

# American **Chiropractic** Association

## TALKING POINTS

### **Chiropractic Cervical Manipulation and Informed Consent**

- One superior court judge has said that “the risk of stroke due to a chiropractic cervical adjustment is so remote that informing the plaintiff of such risk and securing [the patient’s] consent to the adjustment is not required.” Perhaps this is because chiropractic cervical manipulation is hundreds of times safer than the most common treatments for neck pain, headaches and other musculoskeletal conditions.
- Complications of chiropractic cervical manipulation are so rare that, statistically speaking, if you drive more than a mile to get to your chiropractic appointment, it’s more likely that you’ll be seriously injured in a car accident than you’ll be seriously injured during your chiropractic visit.
- Using this logic, if a patient calls a doctor of chiropractic for an appointment, and the doctor is aware that another chiropractor practices within a mile of the patient’s house, should that doctor inform the patient that a different doctor practices closer to them?
- The low risks of chiropractic treatment are reflected in the extremely low malpractice rates for the nation’s doctors of chiropractic. Malpractice insurance rates for health care professionals across the country are directly proportional to the number of claims made against those particular groups by patients. According to NCMIC, the average malpractice insurance rate for doctors of chiropractic across the country is \$1,500. For general physicians, rates range from \$10,000 to \$20,000 -- depending on the area of the country.
- Requiring informed consent for procedures with risks so statistically remote only weakens the impact of informed consent for procedures that are legitimately risky.
- Vertebral artery dissection and stroke have not been proven to be associated with chiropractic manipulative treatment to normal vertebral arteries. Research has shown that everyday activities such as backing up a car, looking up in the sky, "popping" your own neck or having your hair washed at a beauty shop provide risks similar to chiropractic adjustments. In fact, the risks may be greater since no one is evaluating the patient in these other settings.

## **If Not Cervical Manipulation, Then What?**

- The most common conventional first-line treatment for most musculoskeletal pain syndromes is nonsteroidal anti-inflammatory drugs (NSAIDs).
  - NSAIDs are generally considered safe. They are among the most prescribed drugs in the United States, and represent about 5 percent of all prescriptions filled in this country, or some 90 million prescriptions annually.
  - The risks of commonly used NSAIDs for neck pain and other related conditions is probably significantly greater than the risks of any chiropractic procedures – by a factor of 100 or more!
  - In spite of their widespread use and perceived safety, NSAIDs have a significant risk of serious complications.
  - The most common and most serious adverse effects associated with NSAIDs are gastrointestinal ulcers and hemorrhage.
  - Gastrointestinal ulcers can often be very serious, and occasionally lead to fatal complications such as hemorrhage and perforation.
  - One retrospective study reported that nearly 80 percent of all ulcer-related deaths occurred in patients using an NSAID.
  - A more recent study published in The New England Journal of Medicine estimated that at least 103,000 patients are hospitalized per year in the United States for serious gastrointestinal complications due to NSAID use.
  - At an estimated cost of \$15,000 to \$20,000 per hospitalization, the annual direct costs of such complications exceed \$2 billion.
  - If deaths from gastrointestinal toxic effects of NSAIDs were tabulated separately in the National Vital Statistics reports, these effects would constitute the 15<sup>th</sup> most common cause of death in the United States.
  - It is important to emphasize that there is no evidence that NSAIDs are any more effective for long-term treatment than chiropractic care for acute or chronic musculoskeletal pain. The evidence suggests that neck manipulation carries significantly fewer complications than NSAID use.
- The risks of the most conservative surgical procedures for neck-related complaints are several hundred-fold higher than the risks of manipulation.

## Comparing Risks

<u>Procedure or Activity</u>	<u>Estimated Risk</u>
Risk of death or major neurological complications from cervical manipulation	1 in 4,000,000
Risk of death in fatal air crash, flying 425 miles on a scheduled commercial airline	1 in 4,000,000
Risk of death in motor vehicle accident, driving 14.5 miles	1 in 4,000,000
Risk of being disabled in motor vehicle accident, driving 1.1 miles	1 in 1,000,000
Risk of death, per year, from GI bleeding due to NSAID use for osteoarthritis and related conditions	400 in 1,000,000
Overall mortality rate for spinal surgery	7 in 10,000
Death rate from cervical spine surgery	4-10 in 10,000
Rate of serious or life-threatening complications from Spinal stenosis surgery	5 in 100

A study titled "The reality and acceptance of risk," published in JAMA in 1980, found an even greater "voluntary risk" of death per person per year from many common procedures and activities :

<b>Voluntary Risk</b>	<b>Risk of Death Per Person Per Year</b>
Soccer, football	1 in 25,500
Motorcycling	1 in 50
Taking contraceptive pills	1 in 5,000
Power boating	1 in 5,900
Skiing	1 in 430,000
Pregnancy (United Kingdom)	1 in 4,350

Other scientific studies have documented the high rate of deaths and disabilities that result from common medical procedures, including a 0.5% mortality rate for laminectomies and a 2.0% mortality rate for spinal fusions. And in a study of 1,000 workers' compensation patients who received lumbar fusions, after four years from their

operation, 71% of single-operation patients had not returned to work, and 95% of multiple-operation patients had not returned to work.

### **Appropriateness is the Issue**

- For any health care intervention the issue is appropriateness, which involves balancing effectiveness and safety – the risk/benefit ratio.
- Anyone who only wants to discuss risk and not potential benefit is demonstrating a bias or doesn't understand the issue.
- Several extensive reviews of the scientific literature from leading authorities have agreed that neck manipulation is safe, effective and appropriate for patients with a number of very common complaints – for example, common forms of neck pain and headache.
- In 1995, the Quebec Task Force Report on Whiplash Injuries stated that joint manipulation and mobilization were recommended to improve range of motion and reduce pain, and as part of a management strategy based on early return to function and activities as opposed to rest or use of a cervical collar.
- In 1996, the RAND Corporation concluded that “Manipulation is probably slightly more effective than mobilization or physical therapy for some patients with sub-acute or chronic neck pain, and all three treatments are probably superior to usual medical care.” It also found that “manipulation and/or mobilization may be beneficial for muscle tension headache.”
- In 2001, researchers at Duke University found cervical manipulation appropriate for both tension type headache and cervicogenic headache and noted that “cervical spinal manipulation has a very low risk of serious complications” which may be “one of its appeals over drug treatment.”
- For patients with many types of neck pain and headache, there is at least as much scientific evidence showing that chiropractic manipulation is an effective treatment as there is for any other medical or surgical treatment.

### **Safety is Still a Serious Matter**

- It is true that neck manipulation is a risk factor for stroke.
- Although all available evidence demonstrates that it is an extremely small risk, this is a subject the chiropractic profession takes very seriously.

- Our profession seeks to work closely with the medical profession on this matter, in the best interests of patients.
- Chiropractors have contributed valuable research to the physiological, epidemiological and clinical understanding of these injuries.
- In our chiropractic training and in postgraduate continuing education courses, chiropractors are taught to recognize risk factors in patients, and how to treat our patients in the most effective and most responsible manner.

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