

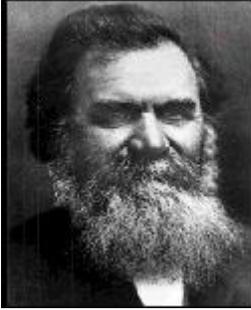
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Chiropractic History



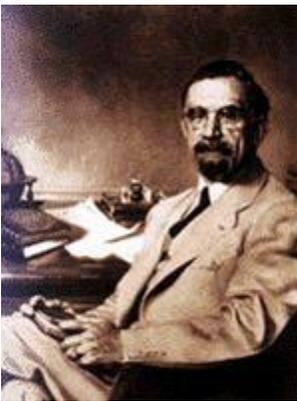
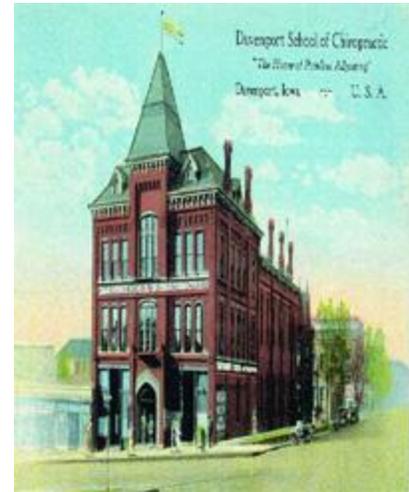
History:

The roots of chiropractic care can be traced all the way back to the beginning of recorded time. Ancient writings from China and Greece dating between 2700 B.C. and 1500 B.C. mention spinal manipulation and the maneuvering of the lower extremities to ease low back pain. Hippocrates, the famous Greek physician who lived from 460 to 357 B.C. publishes a text detailing the importance of manual manipulation. In one of his writings he declares, "Get knowledge of the spine, for this is the requisite for many diseases." In fact the word "chiropractic" delineates from the Greek word "Chiropraktikos" which means "effective treatment by hand."



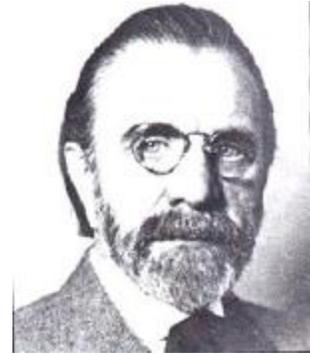
The modern day beginning of the chiropractic profession dates back to September 18, 1895. Daniel David Palmer had an office in a building in Davenport, Iowa. Harvey Lillard, the building janitor, had been almost completely deaf for years since falling down a flight of stairs. Upon inquiring about his condition, Palmer examined him and noticed a lump on his back indicating a misaligned vertebrae. Upon the application of the first specific adjustment ever, the janitor regained full hearing.

Two years later, Dr. Palmer founded Palmer School of Chiropractic in Davenport Iowa, which continues to train doctors today. Over 100 years ago, he had a simple theory: that good health can be sustained naturally, without the use of drugs or surgery, by removing vertebral subluxations and allowing the nervous system to function properly. His theory has stood the test of time.



His genius son, Bartlett Jeremy Palmer (B.J. Palmer), followed in his footsteps and was instrumental in the further development of the chiropractic profession. A prolific writer, lecturer and world traveler, he was President of the Palmer School of Chiropractic from 1906 until his death in 1961. Being one of the first to realize the potential of radio broadcasting, he became a successful entrepreneur in the radio business in the early part of this century, and also followed the trend with successful enterprises in the early days of television in the 1950's. A self-educated individual, Palmer was involved in over 70 businesses in the latter years of his life. His thoughts and actions stand as proof of how what one thinks, says or does today, may affect the lives of many tomorrow.

Throughout the twentieth century, the profession of chiropractic has gained considerable recognition and scientific support. Research studies have clearly demonstrated the value of chiropractic care in reducing health care costs, improving recovery rates and increasing patient satisfaction. Numerous studies have shown that chiropractic treatment is both safe and effective.



The following are excerpts from few of the studies:

In 1988:

World Federation of Chiropractic (WFC) is formed. The WFC, whose members are national associations of chiropractors in over 85 countries, is admitted into official relations with the World Health Organization (WHO) as a non-governmental organization or NGO in January 1997. Dr. Gary Auerbach of Tucson, Arizona is elected the founding president.

In 1993:

The Manga Report in Canada, the first government-commissioned report by health economists looking at the cost-effectiveness of chiropractic services, recommends a primary role for chiropractors with back pain patients on grounds of safety, cost-effectiveness and patient preference, and concludes this will save hundreds of millions annually in direct health care costs and work disability payments.

In 1993 the Ontario Ministry of Health published the Manga Report:

This was a review of literature on the most effective and cost-effective treatments for low back pain. After reviewing all available international evidence, the researchers concluded that chiropractic is "greatly superior to medical treatment in terms of scientific validity, safety, cost effectiveness, and patient satisfaction." In fact this study also concluded that chiropractic care would save hundreds of millions of dollars annually with regard to work disability payments and direct health care costs.

In 1994 the Agency for Health Care Policy and Research (AHCPR) released guidelines for the management of lower-back pain:

The guidelines, which were intended to assist primary-care physicians, were developed by a panel of 23 professionals, including medical doctors, chiropractic doctors, nurses, experts in spinal research, and physical therapists. The panel concluded, among other things, that chiropractic treatment (specifically, spinal manipulation) is recommended for acute low-back problems in adults and should be pursued (in most cases) before pharmaceutical or surgical treatments.

The AHCPR also notes that the chiropractic profession is now the third largest group of doctoral-level providers in the United States (after medical doctors and dentists).

In 1998 Business and Health magazine observed:

"Many companies say chiropractic coverage has lowered their medical and worker's comp costs, while raising overall health and productivity. It's one of the best benefits possible from a quality, quantity and pricing perspective."

In 2000, The Journal of Manipulative and Physiological Therapeutics reported:

"Patients with chronic low-back pain treated by chiropractors showed greater improvement and satisfaction at one month than patients treated by family physicians. Satisfaction scores were higher for chiropractic patients. Higher proportions of chiropractic patients (56 percent vs. 13 percent) reported that their low back-pain was better or much better, whereas nearly one-third of medical patients reported their low-back pain was worse or much worse."

In 2001 The Duke Evidence Report stated:

"Cervical spine manipulation was associated with significant improvement in headache outcomes in trials involving patients with neck pain and/or neck dysfunction and headache".

In 2002 in the Annals of Internal Medicine:

"In our randomized, controlled trial, we compared the effectiveness of manual therapy, physical therapy, and continued care by a general practitioner in patients with nonspecific neck pain. The success rate at seven weeks was twice as high for the manual therapy group (96.3 percent) as for the continued care group (general practitioner). Manual therapy scored better than physical therapy on all outcome measures. Patients receiving manual therapy had fewer absences from work than patients receiving physical therapy or continued care, and manual therapy and physical therapy each resulted in statistically significant less analgesic use than continued care."

The Annals of Internal Medicine also states in 2002:

"Chiropractic is the largest, most regulated, and best recognized of the complementary and alternative medicine (CAM) professions. CAM patient surveys show that chiropractors are

used more often than any other alternative provider group and patient satisfaction with chiropractic care is very high.

There is steadily increasing patient use of chiropractic in the United States, which has tripled in the past two decades."

In 2003 the British Medical Journal published the results of a randomized controlled trial:

183 patients with neck pain were randomly allocated to manual therapy (spinal mobilization), physiotherapy (mainly exercise) or general practitioner care (counseling, education and drugs) in a 52- week study.

The clinical outcomes measure showed that manual therapy resulted in faster recovery than physiotherapy and general practitioner care. Moreover, total costs of the manual therapy-treated patients were about one third of the costs of physiotherapy or general practitioner care.

In 2005, The Journal of Manipulative and Physiological Therapeutics stated:

"Acute and chronic chiropractic patients experienced better outcomes in pain, functional disability, and patient satisfaction: clinically important differences in pain and disability improvement were found for chronic patients."

In 2005:

WHO publishes the WHO Guidelines on Basic Training and Safety in Chiropractic, recommending educational standards for the recognition and regulation of chiropractic services in all member countries. By 2009 these are printed in Arabic, Chinese, English, Finnish, French, German, Indonesian, Japanese, Korean, Portuguese, Spanish and Turkish.

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