

**From the office of the President
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4th October, 2004

Our Ref.: PhD/ECU/EU/ 041004/2

To The European Commission
DG Health and Consumers' Protection
Public Health & Risk Assessment
To the attention of Mrs Paula DUARTE GASPAR
Unit C5 Health Strategy
Rue Froissart, 101

B 1040 BRUSSELS

Dear Madam,

Please find enclosed herewith the European Chiropractors' Union (ECU) contribution to the responses requested in your document "High Level Process of Reflection On Patient Mobility and Healthcare Developments in the European Union."

I am of course entirely at your disposal should you require any additional information.

Thanking you in anticipation for your attention, I remain,

Sincerely Yours,

Philippe Druart DC
President

« Enabling good health for all »

A reflection process for a new EU health strategy

“HOW CHIROPRACTIC CAN HELP”

1. Purpose of this document

In July 2004 the European Commission proposed a long reflection process concerning a new European health strategy. It counts *“on national governments, stakeholders, international organisations, health professionals and citizens to help develop and implement an effective European health strategy”* and recognizes the extent of such a reflection.

The European Chiropractors' Union, founded in 1932 in London, is one of these international organisations, uniquely for health professionals only (and therefore, citizens). It unites the National Associations (17) of Chiropractors in Europe. It guarantees the guidelines for a chiropractic practise in respect of deontological and ethical rules, and at the same time controls the high educational standards of its members (3000). It is the reason why it should be recognized as the competent voice of chiropractic and chiropractors.

In no way whatsoever does chiropractic consider itself a panacea. It brings a new dimension to the historical medicine and, in that sense, it can build the health edifice in a few very specific fields that are now accepted and recognised. As can be seen further on, the consequences of osteo-articular diseases are such that chiropractic is seeing its therapeutic relevance and integration emerging in the same proportion.

2. Definition and Role of Chiropractic

“Chiropractic is concerned with the diagnosis, treatment, prophylaxis and rehabilitation of pain syndromes and dysfunctions due to lesions that affect the locomotor system of the human body, as well as their biomechanical and neurophysiologic consequences”. (ECU – 1991)

International Research and recognition of chiropractic have endorsed this definition in terms of efficacy for numerous health problems directly linked with the locomotor system and the spine more particularly. The choice of the 10 year project “Bone and Joint Decade” (2000-2010), which was agreed upon by all health professionals concerned, further emphasises this particular incidence of osteo-articular diseases on

people's health and therefore reinforces the role of chiropractic in the general public health system.

For the European Commission, *“Europe should take positive action to avoid ill health in the first place. (...) The time has come for emphasis for treating ill health to promoting good health”*.

In fact, the basic chiropractic “philosophic” principles reflect entirely these principles of prevention and “wellness” The role of chiropractic therefore corresponds to this statement. Indeed, by the care it provides in addressing biomechanical and neurological dysfunction in the locomotor system, chiropractic will not only relieve the pain and other symptoms for which most patients are consulting, but will also improve the relationship between structure and function, neurological “reflexes” and the major role of the nervous system to the general regulation of the body. As a natural method of healing, chiropractic avoids numerous side effects.

3. Incidence of the ratio “Cost/Effectiveness” in Chiropractic

In a recent communication {(26.11.2003) 728 final} entitled *“Improving quality in work: a review of recent progress.”*, the European Commission observes (p. 12, § 2.4 - “Health and workers’ safety”): *“The high absenteeism due to accidents at work and work-related illnesses and occupational diseases are the most visible consequences that poor health and safety at work can have on the labour market. In the European Union, in the year 2000, a total of 158 million days’ work was lost, corresponding to an average of 20 days per accident.”* (...) *“According to the 1999 Ad-Hoc module on “Work related health problems” of the Labour Force Survey and to the survey of the European Foundation for the Improvement of Living Conditions on the perception of the workers and employees of the work in conditions, more and more workers suffer from musculo-skeletal disorders such as back pain and disorders caused by repeated movements (52%), from stress, depression and anxiety (18%) as well as general tiredness, hearing disorders and cardiovascular diseases”*.

It is noted from this that more than half of the accidents at work causing absenteeism of more than 20 days, (82 million day’ work/year in EU), are due to musculo-skeletal troubles, precisely in a domain where chiropractic excels. This was recognised by the fact that the Canadian Government followed the advice of the now ‘old’ Manga study (1993-1995) in recommending it as the first choice of treatment towards reducing these statistics and exorbitant expenses.

The socio-economical costs of such an epidemic are not due to the therapeutic costs of course, but to the lengthy work absences, not only unproductive but repaid. Many studies (*available on simple request*) have largely demonstrated the positive ratio “cost/effectiveness” of chiropractic in the specific field of back pain. Moreover, the chiropractor operating with reduced equipment generates a less costly treatment, more rapid and more efficient.

The avoidance of excessive drugs prescriptions and quite a few surgical interventions,

together with the limitation of very expensive examinations, further reduces the general cost. Therefore, it seems logical and indispensable to include the chiropractic treatment in this new European health strategy. Through its prophylactic character, this treatment will also prevent most of the acute crises and/or the turn down to the still more costly chronic conditions.

4. Safety of Chiropractic, safety for Patients

The Commission declares: “ *The role of the EU is to protect citizens, foster synergies by fostering partnerships, mainstream health into all EU policies and inform citizens and health players*”.

The chiropractic care applied in an appropriate manner by an educated practitioner with respect to the healing arts rules, is **safe** and can guarantee all therapeutic safety to the patient. Among all medical practices, chiropractic is considered worldwide as one of the most safe. Of the manual medicines, Chiropractic is the first.

Accidents are extremely rare when a treatment is performed by a qualified chiropractor. Therapeutic risks and contra-indications are well known. On the contrary to few affirmations, no statistical study has ever proved a particular inherent danger to the practice of chiropractic.

Moreover, to guarantee this security and the safety of the patients, which is the most important issue, the EU has a mission to promote the necessary and indispensable measures to avoid abuses of title and practice, so as in turn to avoid any risk of these accidents, which are mostly due to “therapists” who are non-educated in this specific speciality.

The numerous patients’ associations, notably ProChiropractic Europe (PCE) deplore this jurisdictional emptiness in a few European States and act in this sense for a legislation of chiropractors to secure their members. They also insist on the right of direct access to chiropractic care in each Member State with the same possibilities of reimbursement and safety as they obtained in their own country. Therefore, it is imperative to include chiropractors in the texts on Recognition of Professional Qualifications and so to favour the European access of their patients to the chiropractic care. These legal dispositions would ensure their rights and their free circulation in the Member States.

By this inclusion the EU would encourage the creation of multiple new employments in the health sector by the expansion that would take this discipline and would moreover rejuvenate the frames of health professionals where a certain ageing has been widely noted by EU. It would also help in the opening of new chiropractic colleges, which, of course, would engender new quality jobs.

5. Conclusion

It was not our intention here to submerge this appeal of reflection with dozens of documents relative to the chiropractic practice in the world, or of legislative texts or scientific articles on the research of validity and efficacy of this branch of the healing arts. All such documentation is available and on immediate release to the European Commission on simple request. It will provide “*a solid EU-wide knowledge base*”.

We simply wanted to stress the benefits that can be reaped from an under-employed therapy in Europe, economical in its application, fast in its therapeutic results, organised professionally at world level (World Federation of Chiropractic – WHO Member), European level (ECU) and national level (each state having its own national association). Modern Chiropractic, founded at the end of the XIXth century, has now reached maturity. It must be considered at its recognised value.

Liège (Belgium), 10th October 2004

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