet Museum that the curator opened a case and let me try on his glasses. The man could hardly see when he was creating those monumental water lily panels!" The third period is abstract expressionism. This post World War II art movement was spawned in New York City in the 1940s. David never blew glass but in 2011 created a series of 20 paintings from exploded

shards of glass from a friend's studio. "There was danger in just brushing against finished works but this experiment led to reverse glass paintings, where luminosity can be maintained without sharp protrusions and they can be placed in humid atmospheres. Because the pigments are sealed within layers of glass, the colours do not oxidize and remain fresh." Drum informs us that the Chinese had figured this out 2,000 years ago and a number of their antique reverse glass paintings still survive in museums. Unlike Picasso, Drum "never abandons one era for another but rotates between all three as my mood and my client's wishes dictate."

In 1986 David downsized, selling the Cabbagetown properties and moving to 226 Carlton Street. In January that year, Ian Coulter, PhD, CMCC's President (1983-90) formed an Alumni Affairs Committee associated with the College Governors' Club.¹⁴ Its objectives were to unite our graduates and friends by providing them with an entertaining evening and to raise money for the institution. From 1986 through 1994, Barbara and David collaborated in the production of nine gala's, in a variety of locations. The most memorable event was the last; held in Toronto's elegantly appointed Granite Club. On this beautiful evening, 295 revellers devoured a delicious dinner, played games of chance, danced to the Murray Alter Orchestra and headed home in the wee hours of the morning, bearing 400 door prizes and 300 gifts obtained at auction. Net proceeds of these nine dinners to CMCC were \$153,000. Their success was assured by Barbara and David who, with their patrons and friends, donated hundreds of art objects with an assessed retail value of \$250,000. In addition, they trucked a load of equipment to each venue and set the paintings up for easy access and visibility. Of course, David was always the accomplished and irrepressible auctioneer, even in 1992 and 1993 when he had to compete with the Toronto Blue Jays, who could be seen on large-screen TV, winning the World Series twice in succession.

Crystal Beach

In January 2006, the Drums "moved to the outskirts of town, where somebody ain't always hangin' around," purchasing an abode at 293 Oxford Avenue, in Crystal Beach, ON. Now a stable community of 3,800 on the northeast shore of Lake Erie, across from Buffalo, NY, from 1888 to 1989, it held an immense amusement park



Figure 2.

Women's Hockey Gold (Permission for publication of image granted by Dr. David Drum).

attracting 20,000 visitors daily, throughout the summer. Barb and Dave's dwelling had been designed and built by Arthur Lafferty of Buffalo, a colleague and admirer of another Buffalo architect, Frank Lloyd Wright. It appeared on the cover of a 1945 edition of *Popular Mechanics* as the "home of the future."

2007 marked the 40th anniversary of Barbara and David's involvement in health care and they decided to "retire from the healing arts to concentrate on art of a different nature." Since then they have opened Le Bateau Gallery of Fine Art in their own lodging. Previously, Drum exhibited annually with the National Ballet in the O'Keefe Centre for the Performing Arts and provided paintings for many American and Canadian feature films. Currently, Barb and Dave show their paintings in Queenston at the RiverBrink Art Museum, at the Art Gallery in Jordan, in Ridgway at the Sanctuary for the Arts, in St. Catharines in the Veffier Gallery, in Buffalo at the Dana

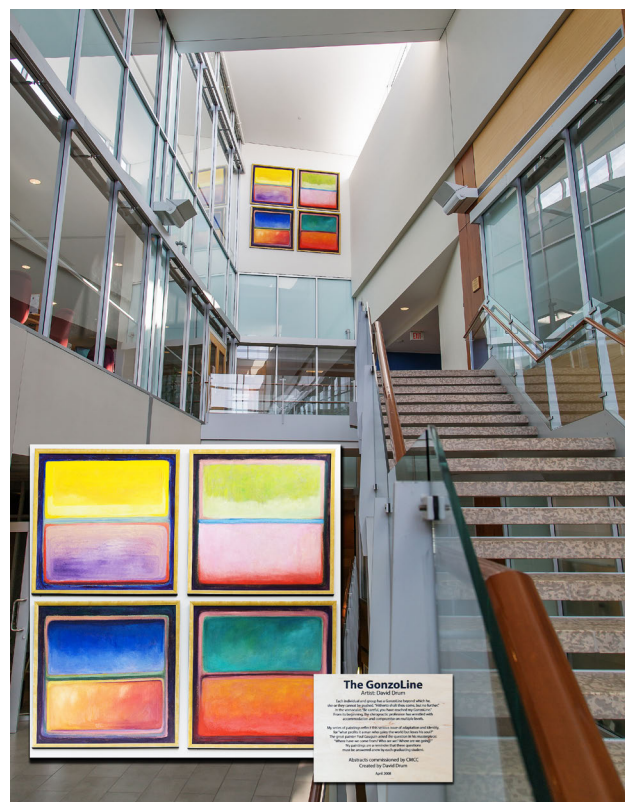


Figure 3.

The Gonzo Line (Permission for publication of image granted by Dr. David Drum).

Tillou Gallery and in Toronto at Waddingtons and the Consignor Art Auctions. They also sold numerous works at the George Enns Gallery (now King Street Gallery) and the Pumphouse Gallery in Niagara-on-the-Lake.

When commissioned by then President, Dr. Jean Moss, to provide artwork for a particular wall at CMCC's new Leslie Street Toronto campus, Dr. Drum complied, finishing and hanging 4 abstract paintings by the summer of 2008, see Figure 3. (E-mail, M. McCallen to the author, Aug 5, 2016) The Leslie Street list of Drum's paintings, commissioned or donated, now (2016) stands at 10, see Figure 2 for another example.

Memories of things past

John Taylor (CMCC 1979) enrolled at CMCC in 1975 and remembers this "as a time of major turmoil." In 1976, Dr. Vear resigned as Administrative Dean and was quickly supplanted by Dr. Sutherland, who was named President/

CEO. Almost immediately, Sutherland fired his Academic Dean, Thomas Maxwell (CMCC 1955). This move reverberated throughout the school yet Drum, who was teaching all 4 years, appears to have been untouched, watching calmly from the sidelines. Perhaps his extraneous sources of income left him with no desire to scramble up the executive ladder. Later it was disclosed that David was quietly donating his salary back to the college. "David was a breath of fresh air and very popular among the classes. Comparatively young yet experienced and savvy in chiropractic, he knew the subject well, had cooperated with others in developing chiropractic scientific theories and could link the art, science and philosophy of chiropractic in a way that was understandable to students with a science background." Dr. Taylor confirms that David warmed his students with the glow of enthusiasm, at a time when they desperately needed it. (Email J. Taylor to the author, Aug 15, 2016)

Upon graduation, Dr. Taylor established a practice in North Vancouver, BC. In 1991, Taylor became a Diplomate of the American Chiropractic Board of Radiology (DACBR) through the Los Angeles College of Chiropractic, completed a postdoctoral research fellowship at the University of California at San Diego in 1993 and was hired by the Western States Chiropractic College, Portland, OR, as an associate professor of radiology. John stayed there until 2000, when he became a professor at the New York Chiropractic College, in Seneca Falls and in 2008, was offered his current position as a professor of radiology and coordinator of diagnostic imaging, at D'Youville College in Buffalo, NY.

Perched on Canada's West coast, John heard little about David for decades. "Fast forward about 35 years and I discover that David is retired in Crystal Beach, ON. In 2013 and now living just across the Peace Bridge in Buffalo, I made a point of visiting David and his lovely wife Barbara Vance. Since then, we have become good friends and I take great pleasure from this relationship." February 2014, Taylor coaxed Drum into becoming the first speaker in the D'Youville chiropractic students' "Mentors Series" program. David calls it "a 90 minute presentation on the good the bad and the ugly... highlights from 40 years of clinical experience." John says David's theme was to make the students feel good about themselves and their futures, emphasizing, "he had a great career because he made his own opportunities rather than waiting for oppor-

tunities to come to him." David addressed his interdisciplinary relationship with doctors at the Orthopaedic and Arthritic Hospital in Toronto, talked about how he treated dancers from the Canadian National Ballet and how he kept his clinic open all night to attend to the visiting Bolshoi company from the USSR. He also spoke at length about his friend and mentor Lyman Johnston and their achievements. "All the students left feeling much better about their careers."

John Taylor is nothing if not persistent. Sunday, May 22, 2016, he cajoled David Drum into delivering the keynote address at the Hooding and Pinning Ceremony, for the Class of 2016 Chiropractic Program at the D'Youville College. Held in the Bauer Family Academic Center, it was attended by 17 graduates and 150 faculty and guests. The following excerpts are taken from Dr. Drum's remarks. (E-mails D. Drum to the author May 25, 2016)

I discovered chiropractic through illustrating Dr. Lyman Johnston's papers at the Canadian Memorial Chiropractic College. He was director of research and his favourite expression was, 'If you can't measure it, it does not exist.' I wondered where this left intuition, inspiration, hope and love. Lyman told us the profession was too vitalistic, needing mechanical and electrical instruments to measure what we were doing with results that could be quantified. He said this was science.

But when we are truly sick, we are not wholly ourselves. We require a healer, a relationship we can trust, not just a provider of goods and services. Every new patient represents a case history of one. The case history is the patient's story. Listen carefully for they are telling you what is wrong. The doctor-patient relationship is further enriched by the intimate hands-on nature of our therapy. You are not alone but part of a system rigged toward health and greater complexity. So even though you are skillfully performing closed surgery by altering joint topography and restoring motion or decompressing tissues, the procedures are not as difficult as you may think.

Dr. Johnston often hinted about introducing a 'perturbation' into a biological system that needed a kick start to a higher level of functioning. I recall a patient on the way to my clinic with chronic neck

pain I was ineffectually treating, phoning to say her cab had dropped into an excavation which threw her against the ceiling. She arrived with a full range of painless neck motion. That was a perturbation but difficult to reproduce. Get your patients into that wonderful, continuous passive motion machine – a rocking chair. Use an antigravity device – the swimming pool. Employ a stationary bike with hands dangling, for spinal mobilization. Embrace the unexpected and never lose a holy curiosity in your clinical interactions. When you are free of self-doubt you will still fail but in more useful ways.

Dr. Johnston personified the motto ‘carpe diem’ and taught me to live life where the action is right NOW! One morning a call came in from the Orthopaedic Hospital half a block away. Could I come immediately to help a visiting surgeon who was teaching a new spinal procedure and found himself in extremis on his hands and knees half under the operating table? Thinking perhaps prolonged flexion may have triggered a rib subluxation, I was ushered into the surgical theatre. The gods were with me, the standing anterior thoracic dorsal lift adjustment worked and he was able to complete the surgery.

The following day I was back in surgery observing a patient having his frozen sacroiliac joint manipulated after copious injections of cortisone. It seemed appropriate to demonstrate what every chiropractor does daily without the danger of general anaesthesia and the expense of a full surgical team. Not to be left out, the hospital physiotherapists asked for a course in sacroiliac adjusting. This led to the head of physical medicine in an associated hospital sharing his techniques. His father had been a ‘bonesetter’ in Scotland and taught him well. One has no idea where staying connected to your community health practitioners will lead. We are all in this together! At this point you are relatively inexperienced and have not seen many of the conditions you will be treating. But do not fret. You are embarking on an awe-inspiring open-ended adventure. The experience will be bigger and more exciting than you can imagine. How could it be otherwise when we are all made of stardust?

Welcome to the profession, Class of 2016!

February 17, 2016, it was announced that four large, framed artworks had been donated to D’Youville College and would soon grace the Chiropractic Department area in the Bauer Family Academic Center. After many years decorating the walls of CMCC with energetic and colourful paintings, Barbara Vance and David Drum decided to fill the bare walls of the chiropractic facility in the same spirit as their donations to the Canadian college. “We hope the spirit and energy that so impressed us in the faculty and student body, is reflected in our paintings.”

As of August 30, 2016, 15 of their original paintings had been hung, beautifying the halls and eliciting complimentary remarks. A number of the works are multimedia abstracts incorporating themes that range from “The Hand of God,” to respectful tributes to Muhammed Ali and David Bowie. “Moreover, the presence of this art in our little area has visibly improved the entire mood of the campus community.”

Barbara and David’s commitment to and support of the chiropractic profession is both boundless and borderless.

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