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Chiropractic and Mental Health: A Brief Overview

Christopher Kent, D.C., JD.¹

ABSTRACT

Objective: To briefly review the history and research regarding chiropractic, emotional and psychological health.

Discussion: The scope of chiropractic is as broad as the scope of influence of the nervous system. Although many chiropractors and those they serve tend to focus on disorders associated with the physical body, it is obvious that abnormal nervous system function may also affect emotional and psychological health.

Conclusion: Research addressing mental health issues and chiropractic care have been published, ranging from single case reports to randomized clinical trials. It is recommended that further research be done to explore the relationship between reduction of vertebral subluxation and mental and emotional health

Key Words: *Chiropractic, mental health, vertebral subluxation*

History

The scope of chiropractic is as broad as the scope of influence of the nervous system. Although many chiropractors and those they serve tend to focus on disorders associated with the physical body, it is obvious that abnormal nervous system function may also affect emotional and psychological health.

According to B.J. Palmer, "D.D. Palmer was the first man to discover that insanity was caused by displaced cervical vertebrae, that by replacing them the patient could be restored to normal condition."¹ B.J. also described his expert testimony in a case where he stated, "If an atlas is subluxated it makes abnormal the functions of the brain." In answer to the question, "What is to be done in insanity?" he admonished his reader to "Go back to cause. Adjust that and return that brain to its normal capacity and capability."²

Another pioneer in the field of mental health and chiropractic was Willard Carver, LL.B., D.C.. Carver authored the book, *Psycho-Bio-Physiology*, and wrote, "Between the Psychology and the Physiology I have built the Biologic bridge that scientifically connects these two very important departments of human experience."³

In the 1920s, several inpatient mental health facilities were established where chiropractic adjustments were the dominant clinical service provided. Two of these were located in Davenport, Iowa. In 1922, the Chiropractic Psychopathic Sanitarium was established. The facility was later known as Forest Park Sanitarium. North Dakota Judge A. W. Ponath noted that at the North Dakota state mental hospital, the "cure and discharge rate" ranged from 18-27%, compared to 65% at Forest Park.⁴

The second facility, Clear View Sanitarium, was established in 1926. In 1951, Clear View was acquired by the Palmer School of Chiropractic. W. Heath Quigley, D.C., who directed the sanitarium, described his clinical protocol: "Each day, each patient was examined with the neurocalometer (NCM). If the clinician interpreted the NCM to indicate nerve impingement, the patient was adjusted." Quigley reported that the rooms were "sunny and bright," and that meals included "large servings of fresh vegetables...from a garden."⁵

Unfortunately, both institutions closed, (Forest Park in 1959 and Clear View in 1961) in large measure because of third party pay issues. Insurance companies often refused to pay the

1. President – Foundation for Vertebral Subluxation

costs of care. Iowa statutes at the time did not provide for licensing specialized hospitals; only full service medical hospitals could be licensed. Clear View was not licensed as a hospital, and functioned legally as a nursing home.⁶

The 1970s saw a renewed interest in chiropractic care and mental health issues. In 1973, Herman S. Schwartz, D.C., edited a book titled "Mental Health and Chiropractic: A Multidisciplinary Approach." Contributors included Nobel Laureates Rene Dubos and Linus Pauling, and such notables as Scott Haldeman, A.E. Homewood, Joseph Janse, Alexander Lowen, and Thomas Szasz.⁷ In 1949, Dr. Schwartz had published a preliminary report of 350 patients afflicted with a "nervous or mental disorder" and reported that the majority of them showed improvement under chiropractic care.⁸ Dr. Schwartz was active in the ACA Council on Mental Health (formerly Council on Psychotherapy), which survived through the '70s, but no longer exists.

In 1983, Dr. Quigley authored an article describing a four decades period where "treatment of the mentally ill was a highly motivated discipline within the chiropractic profession."⁹ In 1988, P.J. Goff, Ed.D., wrote a review of the theory and practice of "chiropractic treatment for mental illness."¹⁰

Contemporary Research

Interest in this field continues. Blanks, Schuster and Dobson¹¹ published the results of a retrospective assessment of subluxation-based chiropractic care on self-related health, wellness and quality of life. This is, to my knowledge, the largest study of its kind ever undertaken regarding a chiropractic population. After surveying 2,818 respondents in 156 practices, a strong connection was found between persons receiving Network care and self-reported improvement in health, wellness and quality-of-life.

A systematic review was published which examined psychological outcomes in randomised controlled trials of spinal manipulation. The study concluded that "There was some evidence that spinal manipulation improved psychological outcomes compared with verbal interventions...The clinical implications are that physical treatments, such as spinal manipulation have psychological benefits."¹²

Genthner et al¹³ reported on a series of 15 patients with a history of depression. The Beck Depression Inventory II was used to measure the baseline level of depression and any post-care changes following orthospinology care. A paired t-test demonstrated significant improvement in depression test scores.

Other articles addressing mental health issues and chiropractic care have been published, ranging from single case reports to randomized clinical trials. Favorable responses were reported in persons with conditions including addiction¹⁴, depression¹⁵, ADHD¹⁶, autism¹⁷, dyslexia and learning disabilities¹⁸. Additionally, published papers report changes in general health measures in chiropractic patients using the RAND-36

and Global Well Being Scale (GWBS)¹⁹, changes in domains of health related quality of life among public safety personnel undergoing chiropractic care²⁰, and chiropractic care in patients with cancer-related traumatic stress symptoms.²¹

Conclusion

Over 38 years ago, my first chiropractor explained that everything we experience is processed through our nervous system. When our perception of the world is distorted by nerve interference, it compromises our ability to respond appropriately. He noted that in addition to damaging our physical health, it could result in impaired psychological and emotional function as well. Finally, he opined that when this happened to a significant number of people in a society, a sick society would result.

Research addressing mental health issues and chiropractic care has been published, ranging from single case reports to randomized clinical trials. It is recommended that further research be done to explore the relationship between reduction of vertebral subluxation and mental and emotional health

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