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WFC Review of Immunity & Chiropractic Fatally Flawed

Researchers Use Eminence Instead of Evidence in Opinion Piece

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The World Federation of Chiropractic (WFC) has issued what they call a “rapid review” of materials that they are “. . . aware have been cited in support of claims of effectiveness for spinal adjustment/manipulation in conferring or enhancing immunity.”

The “rapid review” was conducted by the World Federation of Chiropractic’s Research Committee made up of the following individuals:

Greg Kawchuk DC, PhD - Canadian Memorial Chiropractic College Adjunct
Christine Goertz DC, PhD - Palmer College of Chiropractic Honorary Alumna
Iben Axén DC, PhD - Institut Franco-Européen de Chiropratique
Martin Descarreaux DC, PhD - Université du Québec à Trois-Rivières
Simon French B.App.Sci (Chiro), MPH, PhD - Macquarie University
Mitch Haas MA, DC – University of Western States
Jan Hartvigsen DC, PhD - Nordic Institute of Chiropractic
Carolina Kolberg BSc (Chiro), PhD - Latin American Federation of Chiropractic
Michele Maiers DC, MPH, PhD – Northwestern Health Sciences University

The Flawed “Rapid Review”

The Research Committee of the WFC claims to have reviewed these “materials,” which include 7 items. The first one is an unpublished report that they do not provide a citation for (Pero). Four studies involve enhancement of immune markers following chiropractic intervention; one study on enhanced respiratory burst, two studies on increased interleukin 2, and one on increased CD4 cell counts. They also cite a review of literature on the evidence supporting stimulation of the neuroimmunoendocrine system and a review of one hundred thousand cases of influenza managed by osteopathy during the 1918 flu pandemic.

All of the reports they reviewed demonstrated positive findings in support of manual methods such as chiropractic adjustments and manipulation in effecting a positive immune response.

Despite these positive findings, the WFC Research Committee came to the following bizarre, highly nuanced conclusion:

“No credible, scientific evidence that spinal adjustment / manipulation has any clinically relevant effect on the immune system was found. Available studies have small sample sizes and a lack of symptomatic subjects. At the time of writing, there exists no credible,

scientific evidence that would permit claims of effectiveness for conferring or enhancing immunity through spinal adjustment / manipulation to be made in communications by chiropractors. In the event that new scientific evidence emerges, it will be critically appraised using scientific methods of analysis.”

The Research Committee’s use of the word “credible” to support their claim that there is no evidence of a “clinically relevant effect” is without definition. They do not define “credible” or what (in their opinion) would be considered “credible” evidence.

They further state that they were not able to find credible research, however they admittedly did not look for it. The fact that they did not conduct a literature review is especially strange because the title of their document deceptively implies that this was an actual review of the scientific literature. It was not.

By failing to establish the criteria for credible evidence, they are able to arbitrarily dismiss any evidence offered that does not support their position. A proper review of literature should specify search and inclusion criteria. The review should describe which databases were searched, what years, and search terms employed. Failure to do so results in the exclusion of relevant evidence. Furthermore, the use of amorphous and undefined terms such as “credible” leads to cherry-picking based on dogma. The result is a concealment of material facts that the naive reader may assume do not exist. This is a political response masquerading as a scientific pursuit.

Another undefined term the WFC Committee used is “clinically relevant.” Use of this term leads to the same problems described above regarding “credible.”

Furthermore, they state that if new evidence emerges, “it will be critically appraised using scientific methods of analysis.” The flawed rapid review does not use a scientific method of analysis.

A Flawed Methodology

Kawchuk and his co-authors give a cursory description of the methodology they used for their review as follows:

“This rapid review considers materials the WFC is aware have been cited in support of claims of effectiveness for spinal adjustment / manipulation in conferring or enhancing immunity.”

This approach is methodologically flawed. The methods described by Kawchuk and his co-authors for their “review,” is the use of **“materials the WFC is aware”** of. Kawchuk and his co-authors do not reveal where the documents in their review “have been cited.” Are they referring to a peer-reviewed research journal or a MEME posted on social media? Where are their references? Disguising their methodologically flawed “report” as a “review of the relevant literature” is deceitful.

Perhaps they were not able to find “credible” research because they did not use a credible methodology to look for it. Unfortunately, chiropractic colleges and regulatory authorities have endorsed the WFC’s methodologically flawed “review” even though the researchers did not look for relevant literature. Instead, they relied on 7 items they were “aware have been cited.”

Kawchuk and his WFC co-authors claim they did not find any credible evidence that: spinal adjustment/manipulation “**has any**” clinically relevant effect on the immune system.

The facts are that even though their methodology was flawed they did “review” research papers published in indexed journals. These were papers that were scientifically validated through the peer-review process and published by journal editors. Further, this peer-reviewed research did report on several clinically relevant effects on the immune system following chiropractic intervention, which is plainly evident when one reviews the research.

Unfounded Assertions and Flawed Conclusions

The WFC researchers make several unfounded assertions in an attempt to buttress their flawed conclusions regarding clinical relevance.

They claim (without evidence) that clinical meaning of the results regarding enhanced respiratory burst and increased interleukin 2 are not known. Perhaps this is because these researchers are not clinicians and do not have the capacity to apply these studies to clinical practice in an evidence-informed model. Either way, we would suggest that the researchers review what respiratory burst is and review the role of interleukin in the immune response. Perhaps that would help them understand the effect that enhancing these processes through chiropractic might have on human health. That is, after all, the job of the clinician in an evidence-informed model.

Another unfounded assertion of the WFC researchers is their concerns about a small sample size in the CD4 study. They imply that only results found in large sample sizes can be used to inform clinical practice. That view is contrary to all accepted norms. Interestingly, they criticize the methodology of the CD4 study even though it was published in a peer-reviewed indexed journal, unlike their methodologically flawed rapid review.

The WFC researchers claim that the immune biomarker studies cannot be used to inform clinical practice because only asymptomatic subjects were used. Such an approach is a logical fallacy because the claim itself reveals that they know full well that the results of those studies *are* clinically relevant. Thus, the WFC has created a false narrative revolving around claims of “boosting, enhancing, and stimulating” the immune system through the application of chiropractic care. Applying this data to clinical practice is the job of the clinician.

A Misguided Model of Evidence-Informed Practice

The WFC researchers seem to have developed their own model for Evidenced Informed Practice, and they have decided not to share the elements of that model with their readers. For example, they dismiss the review of osteopathy during the 1918 flu pandemic out of hand, claiming erroneously that “these narrative reports of historical events do not equate to scientific studies.” In the well-entrenched model of evidence-informed practice, all types and levels of evidence are included for evaluation in the evidence domain. Further, the WFC’s flawed methodology left out numerous other published papers on the osteopathic response to the 1918 pandemic. To say nothing of the available literature on the response and outcomes from chiropractic care – which they did not review at all. These are further symptoms of their flawed and biased methodology leading to unfounded assertions, flawed conclusions, and ultimately a misguided model of evidence-informed practice.

The WFC purports to support evidence-informed practice. This report demonstrates that WFC's claim of an evidence-informed approach is a performative contradiction. Sackett defines evidence-based practice as: "The conscientious, explicit, and judicious use of the current best evidence in making decisions about the care of individual patients...[It] is not restricted to randomized trials and meta-analyses. It involves tracking down the best external evidence with which to answer our clinical questions." That evidence is then considered in light of the specific patient's clinical circumstances, the desires of the patient, and the clinical experience of the practitioner to make patient-centered clinical recommendations.

The problem with the WFC's tactic is not, as Sackett proposed, "... integrating individual clinical expertise and the best external evidence." Every doctor does that. The problem is the cavalier dismissal of evidence by the WFC that doesn't fit into a rigid hierarchy. This dismissal includes the compartmentalizing of the profession into two classes: (1) an oligarchy of researchers; and (2) doctors who are reduced to mere technicians following the flow charts and algorithms promulgated by the elite.

Bias & Epistemic Trespassing

Another major flaw of the "rapid review" by the WFC researchers is bias. The credibility of the review should be questioned even further because some of the authors are known critics and deniers of vertebral subluxation theory and clinical practice. For example complaints about Kawchuck's presentation during a WFC Researcher Conference were filed with the WFC by the International Chiropractors Association (ICA). Kawchuk, compared bringing a child to a vitalistic chiropractor to bringing them to a Catholic priest at a children's school. According to the ICA's President, this was:

"... so offensive, to so many people, that this behavior alone should be sufficient to immediately take the action recommended by the ICA. The demonstrated religious intolerance and blatant offensive behavior on a public stage speaks for itself. This behavior cannot be excused under any circumstances."

In a separate presentation at the same conference, Hartvigsen suggested that subluxation was imaginary. He said that the practice of using x-rays to identify subluxation and outcomes of care was "absolutely rubbish."

These researchers are not only biased regarding the theoretical basis for the chiropractic profession, but they are also epistemic trespassers on the topic of immunity. To our knowledge, none of them have degrees in immunology, nor have they published on the topic. Yet here they are, presenting their opinions in a flawed review on that very topic.

The WFC has repeatedly attacked the management of vertebral subluxation in a vitalistic, salutogenic model and the WFC endorses chiropractic as only the treatment of musculoskeletal pain syndromes.

Kawchuk and his co-authors' continue to demonstrate obvious disdain for vertebral subluxation theory in a vitalistic, salutogenic model. They hold a limited view of chiropractic as the management of pain syndromes only. These flaws, added to their epistemic trespassing, reveal widespread bias and ignorance of chiropractic's foundation. Anyone relying on their flawed document must contend with those issues.

The Real Motivation for Releasing this Document

Finally, in their conclusion, we find Kawchuk, his co-authors, and the WFC's motivation for the production of this flawed document:

“At the time of writing, there exists no credible, scientific evidence that would permit claims of effectiveness for conferring or enhancing immunity through spinal adjustment/manipulation to be made in communications by chiropractors.”

The key here is claims of effectiveness in communications by chiropractors. Herein we find the real motivation to produce this document by the WFC and its supporters. They sought to limit the ability of chiropractors to communicate on the topic. Within hours of the WFC releasing this “review” it was endorsed or otherwise adopted by several organizations, regulatory boards, and at least one chiropractic school. These groups all have political connections to the WFC and hold a similar bias against traditional chiropractic theory and practice. The regulatory boards then used the document as a rationale to outright threaten their licensees for communicating any inference that chiropractic plays a role in immunity. The president of the chiropractic college that endorsed the review threatened that chiropractors making such claims would be “under the hand of the law” as a result.

Any regulatory authority relying on this document to persecute chiropractors will have to contend with the fact that the conclusion regarding communications is based on flawed methodology, a grossly incomplete review of the literature, unfounded interpretations of the results of the studies, and bias demonstrated by the authors. Further, the process by which these regulatory authorities arrived at the decision to endorse it will have to be revealed during the disposition of any complaints against practitioners as well as through any open records requests and sunshine laws. According to the Supreme Court of the United States, active market players serving on regulatory boards that restrain the trade of their fellow licensees who are in direct competition with them may put themselves at risk for legal action without the support of the state.