

Dialogue between allopathic and alternative/ complementary practitioners should continue

Re: "The Futility of Feuding" by Dr. Milt Hammerly

I read the article by Dr. Milt Hammerly with mixed emotion. At first I thought he was advising allopathic medicine to integrate with alternative medicine. My area of specialization as a chiropractor involves manual manipulation and nutrition. After finishing this article it is my impression that allopathic medicine and "so called" alternative medicine should remain separate and distinct. We now know that American citizens spend more money on complementary or alternative medicine in office visits than they do in a medical doctor's office. They also make more trips to the alternative or comple-

mentary medicine provider than they do to the allopathic provider. I saw emphasis toward the end of the article in a sentence that states, "If physicians can't incorporate CAM into their practices without fear of jeopardizing their licenses CAM will continue to be provided almost entirely without medical supervision." Thank God! Why would I want an allopathic practitioner pretending to know about nutrition and manual manipulation supervising my cases? It further states in the article, "Thus any integrated model which combines WAM and CAM must have physician supervision." It is implied by the article that physician supervision means DO or MD. Again, why would I need a physician

to supervise nutritional supplementation, nutritional advice, or manual manipulation? There is even further irony in the last paragraph where it states, "... it is incumbent on the medical profession to quit feuding - both internally amongst ourselves and externally with complementary/alternative medicine practitioners."

How is it possible not to have a feud with complementary or alternative medicine if "the medical community must show leadership in the integration of western allopathic medicine and complementary alternative medicine and promote the vital role of medical supervision?" Since when have allopathic practitioners become expert enough in complementary and alternative medicine to have the role of supervision? The smarter choice would be to refer to someone who

knows best. Patient dollars spent and patient visits should let you know who is providing the service most liked, most cost effective and with the best result in American society.

A dialogue should continue between allopathic practitioners and complementary/alternative practitioners. Not just to educate the MD and DO on how to incorporate these within his own practice but when to make the appropriate referral so that patients may be managed and supervised by the health care provider with the best experience in nutrition and manual medicine.

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