"The Primary Care Conference," Chicago, IL, May 17-18, 2002. Strength in diversity: Professional and legislative opportunities in primary care by the recognition, defining and promotion of the licensure of chiropractic medical education, competencies and skills.

To the editor:

Congratulations on an excellent December 2002 issue. The 6 articles on primary care merit thoughtful study. In that vein, a statement in Dr. Reiner Kremer's article requires scrutiny:

"The consumer wants one-stop shopping, ideally one primary-care physician who is "drugless" philosophically, but has access to prescriptive medications when medically necessary and reasonable."

With respect, how is it possible for a doctor to be drugless philosophically while prescribing drugs? Isn't this like being *"a little bit pregnant?"*

What is the prevailing view within the chiropractic profession? In 1996, the Association of Chiropractic Colleges (ACC) drafted a position paper on chiropractic scope and practice. This document stated:

"Chiropractic is concerned with the preservation and restoration of health, and focuses particular attention on the subluxation."

"The practice of chiropractic includes: establishing a diagnosis, facilitating neurological and biomechanical integrity through appropriate chiropractic case management and promoting health."

"Chiropractic is a health care discipline which emphasizes the inherent recuperative power of the body to heal itself without the use of drugs or surgery."

If the ACC position paper truly represents the consensus of the profession, we should ask ourselves who are the fringe elements within chiropractic? When individuals maintain that chiropractors do not diagnose, they obviously do not represent the mainstream within our profession. Likewise, when individuals advocate the addition of drugs to our scope of practice, they also comprise a fringe element that is not representative of the core values of our profession.

With all the documented hazards associated with pharmaceutical intervention, I wonders why some chiropractors want prescription rights. Do drugs magically become less toxic when administered by a chiropractor who is 'drugless philosophically'? Society doesn't need yet another category of medical provider to dispense drugs. Rather, the public desperately needs *health* care professionals who are skilled at the *prevention* of chronic degenerative disease, before it has progressed to the point where crisis medical intervention is required. Chiropractors can fill this niche, and this does not require or benefit from prescription rights.

Edward Brown, DC, DABCI
Chair, Department of Diagnosis & Clinical Applications
Parker College of Chiropractic
2500 Walnut Hill Lane
Dallas, TX 75229
Email: EVBrown@parkercc.edu