Doctors of chiropractic (DCs) use a unique approach to health and wellness. “Conservative chiropractic care” refers to manual manipulation and other non-invasive (non-surgical) methods developed to promote healing throughout the body. DCs are educated in nationally accredited, four-year doctoral graduate school programs through a curriculum that includes a minimum of 4,200 hours of classroom, laboratory and clinical internship, with the average DC program equivalent in classroom hours to allopathic (MD) and osteopathic (DO) medical schools.

Conservative Care Is Sensible, Effective, Cost-Efficient

The safety of the procedures that patients allow their health care providers to carry out on their bodies is of paramount importance. Because chiropractic care is non-invasive, it’s a good place to start. A well-respected review of the evidence in the Annals of Internal Medicine points to chiropractic care as one of the major nonpharmacologic therapies considered effective for acute and chronic low-back pain.1

Even the Journal of the American Medical Association got on the conservative care bandwagon, suggesting to patients that they consider looking into chiropractic care for treatment of back pain.2

A 2012 study found that spinal manipulation for neck and back pain was cost-effective used either alone or combined with other therapies.3 Another recent study based on Washington state workers found that only 1.5 percent of those who visited a doctor of chiropractic first for work-related back pain later had surgery, compared to 42.7 percent of those who saw a surgeon first.4 Conservative care offers ways to reduce pain and muscle spasms. And it can frequently ease the sleep issues and depression that are common with back pain. Surgery and drugs remain as options if chiropractic treatments do not relieve back pain after a fair trial period.

Drugs

Opioid painkiller drugs are considered conservative, too. One problem with these drugs, however, is that they mask pain. They do not cure it. Prescription drugs that numb pain may convince a patient that a musculoskeletal condition is less severe than it is, or that it has healed. That misunderstanding can lead to over-exertion and a delay in the healing process, or even to permanent injury. Addiction and overdosing are two more clear risks patients take when using these types of drugs. The Centers for Disease Control and Prevention say opioid pain relievers cause nearly three out of four prescription drug overdoses.5

Surgery

Surgery for lower-back pain should not be considered unless conservative treatments fail and pain keeps patients
from being able to function for an extended period. During a consultation, a surgeon may suggest spinal fusion (the permanent joining of two or more spinal vertebrae) for back pain. Medicare, however, is calling many of today’s spinal fusions “unnecessary.” The reason? Some surgeons are too quick to operate before first encouraging their patients to try conservative treatments for healing back and other musculoskeletal pain. An analysis of 125,000 spinal fusions in Florida showed that surgeons are increasingly and routinely using this procedure for common low-back problems, such as stenosis, herniated discs, and disc degeneration without accompanying spinal instability/deformity. All of these conditions are “better addressed with safer and less costly treatments,” such as chiropractic care.

Wise Patients Become Their Own Advocates

These days, patients go on the Internet to read about their conditions so they can ask intelligent questions of their health care providers. Doctors of all kinds are surprised at the depth and breadth of their patients’ knowledge and understanding. Patients are discovering that they should always be offered the choice of conservative care for conditions that respond well to manual manipulation. If that option is not given, patients should ask why. A second opinion may be in order.

If surgery is suggested, patients should ask about risks, side effects, length of rehabilitation, chances of failure, and the doctor’s familiarity with the procedure. And if drugs are prescribed, patients should use online resources to carefully evaluate side effects, precautions, interactions, and overdose information. Learn all you can about any condition you may have. Be willing to keep asking questions until you are satisfied with the answers you receive. You and your body will be together for the rest of your life. That’s reason enough to seek out conservative care first.

References