

# Chapter 9

## Patient Conditions

Survey participants were asked to provide information concerning their management of 115 conditions that they might have seen in their practices during the prior year. (The list of conditions was consistent with the International Classification of Disease-9CM Codes that are routinely used in chiropractic practice. For details on the scales utilized and the exact wording of the questions, refer to pages 8-12 of the survey in Appendix C.) For each of the listed conditions, the following specific responses were requested:

- **Frequency** -- how often had they seen the particular condition during the prior year; if they had not seen the condition, they were instructed not to answer the following three questions regarding that condition
- **Diagnosis** -- did they, in the majority of cases, concurrent with their subluxation-based diagnosis, make a nonsubluxation-based diagnosis of the condition
- **Management** -- what was their choice of management for the majority of the cases they had seen
- **Referral** -- did they refer the majority of patients with the condition for consultation, further diagnostics, or treatment

### Neurological Conditions

Neurological conditions that are often seen by doctors of chiropractic are headaches, peripheral neuritis or neuralgia, and radiculitis or radiculopathy. Seventy-four to seventy-six percent of chiropractors make a diagnosis of each of these conditions in a typical year. Seventy percent of chiropractic practitioners are the sole providers of care for the majority of cases of peripheral neuritis or neuralgia that they see in their practices. The percentage of respondents who solely manage radiculitis or radiculopathy in the majority of cases in their practices is 75.5%. Nearly 87% of respondents acted as the sole providers of care for the majority of headache patients in their practices. Loss of equilibrium or vertigo is sometimes seen by chiropractors. In the majority of these cases, more than half (55%) of respondents comanage this condition with another health care practitioner.

Data for neurological conditions appear in Table 9.1.

Condition	Frequency 0 1 2 3 4 Never Routinely	Nonsublux.- based Diagnosis		Management			Referral <sup>c</sup>
		Yes	No	Not treated	Treated solely <sup>a</sup>	Co-managed <sup>b</sup>	
Headaches	3.3 <b>Often</b>	76.1%	23.9%	2.1%	86.7%	11.2%	10.5%
Peripheral neuritis or neuralgia	2.6 <b>Often</b>	73.7%	26.3%	3.1%	70.1%	26.7%	24.2%
ALS, multiple sclerosis or Parkinson's	0.8 <b>Rarely</b>	47.7%	52.3%	32.5%	4.9%	62.6%	59.1%
Damaged nerve/plexus	1.3 <b>Rarely</b>	62.6%	37.4%	11.2%	26.2%	62.5%	52.4%
Stroke or cerebrovascular condition	0.7 <b>Rarely</b>	47.4%	52.6%	40.9%	4.7%	54.3%	59.3%
Vertebrobasilar artery insufficiency	0.5 <b>Rarely</b>	53.1%	46.9%	45.1%	6.4%	48.5%	64.8%
Cranial nerve disorder	0.8 <b>Rarely</b>	60.0%	40.0%	17.2%	24.7%	58.1%	47.4%
Radiculitis or radiculopathy	2.8 <b>Often</b>	74.1%	25.9%	2.3%	75.5%	22.2%	25.8%
Loss of equilibrium/vertigo	1.6 <b>Sometimes</b>	64.3%	35.7%	7.0%	37.9%	55.1%	43.3%
Brain or spinal cord tumor	0.3 <b>Virtually never</b>	48.2%	51.8%	64.2%	1.9%	33.9%	73.3%

<sup>a</sup> Some conditions which survey respondents indicated they “treat solely” are serious conditions which have not responded to or cannot be treated with medication or surgery, but the condition or its symptoms may respond to chiropractic care.

<sup>b</sup> Comanagement of many conditions by chiropractors consists primarily of identifying and correcting spinal subluxations; additionally, many chiropractors provide adjunctive therapies such as nutritional counseling, corrective or therapeutic exercises, or physiotherapies which may benefit patients with the condition.

<sup>c</sup> Some “referral” percentages may be lower than expected as the condition was already being managed by another practitioner when the patient presented for chiropractic care.

**Table 9.1.** Frequency, Diagnosis, Management, and Referral of Neurological Conditions

## Discussion <sup>1</sup>

The anecdotal and empirical evidence for the success of chiropractic care in the treatment of headaches is significant (Refer to Chapter Two, “Headache Pain”), and 13% of a typical chiropractor’s patients present for treatment of headache or facial pain (Refer to Chapter Eight, Figure 8.3).

Fourteen percent of a typical chiropractor’s patients have been involved in motor vehicle accidents (Refer to Chapter Eight, Figure 8.4). In these accidents, patients frequently sustain peripheral nerve injuries like neuritis/neuralgia and radiculitis/radiculopathy. These neuromusculoskeletal injuries respond well to chiropractic care.

<sup>1</sup> Brief discussions concerning the data on the management of certain conditions are included. Although not explicitly derived from the survey data, these remarks are based on clinical experience and/or research.

Loss of equilibrium and/or vertigo (Table 9.1) can have many etiologies. Some of these etiologies are serious--even life-threatening--health problems that certainly necessitate a medical referral and/or comanagement. However, one etiology that is likely to respond quickly to chiropractic adjustments is proprioceptive alterations in the cervical spine secondary to injury or degeneration.

In each of these conditions, the most likely treatment to be rendered by the treating chiropractor is spinal and/or extraspinal adjustments, therapeutic physiotherapies, and rehabilitative exercises.

## Articular/Joint Conditions

Spinal subluxation/joint dysfunction is the condition most frequently encountered by chiropractors (Table 9.2a). It is seen routinely and only rarely comanaged with, or referred to, another health care practitioner in the majority of cases (1.4% and 1.5%, respectively).

Chiropractors often see the following articular disorders: osteoarthritis/degenerative joint disease, subluxation or joint dysfunction of extremities, sprains, intervertebral disc syndromes, changes in the normal lordosis or kyphosis of spinal segments and facet syndromes. Ninety-three to ninety-six percent of respondents are sole health care providers in the majority of cases of hyperlordosis or hypolordosis of the cervical or lumbar spine and kyphosis of the thoracic spine. In the majority of extremity subluxation/joint dysfunction cases, 92% of respondents are the sole managers of their patients; 7% of respondents either comanage or refer these cases the majority of the time.

In the majority of sprains seen in their practices, 87% of respondents are the sole providers of care; 8% to 10% of respondents refer or comanage the majority of sprain cases seen. Seventy-eight percent of respondents make the diagnosis of sprain concurrent with subluxation in the majority of these cases. In the cases of facet syndrome seen in the prior year, 72% of respondents make this diagnosis concurrent with their subluxation diagnosis the majority of the time; 94% are the sole providers for this condition. Seventy-six percent of respondents are the sole health care provider for the majority of osteoarthritis/degenerative joint disease seen in their practices. Twelve percent of respondents make referrals for the majority of their patients with degenerative joint disease; 21.5% of chiropractors comanage this condition with another provider in the majority of these cases.

Scoliosis<sup>2</sup> is sometimes seen by chiropractors, and 80% of respondents are the sole health care practitioner managing the majority of their patients with this condition (Table 9.2b). Other articular conditions that are seen some of the time in chiropractic practice include bursitis or synovitis, carpal or tarsal syndrome, TMJ syndrome, thoracic outlet syndrome, congenital or developmental anomalies, rheumatoid arthritis, gout, and spinal stenosis. As reflected in Table 9.2b, respondents report various rates of management, referral, and diagnosis.

Respondents rarely or virtually never see four of the listed conditions: dislocation, avascular necrosis, bacterial joint infection, and joint tumors. Each of these conditions has a high rate of referral in the majority of cases.

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<sup>2</sup> Based on feedback from some survey respondents, the authors of this report believe that the majority of survey respondents interpreted this to mean structural scoliosis, as functional scoliosis is seen routinely in the typical chiropractic practice.

Data for articular/joint conditions appear in Table 9.2a and Table 9.2b.

Condition	Frequency 0 1 2 3 4 Never Routinely	Nonsublux.-based Diagnosis		Management			Referral <sup>c</sup>
		Yes	No	Not treated	Treated solely <sup>a</sup>	Co- managed <sup>b</sup>	
Spinal subluxation/joint dysfunction	3.9 <b>Routinely</b>	73.7%	26.3%	0.2%	98.4%	1.4%	1.5%
Osteoarthritis/degen. joint disease	3.3 <b>Often</b>	76.7%	23.3%	2.2%	76.3%	21.5%	12.2%
Hypolordosis of cervical or lumbar spine	3.2 <b>Often</b>	70.0%	30.0%	1.7%	95.8%	2.5%	1.5%
Extremity sublux./joint dysfunction	3.1 <b>Often</b>	72.8%	27.2%	1.3%	92.2%	6.5%	6.9%
Sprain of any joint	3.1 <b>Often</b>	78.0%	22.0%	2.2%	87.4%	10.4%	8.3%
Intervertebral disc syndrome	3.0 <b>Often</b>	77.5%	22.5%	1.1%	70.2%	28.7%	30.7%
Vertebral facet syndrome	2.9 <b>Often</b>	72.1%	27.9%	0.9%	94.1%	4.9%	3.9%
Hyperlordosis of cervical or lumbar spine	2.6 <b>Often</b>	68.8%	31.2%	2.1%	95.2%	2.7%	1.3%
Kyphosis of thoracic spine	2.5 <b>Often</b>	67.9%	32.1%	2.6%	92.7%	4.8%	3.2%

<sup>a</sup> Some conditions which survey respondents indicated they “treat solely” are serious conditions which have not responded to or cannot be treated with medication or surgery but the condition or its symptoms may respond to chiropractic care.

<sup>b</sup> Comanagement of many conditions by chiropractors consists primarily of identifying and correcting spinal subluxations; additionally, many chiropractors provide adjunctive therapies such as nutritional counseling, corrective or therapeutic exercises, or physiotherapies which may benefit patients with the condition.

<sup>c</sup> Some “referral” percentages may be lower than expected as the condition was already being managed by another practitioner when the patient presented for chiropractic care.

**Table 9.2a.** Frequency, Diagnosis, Management, and Referral of Articular/Joint Conditions

Data for articular/joint conditions appear in Table 9.2a and Table 9.2b.

Condition	Frequency		Nonsublux.-based Diagnosis		Management			Referral <sup>c</sup>
	0 Never	1 2 3 4 Routinely	Yes	No	Not treated	Treated solely <sup>a</sup>	Co-managed <sup>b</sup>	
Scoliosis <sup>2</sup>	2.4	<b>Sometimes</b>	73.6%	26.4%	1.9%	79.7%	18.4%	14.0%
Bursitis or synovitis	2.2	<b>Sometimes</b>	75.3%	24.7%	2.5%	71.8%	25.7%	18.1%
Carpal or tarsal tunnel syndrome	2.2	<b>Sometimes</b>	73.9%	26.1%	2.5%	65.5%	32.0%	25.7%
TMJ syndrome	1.9	<b>Sometimes</b>	69.3%	30.7%	5.0%	47.7%	47.3%	36.5%
Thoracic outlet syndrome	1.8	<b>Sometimes</b>	73.5%	26.5%	3.1%	72.8%	24.0%	21.6%
Congenital/developmental anomaly	1.8	<b>Sometimes</b>	67.4%	32.6%	12.3%	64.4%	23.3%	18.6%
Systemic/rheumatoid arthritis or gout	1.6	<b>Sometimes</b>	61.0%	39.0%	12.9%	19.2%	68.0%	54.3%
Spinal canal stenosis	1.5	<b>Sometimes</b>	64.1%	35.9%	8.7%	32.5%	58.7%	54.1%
Dislocation of any joint	0.8	<b>Rarely</b>	70.4%	29.6%	24.1%	22.2%	53.7%	61.7%
Avascular necrosis	0.5	<b>Rarely</b>	55.6%	44.4%	42.4%	8.9%	48.7%	71.9%
Bacterial infection of joint	0.4	<b>Virtually never</b>	48.8%	51.2%	56.0%	5.4%	38.6%	77.0%
Joint tumor or neoplasm	0.4	<b>Virtually never</b>	52.9%	47.1%	69.2%	2.3%	28.5%	80.4%

<sup>a</sup> Some conditions which survey respondents indicated they “treat solely” are serious conditions which have not responded to or cannot be treated with medication or surgery, but the condition or its symptoms may respond to chiropractic care.

<sup>b</sup> Comanagement of many conditions by chiropractors consists primarily of identifying and correcting spinal subluxations; additionally, many chiropractors provide adjunctive therapies such as nutritional counseling, corrective or therapeutic exercises, or physiotherapies which may benefit patients with the condition.

<sup>c</sup> Some “referral” percentages may be lower than expected as the condition was already being managed by another practitioner when the patient presented for chiropractic care.

**Table 9.2b.** Frequency, Diagnosis, Management, and Referral of Articular/Joint Conditions

## Discussion

Joints with improper alignment or impaired mobility degenerate. Chiropractic adjustments are designed to restore proper articular alignment and increase the mobility of hypomobile joints. Accordingly, musculoskeletal conditions (and their associated neurological symptoms) are the conditions that the majority of the population recognizes as problems that are most effectively treated by chiropractic techniques and are the most frequently seen conditions in chiropractic practice.

<sup>2</sup> Based on feedback from some survey respondents, the authors of this report believe that the majority of survey respondents interpreted this to mean structural scoliosis, as functional scoliosis is seen routinely in the typical chiropractic practice.

## Muscular Conditions

The three muscular conditions that are seen often in chiropractic practice--strain, tendinitis/tenosynovitis, and myofascitis--have very similar response rates in all categories. Approximately 86% of chiropractors act as the sole health care providers to the majority of their patients with these conditions. Twelve percent of chiropractors comanage their patients with these conditions with another provider, and 8% to 11% of respondents refer patients with these conditions for consultation, further diagnostics, or treatment in the majority of cases. Seventy-five to eighty-one percent of chiropractors make each of these diagnoses concurrent with a subluxation diagnosis in the majority of cases.

Atrophy is a rarely-seen muscular disorder; muscular dystrophy and tumors of muscle are virtually never seen. However, in the majority of muscular atrophy and muscular dystrophy cases seen, 63.5% of the respondents comanage each of these conditions with other providers.

Data for muscular conditions appear in Table 9.3.

Condition	Frequency 0 1 2 3 4 Never         Routinely	Nonsubluc.-based Diagnosis		Management			Referral <sup>c</sup>
		Yes	No	Not treated	Treated solely <sup>a</sup>	Co-managed <sup>b</sup>	
Muscular strain/tear	3.1 <b>Often</b>	80.6%	19.4%	2.1%	85.8%	12.0%	10.9%
Tendinitis/tenosynovitis	2.8 <b>Often</b>	77.7%	22.3%	2.0%	86.7%	11.3%	8.6%
Myofascitis	2.9 <b>Often</b>	74.6%	25.4%	1.7%	85.7%	12.6%	7.6%
Fibromyalgia	2.2 <b>Sometimes</b>	65.5%	34.5%	3.0%	47.8%	49.2%	29.2%
Muscular dystrophy	0.4 <b>Virtually never</b>	42.6%	57.4%	28.1%	8.4%	63.5%	59.5%
Muscular atrophy	1.1 <b>Rarely</b>	62.5%	37.5%	9.2%	27.3%	63.5%	51.3%
Muscle tumor	0.2 <b>Virtually never</b>	45.9%	54.1%	57.1%	3.3%	39.6%	74.1%

<sup>a</sup> Some conditions which survey respondents indicated they "treat solely" are serious conditions which have not responded to or cannot be treated with medication or surgery, but the condition or its symptoms may respond to chiropractic care.

<sup>b</sup> Comanagement of many conditions by chiropractors consists primarily of identifying and correcting spinal subluxations; additionally, many chiropractors provide adjunctive therapies such as nutritional counseling, corrective or therapeutic exercises, or physiotherapies which may benefit patients with the condition.

<sup>c</sup> Some "referral" percentages may be lower than expected as the condition was already being managed by another practitioner when the patient presented for chiropractic care.

**Table 9.3.** Frequency, Diagnosis, Management, and Referral of Muscular Conditions

## Discussion

As indicated in Chapter Ten (Table 10.12), chiropractors typically utilize soft tissue therapies and a variety of physiotherapies in their practices. These modalities specifically address the muscular component of patient conditions. The combination of chiropractic adjunctive techniques, soft tissue manipulation, and physiotherapeutics is particularly effective in the treatment of muscular injuries and other muscular conditions.

## Skeletal Conditions

Osteoporosis/osteomalacia and congenital/developmental anomalies are sometimes seen by chiropractors. In the majority of the cases of these conditions seen by respondents, 69% of practitioners make the diagnosis of osteoporosis/osteomalacia, and 66% make the diagnosis of congenital/developmental anomaly. Fifty-four percent of respondents comanage the majority of their patients with osteoporosis/osteomalacia with another provider. Fifty-eight percent of practitioners solely manage the majority of their patients with congenital/developmental anomalies.

Fractures, endocrine or metabolic disorders, and bone tumors are rarely seen in chiropractic practice, and infections of bone are virtually never seen. Very few respondents indicated that they are the sole providers to patients with these conditions, whereas the vast majority of practitioners refer patients with these problems for additional diagnosis, consultation, or treatment.

Data for skeletal conditions appear in Table 9.4.

Condition	Frequency		Nonsublux.-based Diagnosis		Management			Referral <sup>c</sup>
	0 1 2 3 4 Never         Routinely		Yes	No	Not treated	Treated solely <sup>a</sup>	Co-managed <sup>b</sup>	
Fracture	1.0	Rarely	76.4%	23.6%	49.5%	3.5%	47.0%	85.1%
Osteoporosis/osteomalacia	2.1	Sometimes	69.1%	30.9%	10.3%	35.5%	54.2%	38.7%
Congenital/developmental anomaly	1.6	Sometimes	65.6%	34.4%	14.0%	57.6%	28.4%	21.5%
Endocrine or metabolic bone disorder	0.6	Rarely	46.4%	53.6%	43.9%	5.6%	50.5%	71.7%
Bone tumor/metastasis	0.5	Rarely	52.1%	47.9%	69.3%	1.0%	29.7%	83.5%
Osteomyelitis/infection	0.3	Virtually never	49.3%	50.7%	66.5%	1.9%	31.5%	80.3%

<sup>a</sup> Some conditions which survey respondents indicated they “treat solely” are serious conditions which have not responded to or cannot be treated with medication or surgery, but the condition or its symptoms may respond to chiropractic care.

<sup>b</sup> Comanagement of many conditions by chiropractors consists primarily of identifying and correcting spinal subluxations; additionally, many chiropractors provide adjunctive therapies such as nutritional counseling, corrective or therapeutic exercises, or physiotherapies which may benefit patients with the condition.

<sup>c</sup> Some “referral” percentages may be lower than expected as the condition was already being managed by another practitioner when the patient presented for chiropractic care.

**Table 9.4.** Frequency, Diagnosis, Management, and Referral of Skeletal Conditions

## Discussion

Doctors of chiropractic provide numerous benefits to patients when involved in the management of fractures, osteoporosis, metabolic bone disorders, and other skeletal conditions. For example, an osteoporotic patient who suffers a spontaneous thoracic compression fracture usually requires conservative, non-invasive management. However, a referral for further consultation and diagnostics to rule out a metastatic lesion is advisable. A chiropractor may diagnose the fracture, fit the patient with an elastic support, advise him/her of appropriate home care and activity restrictions, recommend nutritional supplementation, provide the appropriate referral, and provide follow-up assessment and care.

## Respiratory Conditions

Regarding respiratory problems, chiropractors sometimes see patients with viral infections, asthma, emphysema, or COPD. Bacterial infections and occupational or environmental respiratory disorders are rarely seen in chiropractic practice. Tumors of the lung or respiratory passages and atelectasis or pneumothorax are virtually never seen. The methods by which respondents manage patients with these conditions vary, but between 33% and 48% make a non-subluxation-based diagnosis in the majority of cases seen.

Data for respiratory conditions appear in Table 9.5.

Condition	Frequency		Nonsubluc.-based Diagnosis		Management			Referral <sup>c</sup>
	0 1 2 3 4 Never         Routinely		Yes	No	Not treated	Treated solely <sup>a</sup>	Co-managed <sup>b</sup>	
Viral infection	1.5	Sometimes	48.4%	51.6%	35.0%	24.5%	40.6%	45.3%
Bacterial infection	1.3	Rarely	43.8%	56.2%	41.5%	10.1%	48.3%	62.4%
Asthma, emphysema or COPD	1.6	Sometimes	45.7%	54.3%	19.6%	12.7%	67.7%	50.2%
Occupational or environmental disorder	0.9	Rarely	42.6%	57.4%	27.8%	22.4%	49.7%	46.2%
Atelectasis or pneumothorax	0.2	Virtually never	33.3%	66.7%	64.7%	1.3%	34.0%	63.4%
Tumor of lung or respiratory passages	0.3	Virtually never	40.2%	59.8%	73.1%	1.2%	25.8%	71.8%

<sup>a</sup> Some conditions which survey respondents indicated they “treat solely” are serious conditions which have not responded to or cannot be treated with medication or surgery, but the condition or its symptoms may respond to chiropractic care.

<sup>b</sup> Comanagement of many conditions by chiropractors consists primarily of identifying and correcting spinal subluxations; additionally, many chiropractors provide adjunctive therapies such as nutritional counseling, corrective or therapeutic exercises, or physiotherapies which may benefit patients with the condition.

<sup>c</sup> Some “referral” percentages may be lower than expected as the condition was already being managed by another practitioner when the patient presented for chiropractic care.

**Table 9.5.** Frequency, Diagnosis, Management, and Referral of Respiratory Conditions

### Discussion

After a medical emergency involving the respiratory system has been stabilized, chiropractic adjustments--with their resultant mobilization of the thoracic spine and rib cage and stimulation of the psychoneuroimmune system--are beneficial to patients suffering from respiratory conditions (For a brief review of the benefits of manipulation in the treatment of visceral diseases, see Gatterman 1990, 389-394).

## Gastrointestinal Conditions

Doctors of chiropractic rarely or virtually never see any of the below listed gastrointestinal conditions. However, 27% to 52% of chiropractors arrive at the diagnosis of these conditions in the majority of the cases seen in their practices. For all of the listed conditions, chiropractors more often comanage or do not treat these problems and rarely act as sole providers.

Data for gastrointestinal conditions appear in Table 9.6.

Condition	Frequency		Nonsubluc.-based Diagnosis		Management			Referral <sup>c</sup>
	0 Never	1 2 3 4 Routinely	Yes	No	Not treated	Treated solely <sup>a</sup>	Co-managed <sup>b</sup>	
Bacterial or viral infection	1.0	Rarely	43.8%	56.2%	41.8%	14.1%	44.1%	55.7%
Appendicitis	0.3	Virtually never	46.6%	53.4%	72.6%	2.8%	24.5%	70.5%
Cholecystitis or pancreatitis	0.5	Rarely	43.6%	56.4%	51.1%	8.5%	40.4%	66.9%
Ulcer of stomach, small intestine, or colon	0.9	Rarely	40.9%	59.1%	37.4%	10.2%	52.3%	58.9%
Inguinal hernia	0.6	Rarely	48.2%	51.8%	60.6%	4.3%	35.1%	67.7%
Colitis or diverticulitis	1.0	Rarely	41.9%	58.1%	31.3%	13.7%	55.1%	52.6%
Hemorrhoids	0.8	Rarely	39.1%	60.9%	42.6%	21.5%	35.9%	43.2%
Tumor of gastrointestinal tract	0.2	Virtually never	26.8%	73.2%	74.0%	0.7%	25.3%	60.3%
Hiatal hernia/esophageal reflux	1.4	Rarely	52.3%	47.7%	20.5%	31.0%	48.5%	41.7%

<sup>a</sup> Some conditions which survey respondents indicated they “treat solely” are serious conditions which have not responded to or cannot be treated with medication or surgery, but the condition or its symptoms may respond to chiropractic care.

<sup>b</sup> Comanagement of many conditions by chiropractors consists primarily of identifying and correcting spinal subluxations; additionally, many chiropractors provide adjunctive therapies such as nutritional counseling, corrective or therapeutic exercises, or physiotherapies which may benefit patients with the condition.

<sup>c</sup> Some “referral” percentages may be lower than expected as the condition was already being managed by another practitioner when the patient presented for chiropractic care.

**Table 9.6.** Frequency, Diagnosis, Management, and Referral of Gastrointestinal Conditions

### Discussion

Doctors of chiropractic most often comanage the following gastrointestinal conditions: ulcers, colitis, diverticulitis, esophageal reflux, and hiatal hernia. Patients with these conditions respond positively to specific nutritional and dietary protocols in addition to chiropractic adjustments. As indicated in Chapter Ten (Table 10.12), 90% of chiropractors provide nutritional counseling, or recommend nutritional supplementation.

## Integument Conditions

Doctors of chiropractic rarely or virtually never see any of the below listed conditions affecting the integument; however, 35% to 50% of practitioners arrive at the diagnosis of these conditions in the majority of the cases seen in their practices. For all of the listed conditions, chiropractors more often comanage or do not treat these problems and rarely act as sole providers.

Data for integument conditions appear in Table 9.7.

Condition	Frequency		Nonsublax.-based Diagnosis		Management			Referral <sup>c</sup>
	0 1 2 3 4 Never                      Routinely		Yes	No	Not treated	Treated solely <sup>a</sup>	Co-managed <sup>b</sup>	
Acne, dermatitis, or psoriasis	1.1	Rarely	46.3%	53.7%	43.8%	15.8%	40.4%	45.4%
Bacterial or fungal infection	0.8	Rarely	41.4%	58.6%	54.1%	11.4%	34.5%	55.9%
Herpes simplex	0.7	Rarely	42.5%	57.5%	46.0%	23.5%	30.5%	40.8%
Herpes zoster	0.7	Rarely	50.4%	49.6%	33.6%	20.9%	45.5%	47.8%
Pigment disorders	0.4	Virtually never	35.0%	65.0%	71.1%	7.1%	21.8%	48.3%
Skin cancer	0.6	Rarely	36.2%	63.8%	78.9%	1.1%	20.0%	70.7%

<sup>a</sup> Some conditions which survey respondents indicated they “treat solely” are serious conditions which have not responded to or cannot be treated with medication or surgery, but the condition or its symptoms may respond to chiropractic care.

<sup>b</sup> Comanagement of many conditions by chiropractors consists primarily of identifying and correcting spinal sublaxations; additionally, many chiropractors provide adjunctive therapies such as nutritional counseling, corrective or therapeutic exercises, or physiotherapies which may benefit patients with the condition.

<sup>c</sup> Some “referral” percentages may be lower than expected as the condition was already being managed by another practitioner when the patient presented for chiropractic care.

**Table 9.7.** Frequency, Diagnosis, Management, and Referral of Integument Conditions

### Discussion

Because chiropractors routinely perform physical examinations and administer adjustments and other therapies directly to patients’ exposed skin, chiropractic practice is well-suited to detecting and monitoring conditions of the integument.

## Renal/Urological Conditions

Doctors of chiropractic rarely or virtually never see any of the four below listed renal/urological conditions. However, 26% to 52% of practitioners arrive at the diagnosis of these conditions in the majority of cases seen in their practices. For all of the listed conditions, chiropractors more often comanage or do not treat these problems and rarely act as sole providers.

Data for renal/urological conditions appear in Table 9.8.

Condition	Frequency		Nonsublux.-based Diagnosis		Management			Referral <sup>c</sup>
	0 1 2 3 4 Never                      Routinely		Yes	No	Not treated	Treated solely <sup>a</sup>	Co-managed <sup>b</sup>	
Infection of kidney or urinary tract	1.1	Rarely	52.1%	47.9%	41.2%	11.5%	47.3%	65.8%
Kidney stones	0.7	Rarely	45.5%	54.5%	57.9%	5.0%	37.1%	69.5%
Chronic kidney disease or failure	0.3	Virtually never	30.5%	69.5%	58.4%	3.9%	37.7%	57.1%
Tumor of the kidney or bladder	0.2	Virtually never	26.2%	73.8%	76.3%	0.4%	23.4%	59.7%

<sup>a</sup> Some conditions which survey respondents indicated they “treat solely” are serious conditions which have not responded to or cannot be treated with medication or surgery, but the condition or its symptoms may respond to chiropractic care.

<sup>b</sup> Comanagement of many conditions by chiropractors consists primarily of identifying and correcting spinal subluxations; additionally, many chiropractors provide adjunctive therapies such as nutritional counseling, corrective or therapeutic exercises, or physiotherapies which may benefit patients with the condition.

<sup>c</sup> Some “referral” percentages may be lower than expected as the condition was already being managed by another practitioner when the patient presented for chiropractic care.

**Table 9.8.** Frequency, Diagnosis, Management, and Referral of Renal/Urological Conditions

### Discussion

Chiropractic comanagement of renal/urologic conditions primarily consists of adjusting concomitant spinal subluxations and for some cases recommending specific nutritional advice and/or support. As indicated in Chapter Ten (Table 10.12), 90% of chiropractors provide nutritional counseling, or recommend nutritional supplementation.

## Cardiovascular Conditions

Of the cardiovascular conditions listed below, only high blood pressure is seen more than rarely in chiropractic practice; it is sometimes seen. A small percentage of chiropractors act as the sole provider for the majority of their patients with these conditions. Sixty-one percent of chiropractors make the diagnosis of hypertension in the majority of their patients who have the condition. Fifty-five to seventy-six percent of chiropractic practitioners make referrals for these conditions in the majority of the cases they see.

Data for cardiovascular conditions appear in Table 9.9.

Condition	Frequency		Nonsublux.-based Diagnosis		Management			Referral <sup>c</sup>
	0 Never	1 2 3 4 Routinely	Yes	No	Not treated	Treated solely <sup>a</sup>	Co-managed <sup>b</sup>	
High blood pressure	2.2	Sometimes	61.0%	39.0%	23.4%	7.8%	68.8%	65.9%
Angina or myocardial infarction	0.7	Rarely	37.9%	62.1%	56.9%	2.5%	40.6%	67.9%
Arterial aneurysm	0.4	Virtually never	46.8%	53.2%	76.6%	0.9%	22.4%	76.3%
Peripheral artery or vein disorder	0.7	Rarely	43.2%	56.8%	55.8%	4.4%	39.8%	64.0%
Murmur or rhythm irregularity	0.8	Rarely	41.6%	58.4%	55.6%	7.0%	37.5%	66.4%
Congenital anomaly	0.4	Virtually never	35.2%	64.8%	58.9%	7.3%	33.9%	55.1%

<sup>a</sup> Some conditions which survey respondents indicated they “treat solely” are serious conditions which have not responded to or cannot be treated with medication or surgery, but the condition or its symptoms may respond to chiropractic care.

<sup>b</sup> Comanagement of many conditions by chiropractors consists primarily of identifying and correcting spinal subluxations; additionally, many chiropractors provide adjunctive therapies such as nutritional counseling, corrective or therapeutic exercises, or physiotherapies which may benefit patients with the condition.

<sup>c</sup> Some “referral” percentages may be lower than expected as the condition was already being managed by another practitioner when the patient presented for chiropractic care.

**Table 9.9.** Frequency, Diagnosis, Management, and Referral of Cardiovascular Conditions

### Discussion

The effect of chiropractic adjustments on blood pressure is the subject of ongoing research. Preliminary results are promising and reinforce the need for further study on the efficacy of manipulation for cardiovascular ailments.

Chiropractic comanagement of cardiovascular conditions consists primarily of adjusting concomitant spinal subluxations and in many cases recommending specific changes in nutrition and in the activities of daily living. (Refer to Table 10.12 and Table 10.13.)

## Endocrine/Metabolic Conditions

Obesity and diabetes are the two conditions in this section that are sometimes seen in chiropractic practice; the other disorders are rarely or virtually never seen. One-fourth (25%) of chiropractors are the sole practitioners providing management for the majority of their obese patients. Fifty-seven percent of chiropractors comanage the majority of their patients with diabetes; the same percentage also make referrals for consultation, further diagnosis, or treatment of the majority of their patients with diabetes.

Data for endocrine/metabolic conditions appear in Table 9.10.

Condition	Frequency		Nonsubluc.-based Diagnosis		Management			Referral <sup>c</sup>
	0 Never	1 2 3 4 Routinely	Yes	No	Not treated	Treated solely <sup>a</sup>	Co-managed <sup>b</sup>	
Obesity	2.1	Sometimes	54.4%	45.6%	26.0%	25.1%	48.9%	40.8%
Thyroid or parathyroid disorder	1.1	Rarely	38.7%	61.3%	44.9%	8.1%	47.0%	63.2%
Adrenal disorder	0.6	Rarely	37.8%	62.2%	40.7%	18.5%	40.8%	49.8%
Pituitary disorder	0.3	Virtually never	29.0%	71.0%	54.0%	11.4%	34.7%	51.5%
Thymus or pineal disorder	0.3	Virtually never	29.0%	71.0%	48.8%	16.4%	34.8%	44.8%
Diabetes	1.5	Sometimes	37.6%	62.4%	38.6%	4.3%	57.2%	57.2%
Endocrine tumor	0.1	Virtually never	21.9%	78.1%	73.2%	2.4%	24.4%	50.7%

<sup>a</sup> Some conditions which survey respondents indicated they “treat solely” are serious conditions which have not responded to or cannot be treated with medication or surgery, but the condition or its symptoms may respond to chiropractic care.

<sup>b</sup> Comanagement of many conditions by chiropractors consists primarily of identifying and correcting spinal subluxations; additionally, many chiropractors provide adjunctive therapies such as nutritional counseling, corrective or therapeutic exercises, or physiotherapies which may benefit patients with the condition.

<sup>c</sup> Some “referral” percentages may be lower than expected as the condition was already being managed by another practitioner when the patient presented for chiropractic care.

**Table 9.10.** Frequency, Diagnosis, Management, and Referral of Endocrine/Metabolic Conditions

### Discussion

That 4.3 % of respondents were the sole provider of treatment for the majority of their patients with diabetes probably indicates that the majority of their diabetic patients are not insulin dependent. Chiropractic comanagement of diabetes and other endocrine/metabolic conditions primarily consists of adjusting concomitant spinal subluxations and for many cases providing specific nutritional advice and/or support. As indicated in Chapter Ten (Table 10.12), 90% of chiropractors provide nutritional counseling, or recommend nutritional supplementation.

## Sexually Transmitted Diseases

Chiropractors virtually never see sexually transmitted diseases in their practices; however, in a typical year, at least 25% of practitioners make a diagnosis of each of the conditions listed below.

Data for sexually transmitted diseases appear in Table 9.11.

Condition	Frequency		Nonsubluc.-based Diagnosis		Management			Referral <sup>c</sup>
	0 Never	1 2 3 4 Routinely	Yes	No	Not treated	Treated solely <sup>a</sup>	Co-managed <sup>b</sup>	
Hepatitis B	0.2	Virtually never	25.5%	74.5%	64.1%	3.8%	32.1%	55.2%
Herpes II	0.3	Virtually never	26.0%	74.0%	64.4%	9.6%	26.1%	49.8%
HIV/AIDS	0.4	Virtually never	25.6%	74.4%	56.2%	2.1%	41.7%	53.8%
Other sexually transmitted diseases	0.2	Virtually never	22.7%	77.3%	70.0%	2.6%	27.4%	52.6%

<sup>a</sup> Some conditions which survey respondents indicated they “treat solely” are serious conditions which have not responded to or cannot be treated with medication or surgery, but the condition or its symptoms may respond to chiropractic care.

<sup>b</sup> Comanagement of many conditions by chiropractors consists primarily of identifying and correcting spinal subluxations; additionally, many chiropractors provide adjunctive therapies such as nutritional counseling, corrective or therapeutic exercises, or physiotherapies which may benefit patients with the condition.

<sup>c</sup> Some “referral” percentages may be lower than expected as the condition was already being managed by another practitioner when the patient presented for chiropractic care.

**Table 9.11.** Frequency, Diagnosis, Management, and Referral of Sexually Transmitted Diseases

### Discussion

Psychoneuroimmunology has revealed that there is an interrelationship between the central nervous system and immunity. This is consistent with chiropractic philosophy as presented on page two of this report. Many HIV/AIDS patients employ numerous strategies in order to maintain or prolong their lives; some choose chiropractic care in support of their general health and/or as part of their treatment plans. Chiropractic comanagement of HIV/AIDS and other sexually transmitted diseases primarily consists of adjusting concomitant subluxations and providing specific nutritional advice and/or support. As indicated in Chapter Ten (Table 10.12), 90% of chiropractors provide nutritional counseling, or recommend nutritional supplementation.

## Eyes, Ears, Nose, and Throat

Dizziness and vertigo are sometimes seen in chiropractic practice and are diagnosed by 60% of practitioners in the majority of these cases they see. Thirty percent of chiropractors act as sole providers treating their patients with dizziness or vertigo, and 61% comanage these conditions with other providers. Most other pathologies of the eyes, ears, nose, or throat are virtually never seen in chiropractic practice.

Data for eye, ear, nose, and throat conditions appear in Table 9.12.

Condition	Frequency		Nonsublux.-based Diagnosis		Management			Referral <sup>c</sup>
	0 Never	1 2 3 4 Routinely	Yes	No	Not treated	Treated solely <sup>a</sup>	Co-managed <sup>b</sup>	
Significant eye pathology	0.4	Virtually never	32.5%	67.5%	67.5%	3.3%	29.2%	60.4%
Significant ear pathology	0.4	Virtually never	36.1%	63.9%	53.4%	8.3%	38.4%	57.9%
Disorder of nose or sense of smell	0.4	Virtually never	33.1%	66.9%	45.6%	13.9%	40.6%	49.4%
Disorder of throat or larynx	0.5	Rarely	33.1%	66.9%	47.6%	13.2%	39.2%	53.6%
Tumor of eye, ear, nose, or throat	0.1	Virtually never	22.6%	77.4%	72.9%	1.8%	25.2%	53.2%
Dizziness/vertigo	1.8	Sometimes	59.5%	40.5%	9.2%	30.3%	60.5%	51.2%

<sup>a</sup> Some conditions which survey respondents indicated they “treat solely” are serious conditions which have not responded to or cannot be treated with medication or surgery, but the condition or its symptoms may respond to chiropractic care.

<sup>b</sup> Comanagement of many conditions by chiropractors consists primarily of identifying and correcting spinal subluxations; additionally, many chiropractors provide adjunctive therapies such as nutritional counseling, corrective or therapeutic exercises, or physiotherapies which may benefit patients with the condition.

<sup>c</sup> Some “referral” percentages may be lower than expected as the condition was already being managed by another practitioner when the patient presented for chiropractic care.

**Table 9.12.** Frequency, Diagnosis, Management, and Referral of Ears, Eyes, Nose, and Throat Conditions

### Discussion

Determining the cause of dizziness/vertigo is often a significant diagnostic challenge. One cause that may mimic an inner ear pathology is an alteration of proprioception as a result of injury or degeneration of the cervical spine; this etiology of dizziness/vertigo typically responds well to chiropractic adjustments.

## Hematological/Lymphatic Conditions

Doctors of chiropractic rarely or virtually never see any of the below listed hematological/lymphatic conditions. However, 25% to 42% of chiropractors arrive at the diagnosis of these conditions in the majority of these cases seen in their practices. For all of the listed conditions, chiropractors more often comanage or do not treat these problems and rarely act as sole providers.

Data for hematological/lymphatic conditions appear in Table 9.13.

Condition	Frequency 0 1 2 3 4 Never Routinely	Nonsublux.-based Diagnosis		Management			Referral <sup>c</sup>
		Yes	No	Not treated	Treated solely <sup>a</sup>	Co-managed <sup>b</sup>	
Anemia	0.8 Rarely	42.6%	57.4%	37.2%	16.2%	46.6%	48.9%
Immunological disorder	0.6 Rarely	32.5%	67.5%	37.5%	12.3%	50.2%	50.2%
Hereditary disorder	0.4 Virtually never	29.4%	70.6%	51.2%	6.5%	42.3%	48.0%
Polycythemia	0.2 Virtually never	28.0%	72.0%	58.6%	4.1%	37.2%	46.3%
Cancer of the marrow or lymphatic system	0.2 Virtually never	25.1%	74.9%	65.9%	1.3%	32.9%	57.9%

<sup>a</sup> Some conditions which survey respondents indicated they “treat solely” are serious conditions which have not responded to or cannot be treated with medication or surgery, but the condition or its symptoms may respond to chiropractic care.

<sup>b</sup> Comanagement of many conditions by chiropractors consists primarily of identifying and correcting spinal subluxations; additionally, many chiropractors provide adjunctive therapies such as nutritional counseling, corrective or therapeutic exercises, or physiotherapies which may benefit patients with the condition.

<sup>c</sup> Some “referral” percentages may be lower than expected as the condition was already being managed by another practitioner when the patient presented for chiropractic care.

**Table 9.13.** Frequency, Diagnosis, Management, and Referral of Hematological/Lymphatic Conditions

### Discussion

Psychoneuroimmunology has revealed that there is an interrelationship between the central nervous system and immunity. This is consistent with chiropractic philosophy as presented on page two of this report. Many patients employ numerous strategies in order to maintain or regain their health; some choose chiropractic care in support of their general health and/or as part of their treatment plans. Chiropractic comanagement of immunological disorders or other hematological/lymphatic conditions primarily consists of adjusting concomitant subluxations and providing specific nutritional advice and/or support. As indicated in Chapter Ten (Table 10.12), 90% of chiropractors provide nutritional counseling, or recommend nutritional supplementation.

## Female and Male Reproductive Conditions

The only below listed condition of the male or female reproductive system that chiropractors see more than rarely is menstrual disorder. Most chiropractors do not diagnose any of the conditions for the majority of their patients. Except for disorders of the breast and neoplastic disorders, respondents reported that they most often comanage these conditions with other providers.

Data for female and male reproductive conditions appear in Tables 9.14 and 9.15.

Condition	Frequency		Nonsubluc.-based Diagnosis		Management			Referral <sup>c</sup>
	0 1 2 3 4 Never Routinely		Yes	No	Not treated	Treated solely <sup>a</sup>	Co-managed <sup>b</sup>	
Female infertility	0.6	Rarely	28.7%	71.3%	35.6%	13.4%	51.0%	44.1%
Pregnancy	1.4	Rarely	34.2%	65.8%	23.6%	7.9%	68.5%	44.9%
Menstrual disorder	1.7	Sometimes	44.6%	55.4%	11.7%	34.9%	53.4%	32.8%
Non-cancerous disorder of breast	0.5	Rarely	30.3%	69.7%	53.2%	14.0%	32.7%	46.2%
Tumor of breast or reproductive system	0.3	Virtually never	26.7%	73.3%	70.6%	2.2%	27.2%	59.0%
Menopause	1.4	Rarely	38.0%	62.0%	23.1%	23.5%	53.4%	33.8%

**Table 9.14.** Frequency, Diagnosis, Management, and Referral of Female Reproductive or Breast Conditions

Condition	Frequency		Nonsubluc.-based Diagnosis		Management			Referral <sup>c</sup>
	0 1 2 3 4 Never Routinely		Yes	No	Not treated	Treated solely <sup>a</sup>	Co-managed <sup>b</sup>	
Male infertility	0.3	Virtually never	26.2%	73.8%	43.0%	11.8%	45.2%	45.0%
Impotency	0.5	Rarely	30.7%	69.3%	35.2%	15.1%	49.7%	45.1%
Prostate disorder	0.8	Rarely	36.1%	63.9%	38.6%	8.5%	52.9%	56.7%
Tumor of reproductive system	0.2	Virtually never	25.4%	74.6%	74.7%	1.4%	23.9%	58.5%

<sup>a</sup> Some conditions which survey respondents indicated they “treat solely” are serious conditions which have not responded to or cannot be treated with medication or surgery, but the condition or its symptoms may respond to chiropractic care.

<sup>b</sup> Comanagement of many conditions by chiropractors consists primarily of identifying and correcting spinal subluxations; additionally, many chiropractors provide adjunctive therapies such as nutritional counseling, corrective or therapeutic exercises, or physiotherapies which may benefit patients with the condition.

<sup>c</sup> Some “referral” percentages may be lower than expected as the condition was already being managed by another practitioner when the patient presented for chiropractic care.

**Table 9.15.** Frequency, Diagnosis, Management, and Referral of Male Reproductive Conditions

## Discussion

Numerous case studies and preliminary research studies have shown that there is potential for chiropractic to have a positive effect on female reproductive disorders like primary dysmenorrhea and chronic pelvic pain. More research is needed in these areas.

Chiropractic management or comanagement of female and male reproductive conditions primarily consists of adjusting spinal subluxations and in many cases providing specific nutritional advice and/or support.

## Childhood Disorders

Upper respiratory or ear infections are sometimes seen in chiropractic practice. In a typical year, 57% of respondents make this diagnosis in the majority of cases seen in their practices. Fifty-nine percent of chiropractors comanage their patients with another provider and 30% act as sole providers for the majority of their patients with upper respiratory or ear infections.

Infantile colic is rarely seen in chiropractic practice, but over 50% of respondents act as sole providers for this condition in the majority of cases seen. Other childhood infectious diseases are rarely seen, and children with parasites are virtually never seen; however, 15% and 28% of respondents, respectively, act as sole providers for the cases of these conditions they see.

Data for childhood disorders appear in Table 9.16.

Condition	Frequency 0 1 2 3 4 Never Routinely	Nonsubluc.- based Diagnosis		Management			Referral <sup>c</sup>
		Yes	No	Not treated	Treated solely <sup>a</sup>	Co-managed <sup>b</sup>	
Upper respiratory or ear infection	1.6 <b>Sometimes</b>	57.1%	42.9%	10.6%	30.3%	59.1%	44.3%
Infectious diseases (mumps, measles, chicken pox)	0.5 <b>Rarely</b>	39.7%	60.3%	43.2%	14.6%	42.2%	49.8%
Parasites	0.3 <b>Virtually never</b>	38.4%	61.6%	36.3%	27.5%	36.1%	44.3%
Colic	0.8 <b>Rarely</b>	48.3%	51.7%	8.9%	51.3%	39.8%	25.0%

<sup>a</sup> Some conditions which survey respondents indicated they “treat solely” are serious conditions which have not responded to or cannot be treated with medication or surgery, but the condition or its symptoms may respond to chiropractic care.

<sup>b</sup> Comanagement of many conditions by chiropractors consists primarily of identifying and correcting spinal subluxations; additionally, many chiropractors provide adjunctive therapies such as nutritional counseling, corrective or therapeutic exercises, or physiotherapies which may benefit patients with the condition.

<sup>c</sup> Some “referral” percentages may be lower than expected as the condition was already being managed by another practitioner when the patient presented for chiropractic care.

**Table 9.16.** Frequency, Diagnosis, Management, and Referral of Childhood Disorders

## Discussion

Two studies on the effectiveness of chiropractic care in the treatment of infantile colic are summarized in Chapter Two of this report (page 20). The authors noted “[s]pinal manipulation is normally used in the treatment of musculoskeletal disorders, and the results of this trial leave open two possible interpretations. Either spinal manipulation is effective in the treatment of the visceral disorder infantile colic or infantile colic is, in fact, a musculoskeletal disorder, and not, as normally assumed, visceral.” (Wiberg et al. 1999, 520)

Many childhood upper respiratory or ear infections and childhood diseases like chicken pox are routinely treated with simple palliative measures. Many parents choose a chiropractor as their children’s primary health care provider. Chiropractic management of childhood disorders primarily consists of adjusting concomitant spinal subluxations and providing specific nutritional advice and/or support and other palliative measures.

## Miscellaneous Conditions

Allergies and nutritional disorders are sometimes seen in chiropractic practice. These conditions are typically co-managed or treated solely by chiropractors.

Data for miscellaneous conditions appear in Table 9.17.

Condition	Frequency 0 1 2 3 4 Never Routinely	Nonsublux.-based Diagnosis		Management			Referral <sup>c</sup>
		Yes	No	Not treated	Treated solely <sup>a</sup>	Co-managed <sup>b</sup>	
Allergies	2.1 Sometimes	48.3%	51.7%	11.3%	32.4%	56.3%	33.8%
Nutritional disorders	1.6 Sometimes	46.8%	53.2%	12.0%	45.3%	42.7%	31.1%
Eating disorders	0.8 Rarely	36.3%	63.7%	35.3%	17.5%	47.2%	51.2%
Psychological disorders	1.0 Rarely	33.6%	66.4%	43.6%	7.4%	49.0%	64.0%

<sup>a</sup> Some conditions which survey respondents indicated they “treat solely” are serious conditions which have not responded to or cannot be treated with medication or surgery, but the condition or its symptoms may respond to chiropractic care.

<sup>b</sup> Comanagement of many conditions by chiropractors consists primarily of identifying and correcting spinal subluxations; additionally, many chiropractors provide adjunctive therapies such as nutritional counseling, corrective or therapeutic exercises, or physiotherapies which may benefit patients with the condition.

<sup>c</sup> Some “referral” percentages may be lower than expected as the condition was already being managed by another practitioner when the patient presented for chiropractic care.

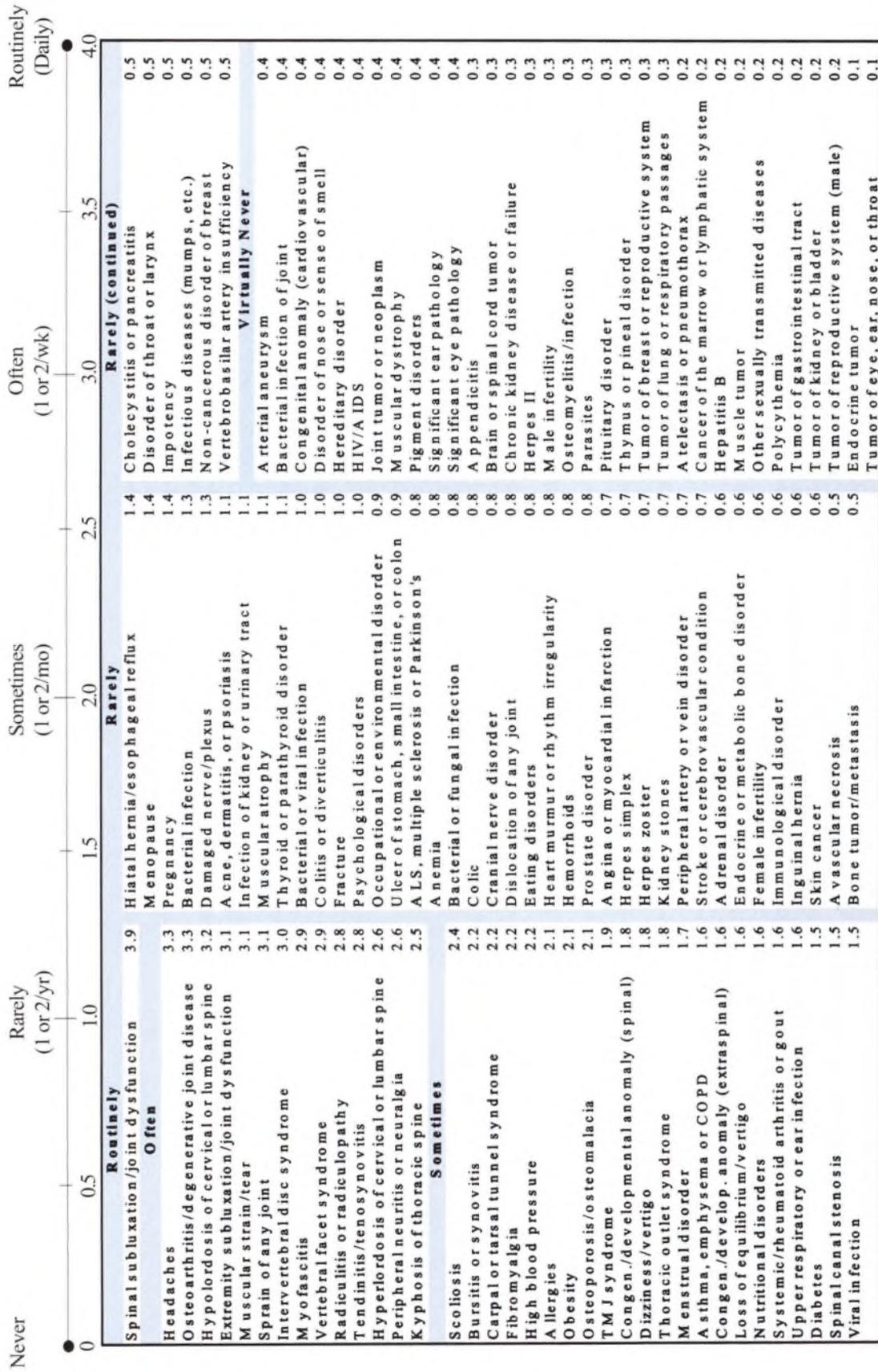
**Table 9.17.** Frequency, Diagnosis, Management, and Referral of Miscellaneous Conditions

## Discussion

Allergies are a form of immune reaction. Psychoneuroimmunology has revealed that there is an interrelationship between the central nervous system and immunity (consistent with chiropractic philosophy). Many patients employ numerous strategies in order to maintain or regain their health; some choose chiropractic care in support of their general health and/or as part of their treatment plan. Chiropractic management of allergies primarily consists of adjusting subluxations and providing specific nutritional advice.

## Patient Conditions

The table below shows how frequently chiropractors see the listed conditions in their practices, based on a five-point scale

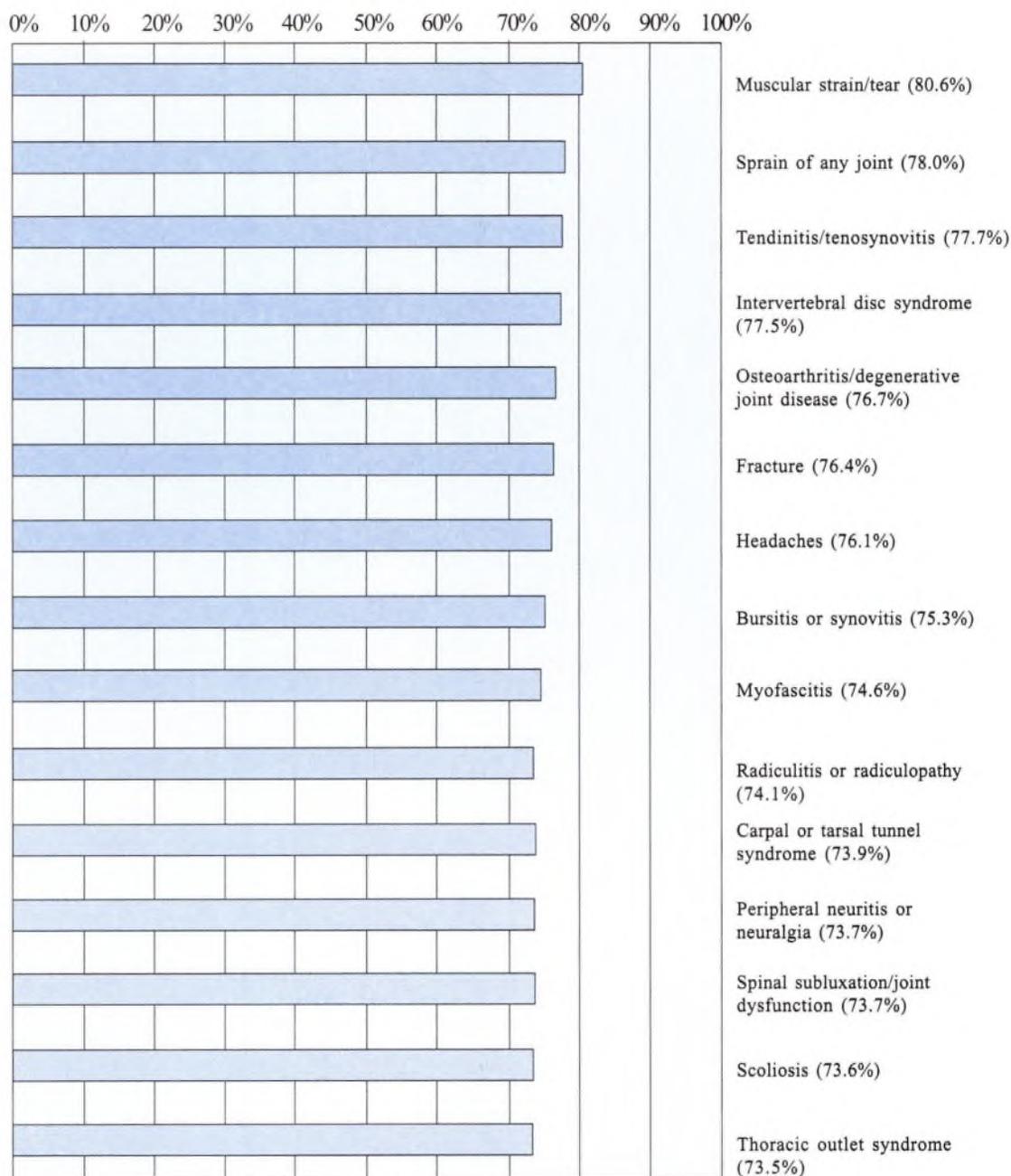


**Table 9.18.** Frequency with which patients with the above conditions are seen in chiropractic practices



## Diagnosis of Conditions

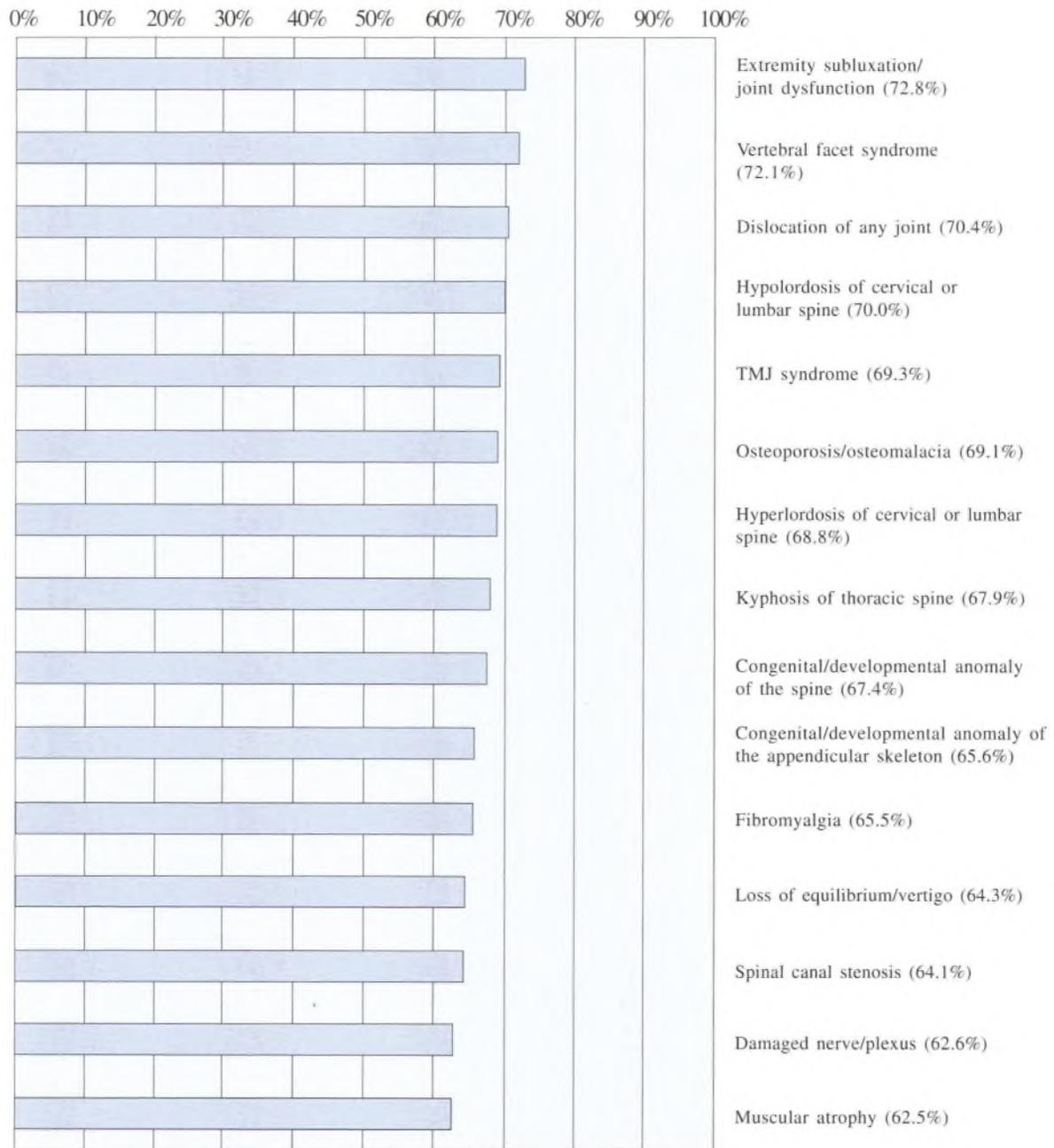
As shown previously in the chapter, the survey instructed participants to indicate whether they had made a diagnosis other than subluxation in the majority of cases of each listed condition seen in their practices during the prior year. Figures 9.1a-9.1c graph, in descending order, the conditions for which 50% or more of respondents indicated that they made a non-subluxation-based diagnosis in the majority of cases that they saw in the previous year.



**Figure 9.1a.** Percentage of Chiropractors Who Made a Nonsubluxation-based Diagnosis for the Majority of Their Patients With Each Condition.

## Diagnosis of Conditions (continued)

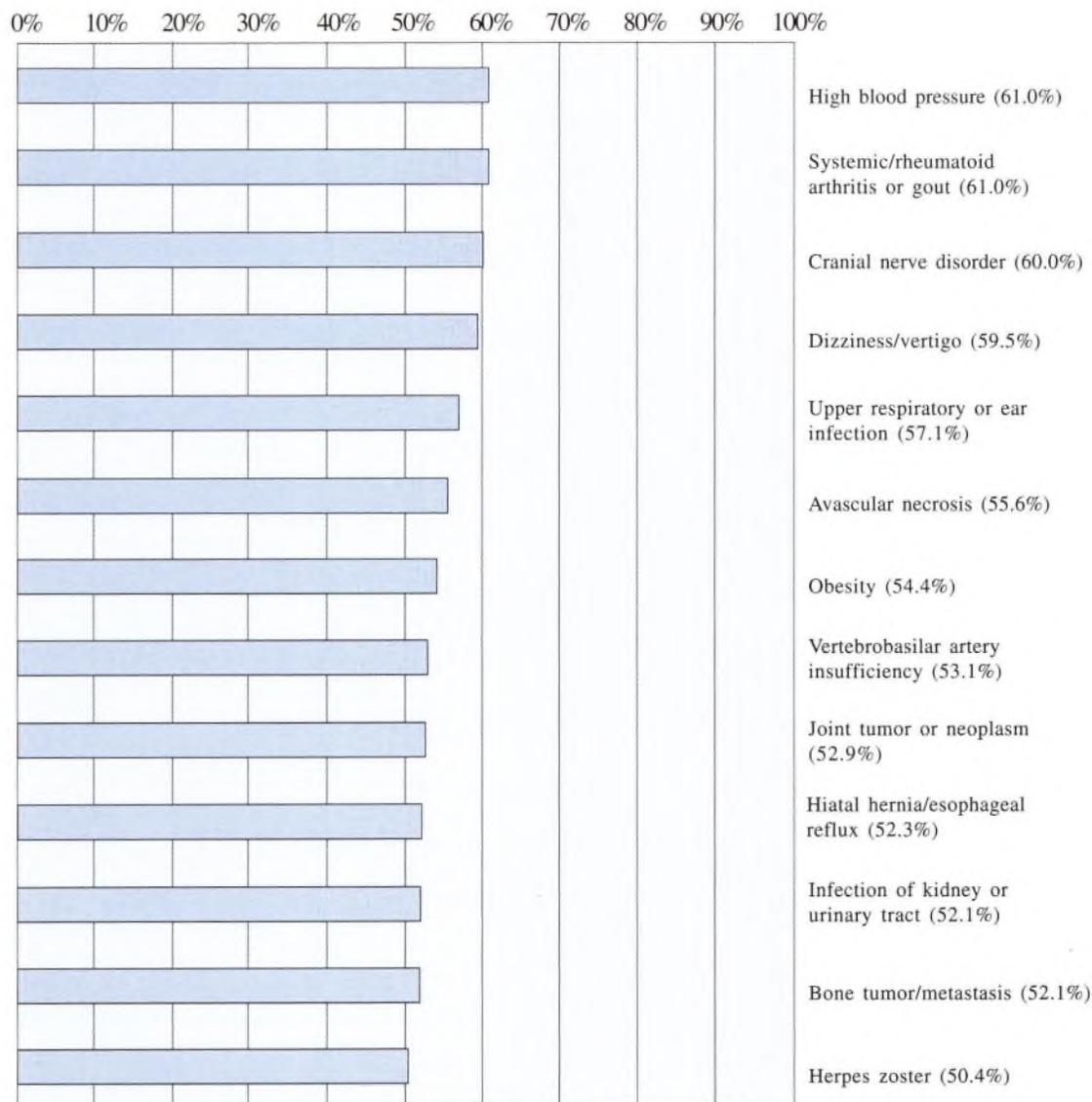
Figures 9.1a-9.1c graph, in descending order, the conditions for which 50% or more of respondents indicated that they made a non-subluxation-based diagnosis in the majority of cases they saw in the previous year.



**Figure 9.1b.** Percentage of Chiropractors Who Made a Nonsubluxation-based Diagnosis for the Majority of Their Patients With Each Condition.

## Diagnosis of Conditions (continued)

Figures 9.1a-9.1c graph, in descending order, the conditions for which 50% or more of respondents indicated that they made a non-sluxation-based diagnosis in the majority of cases they saw in the previous year.

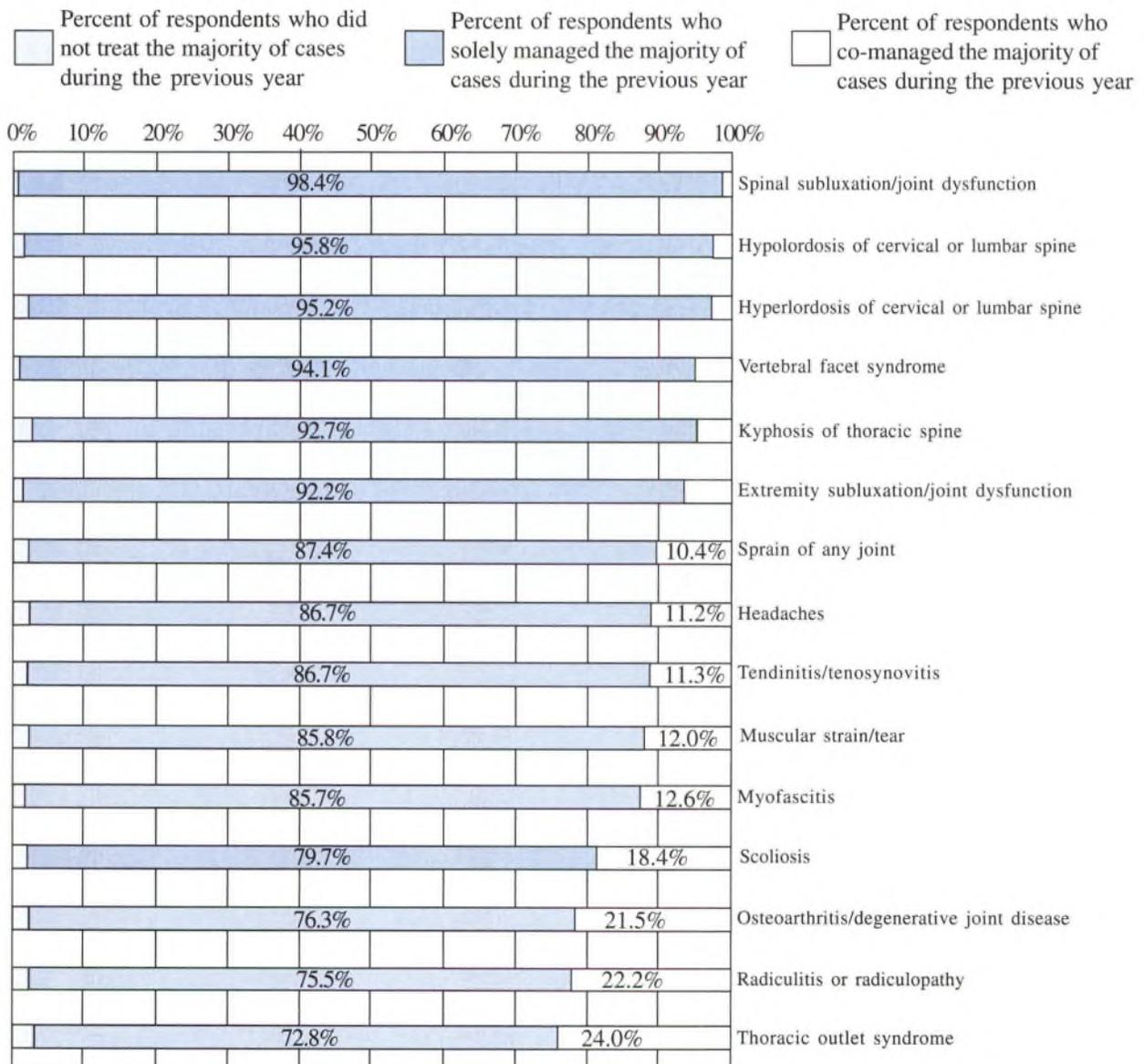


**Figure 9.1c.** Percentage of Chiropractors Who Made a Nonsluxation-based Diagnosis for the Majority of Their Patients With Each Condition.

## Management of Conditions

The following graphs illustrate how chiropractors generally manage patient conditions seen in their practices. The survey instructed respondents to choose one of three management options for the majority of cases of each condition listed in the tables shown previously in this chapter. For each condition, chiropractors were asked to indicate whether they mainly managed that condition solely, comanaged that condition with another practitioner, or did not treat that condition. The following graphs break down the management of each condition into these three components and indicate the percentage of chiropractors that solely manage, comanage, or do not treat each condition.

Figures 9.2a-9.2f graph, in descending order, the conditions for which respondents chose “Treated or managed solely by me in the majority of cases.”



**Figure 9.2a. Management of Conditions**

## Management of Conditions (continued)

Figures 9.2a-9.2f graph, in descending order, the conditions for which respondents chose “Treated or managed solely by me in the majority of cases.”

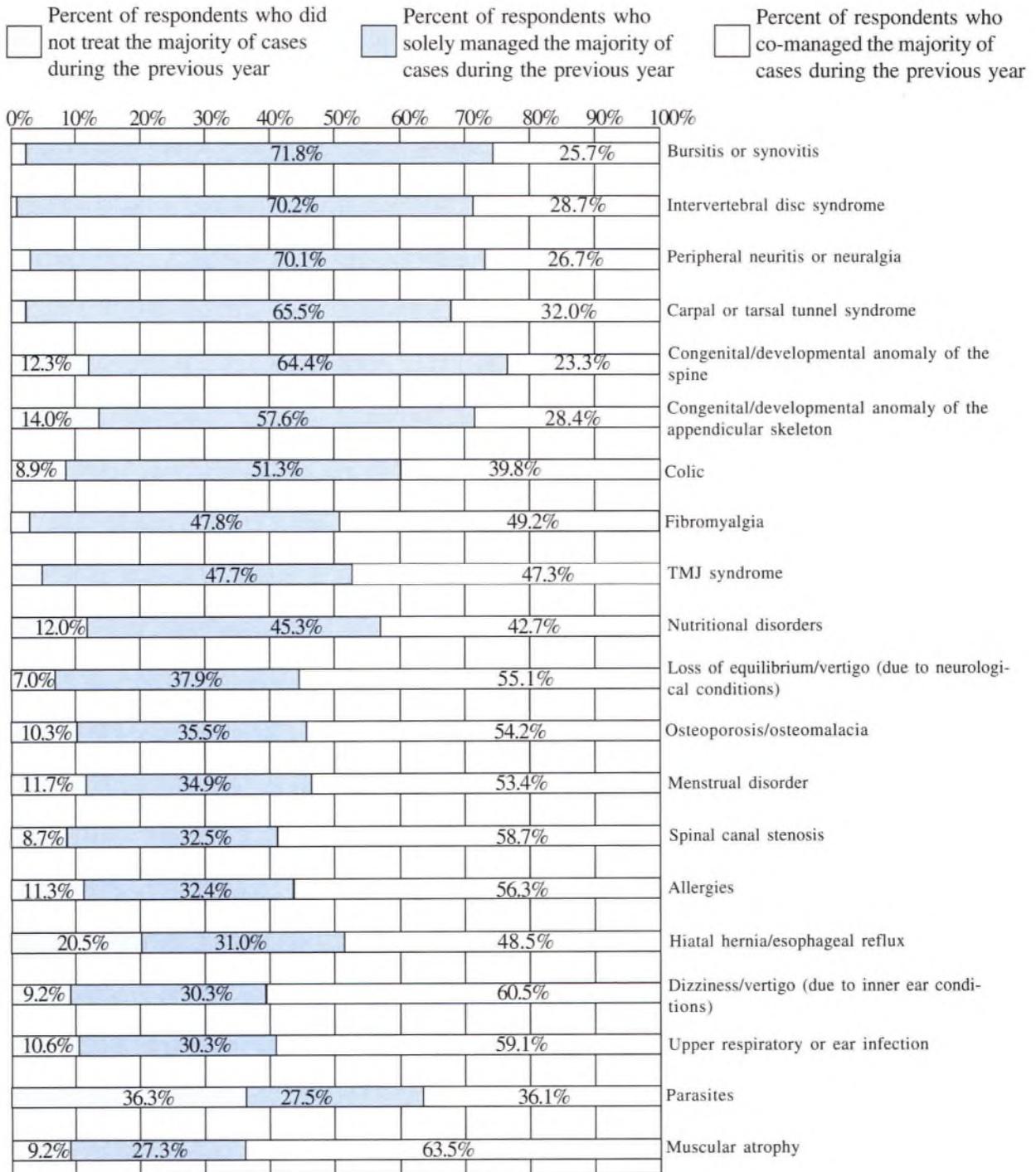


Figure 9.2b. Management of Conditions

## Management of Conditions (continued)

Figures 9.2a-9.2f graph, in descending order, the conditions for which respondents chose “Treated or managed solely by me in the majority of cases.”

Percent of respondents who did not treat the majority of cases during the previous year    
  Percent of respondents who solely managed the majority of cases during the previous year    
  Percent of respondents who co-managed the majority of cases during the previous year

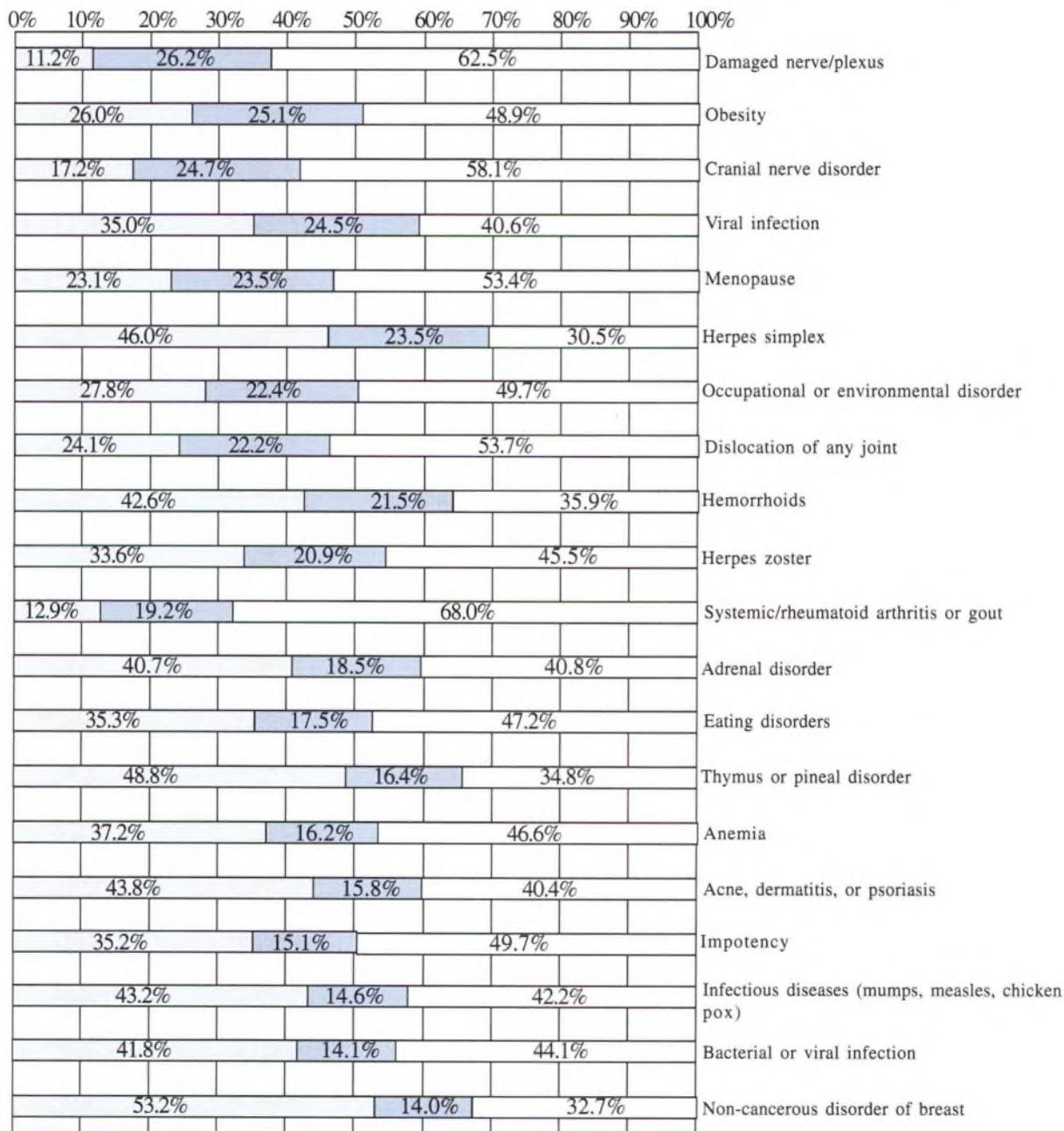


Figure 9.2c. Management of Conditions

## Management of Conditions (continued)

Figures 9.2a-9.2f graph, in descending order, the conditions for which respondents chose “Treated or managed solely by me in the majority of cases.”

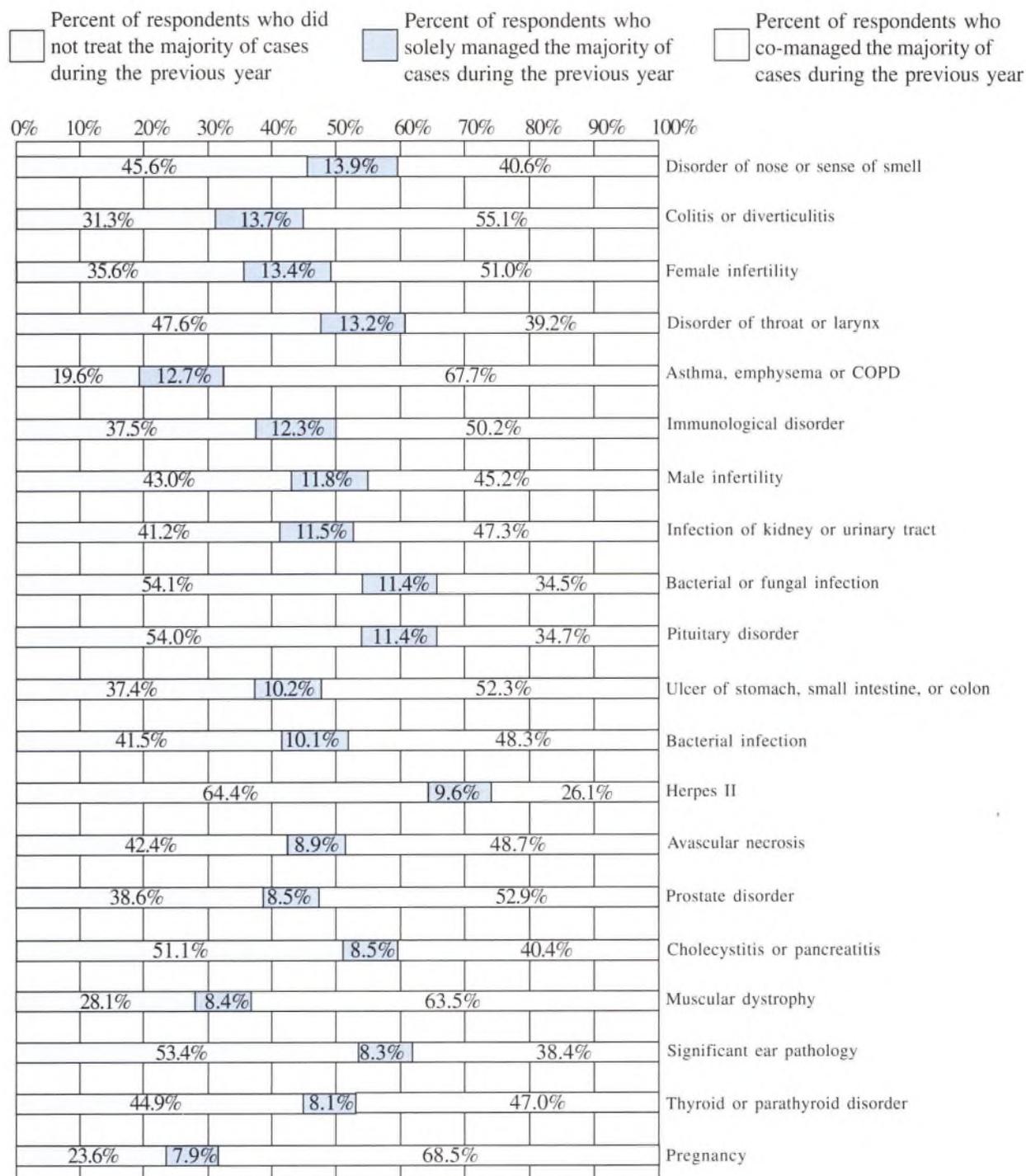


Figure 9.2d. Management of Conditions

## Management of Conditions (continued)

Figures 9.2a-9.2f graph, in descending order, the conditions for which respondents chose “Treated or managed solely by me in the majority of cases.”

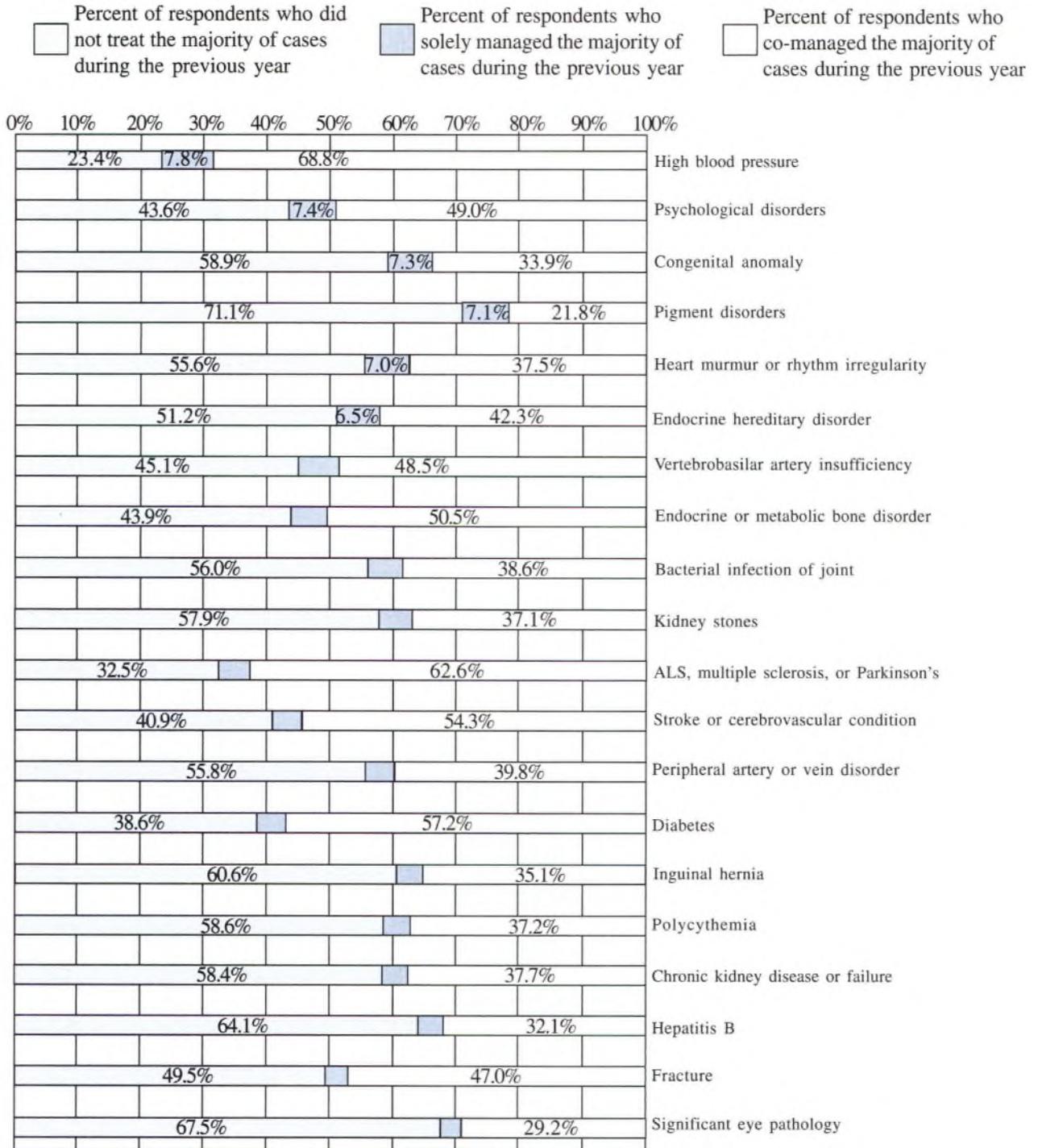


Figure 9.2e. Management of Conditions

## Management of Conditions (continued)

Figures 9.2a-9.2f graph, in descending order, the conditions for which respondents chose “Treated or managed solely by me in the majority of cases.”

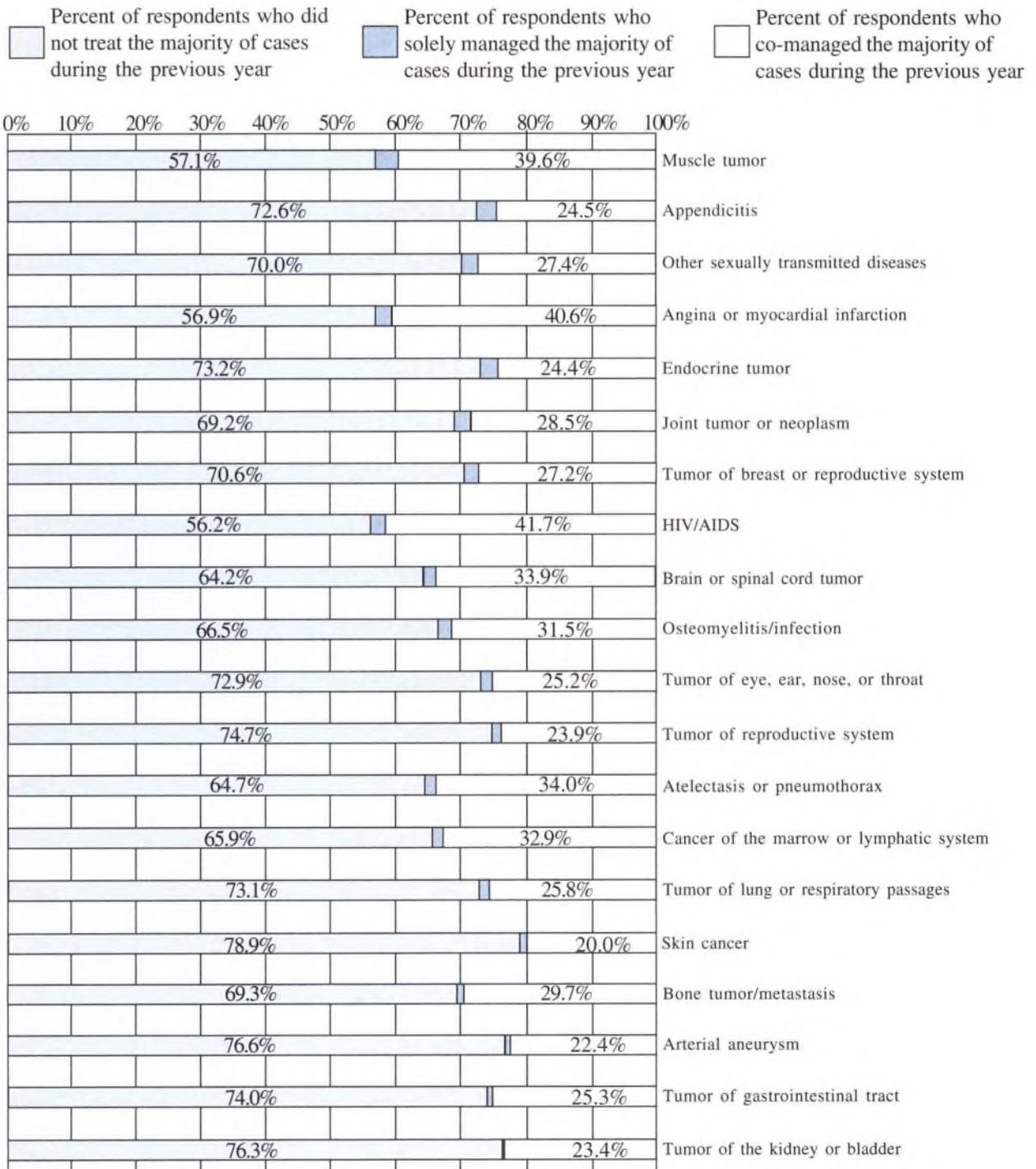


Figure 9.2f. Management of Conditions