

## Chiropractors as Primary Gatekeepers for Animals

The role of veterinarians as exclusive gatekeepers of animal health care is being challenged nationwide. Non-veterinarians (mainly chiropractors and acupuncturists) interested in offering primary care for animals have taken legislative action in states such as Colorado, Oklahoma, Maryland, Nevada, Michigan, Pennsylvania, and New Hampshire. The same is occurring in human healthcare where, for example, chiropractors have lobbied vigorously to become “portal-of-entry” doctors at Veterans Health Administration centers.<sup>1</sup> Physicians are outraged. “It is difficult to conceive how chiropractors, who are not educated in medicine and surgery and are not trained in hospitals in the diagnosis of disease and the medical treatment of sick patients, could ever expect to serve as primary care physicians.... Unless organized medicine responds to the wakeup call, medical practice will be [displaced by persons designated as chiropractic physicians], achieved not by scientific progress, but by persistent, unopposed, political action on both federal and state levels.”<sup>2</sup>

When human chiropractors apply for state licensure as “animal chiropractors”, veterinarians must take notice. Patient health, client welfare, and liability concerns demand it. Already, in Oklahoma, a doctor of chiropractic (DC) can legally practice animal chiropractic without referral by or supervision of a DVM. The statues authorizing this process were passed in 2000, although Oklahoma awaits development of a “safe and effective” process to implement this legislative mandate.<sup>3</sup> Human acupuncturists in Maryland removed the word “human” from their practice act, and now may treat animals independently, if a veterinarian has seen the animal within 14 days prior to treatment.

In Colorado, the American Veterinary Chiropractic Association (AVCA) recently submitted a sunrise application to the Department of Regulatory Agencies (DORA), requesting licensure for human chiropractors to perform animal chiropractic. This would have eliminated the current requirement for supervision by a veterinarian.<sup>4</sup> Arguments made by the AVCA in favor of eliminating veterinarian supervision included issues related to availability, convenience, and competence. According to the DORA Sunrise Review, chiropractors argued that “properly trained DCs [chiropractors] are equally, if not more, capable of diagnosing chiropractic conditions in animals than DVMs. Thus, the Applicant [American Veterinary Chiropractic Association] concludes, a DC does not need to

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<sup>1</sup> Adams D. What can chiropractors do at VA centers? *American Medical News*. November 11, 2002, p. 26.

<sup>2</sup> Anonymous. “Primary care in the next decade” [Letter to the editor]. *Connecticut Medicine*. 2002; 66(6):365-366.

<sup>3</sup> Colorado Department of Regulatory Agencies, Office of Policy and Research. Animal Chiropractors: 2002 Sunrise Review. Obtained at <http://www.dora.state.co.us/opr/2002AnimalChiropractorsSunrise.pdf> on 111302.

<sup>4</sup> Ibid.

be supervised by a DVM... The Applicant argues that it is easier for a DC to learn the anatomy, physiology, pathology, diseases and other conditions of animals than it is for a DVM to learn chiropractic theory and practice.”

After extensive analysis of the situation, DORA representatives concluded that the state’s “General Assembly should not implement the AVCA proposal to create a board of animal chiropractic that would be authorized to license animal chiropractors”. The main issues influencing this decision were protecting public health, protecting public welfare, and protecting animals:

- “Under Colorado’s current regulatory scheme, the public is assured of a minimal level of competence because the DVM remains involved in the process.”
- “The primary justification for regulating veterinarians is to better protect the public health. DVMs receive years of training on the diagnosis, pathology, and epidemiology of animal-based diseases, many of which are, or may be, transmissible to humans. DCs, regardless of whether they have attended Applicant-approved courses, do not possess this expertise and cannot be expected to obtain it in a few hours.”
- “The public is protected against fraud and financial loss because the DVM is held financially responsible and claims may be made against the DVM’s errors and omissions insurance policy.” In addition, the sole insurance company that offered errors and omissions insurance to animal chiropractors has discontinued that line of business, and as such, malpractice insurance is not available for human chiropractors who treat animals.<sup>5</sup>

By providing direct supervision (as required by many states’ veterinary practice acts), a veterinarian can intervene if s/he suspects that the animal is being injured by the procedure. As gatekeeper, a veterinarian can ascertain the relevance of manual therapy treatment for an individual animal before such manipulation takes place, and determine whether such treatment is justified as a first line therapy, an adjunctive approach, or if it may be contraindicated. Chiropractic is not without risk; the most important step before performing manipulation on any animal is completion of a thorough and appropriate work-up, including history, physical exam, and diagnostic tests when indicated. Animals receiving manipulation (especially high-velocity and long lever techniques) may suffer serious and permanent injuries (torn ligaments, muscle damage, luxated joints, and fractures) from the application of excessive force to delicate joint structures.<sup>6</sup>

Furthermore, the licensure of both veterinarians and chiropractors is already regulated by a well-constructed process that utilizes several independent

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<sup>5</sup> Ibid.

<sup>6</sup> Haussler, KK. Chiropractic evaluation and management. In: Haussler KK (ed.). *Veterinary Clinics of North America, Equine Practice*. Philadelphia: WB Saunders Company, April 1999; p. 205.

agencies. The establishment of animal chiropractic as a separate profession would circumvent the authority of the agencies in both these professions, and place undue authority in the hands of the American Veterinary Chiropractic Association. Unlike the veterinary medical board and human chiropractic board, a board developed by the AVCA would create a parallel structure and an administrative and fiscal burden that would benefit only a handful of AVCA-certified chiropractors in Colorado.<sup>7</sup> The current system already in place also avoids any overlap of practitioner liability or board authority.

Finally, as (and if) chiropractors continue to gain licensure to practice on animals without veterinarians they are unlikely to limit their practice to manipulative therapy. Eighty-two percent of chiropractors believe that chiropractic should be viewed as a complete system of health care,<sup>8</sup> and they are likely to view their involvement in the animal healthcare system as providing “total health care”. Lacking comprehensive knowledge of the nature and complexity of animal diseases, chiropractors are neither qualified nor prepared to provide total healthcare for animals.

Safety is another major concern. According to a recent survey, 70% of chiropractors recommend herbs and dietary supplements, while only 30% actively recommend childhood immunizations.<sup>9</sup> In fact, the International Chiropractic Association is opposed to mandatory immunizations.<sup>10</sup> “One third of American DCs believe that ‘there is no scientific proof that immunization prevents disease, that vaccinations cause more disease than they prevent, and that contracting an infectious disease is safer than immunization.’”<sup>11</sup>

Are veterinarians interested in maintaining our status as sole primary gatekeepers for animal health? If so, we must work vigorously and collectively to prevent further erosion of our role in safeguarding public and animal health.

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<sup>7</sup> AVCA Referral Website. Obtained at <http://www.avcadoctors.com/mountain/avcadusmt1.htm> on 05/01/02.

<sup>8</sup> Hawk C et al. Use of complementary healthcare practices among chiropractors in the United States: a survey. *Alternative Therapies in Health and Medicine*. 1999; 5(1):56-62.

<sup>9</sup> Lee ACC et al. Chiropractic care for children. *Arch Pediatr Adolesc Med*. 2000; 154:401-407.

<sup>10</sup> Ibid.

<sup>11</sup> Colley, F Haas M. Attitudes on immunization: a survey of American chiropractors. *J Manipulative Physiol Ther*. 1994;17:584-589.