



Dr Miriam Stoppard
Daily Mirror
1 Canada Square
Canary Wharf
LONDON
E14 5BR

7 October 2008

Dear Dr Stoppard

Re: 'Stay safe if you go alternative' *Daily Mirror* 22 September 2008

Most of the advice you gave to your readers about 'how to stay safe' when seeking care from some alternative therapists was largely helpful and cannot be argued with. There were several points, however, where it became misleading and I hope you find the following comments constructive and helpful.

Despite good quality evidence for the chiropractic management of back pain and the fact that it can be categorised as a 'low risk intervention' there remains, oddly, much misinformation about it. Therefore, I would suggest that it would be wise to check the evidence yourself if you have not already done so, so that you can be confident that you are presenting your readers with an impartial representation of the current evidence.

There is *no* evidence that examination or manipulation of the neck *causes* stroke.

Journalists, and a few others, routinely confuse *association* with *cause* but as a registered medical practitioner you will be aware of the distinction. If you wish to check sources of information for yourself the following would be an excellent start: Cassidy, Boyle et al '*Risk of Vertebrobasilar Stroke and Chiropractic Care: Results of a Population-Based Case-Control and Case-Crossover Study*', **Spine** 33(4S): S176-183 (2008).

This study analysed a Canadian government database covering over 109 million person years that recorded all primary medical care provider (GP) and chiropractic visits and all VBA stroke admissions in the province of Ontario between 1993-2002. It found that the very slightly increased VBA stroke risk rate for neck pain patients consulting a GP or a chiropractor, as opposed to the general risk in the community, is exactly the same whether the patient receives medical care from a GP or chiropractic neck manipulation.

The increased risks of stroke *associated* with GP and chiropractic visits are likely to be due to patients with headache and neck pain, which can be warning signs of stroke, seeking care before their stroke.

There is evidence that the chiropractic management of back pain is effective in terms of outcome and cost. Since the 1990's evidence-based national clinical guidelines for the management of acute and chronic low-back pain, prepared by expert interdisciplinary panels in a variety of countries, including the UK, have recommended spinal manipulation, early activity and patient education as appropriate first line management for patients with non-specific or common mechanical back pain. I don't want to swamp you with references and so refer you only to the most recent guideline– the *European Back Pain Guidelines* which can be read on www.backpaineurope.org .

Further, large Medical Research Council trials published in the BMJ, have reported that chiropractic management and skilled manipulation are more effective and cost-effective than usual or best medical care. I'll give you two references for this:

- Meade TW et al (1990) *Low-Back Pain of Mechanical Origin: Randomised Comparison of Chiropractic and Hospital Outpatient Treatment*, BMJ 300: 1431-37
- United Kingdom Back Pain Exercise and Manipulation (UK BEAM) *Randomised Trial: Effectiveness of Physical Treatments for Back Pain in Primary Care*, BMJ Online First, Nov 19, 2004:1-8

I should also emphasise that

- UK chiropractors are trained in differential diagnosis and are required to refer urgently patients presenting with symptoms of stroke onset to the appropriate health professionals
- spinal manipulation refers to those techniques practised, as appropriate, by chiropractors, osteopaths and 'extended scope' physiotherapists
- all chiropractors must abide by the GCC's *Code of Practice and Standard of Proficiency*. The GCC is the UK-wide independent statutory regulator for chiropractic; where we receive evidence that a chiropractor has not acted in the patient's best interests, we will take action

If you wish to discuss any aspect of my letter, or would find it helpful to discuss the current position with leaders in the field of musculoskeletal health research, please don't hesitate to contact me.

Yours sincerely



Peter Dixon
Chairman
General Chiropractic Council
communications@gcc-uk.org