

A gallimaufry of things from 2024

Phillip Ebrall

Abstract: This Journal has redacted its first paper and I explain the reasoning in this Editorial. First however it is a big 'thank you' to the Immediate Past President of the *Australian Chiropractors Association*, Dr David Cahill, who has completed his 3-year presidential term. We appreciate his continuing service as Vice-President.

The ethical standards of the Texas Chiropractic College (TxCC) are questioned on the basis of their commercial activity to provide College certification to Japanese nationals completing a short course on-campus. These people return to Japan as 'chiropractors' trained in America and are now bringing the profession into disrepute. I look at the impotence of all bodies which are meant to protect and advance the profession. The Journal appreciates *Dynamic Chiropractic*'s exposure of this highly questionable behaviour.

We end on a good note, with a brief mention of some new work from Harrison's CBP[®] group and a fascinating paper by Joel Pessa with new findings about '*Glymphatic Circulation in Human Nerves*' Those of us with a keen interest in the role of the CSF in health and dis-ease will enjoy this paper immensely.

Indexing Terms: Chiropractic; subluxation; Texas Chiropractic College; Japan

Introduction

The Editorial Board of this masthead collectively thanks Dr David Cahill for his 3 years of service as President of the *Australian Chiropractic Association*. Dr Cahill assumed his Presidency in the worst of times as the profession, and the Nation, were crawling out of the pandemic limitations. This *Journal* has found David consistently transparent and supportive and appreciates that he is continuing to serve our profession. We sincerely wish him well.

David concluded his 3-year term in November 2024 as per the ACA constitution and moved to the elected role of Vice President and his entitlement as Immediate Past President. As the ACA Guard changes, the profession continues to battle what we simply refer to as '*Baby-gate*', a matter I will address in-depth in a forthcoming paper.

These could also be the '*Best of Times*' given the relatively stable progression of Chiropractic including the commencement of program delivery in Victoria by the Australian Chiropractic College, and the move by Victoria University to also common

Australian Chiropractic College, and the move by *Victoria University* to also commence a program in Melbourne.

... the American Chiropractic Association seems to have lost its moral compass by welcoming untrained therapists as Members ...'



Food for thought

No society rooted in processed junk food and mass medication can survive for long. (1) In Tasmania, nearly as many people (n=29)(2) die from unintentional overdose by prescription drugs than are killed on the roads (10-year average n=33)(3) In 2022, 66% of male Tasmanians had a BMI in either the overweight or obese categories compared with 58% of females. (4) Surely the first step in any public health campaign has to be cessation of normalising highly processed fast food as a *'family meal*'.

It will be interesting to see if the New Year brings us a focus in the USA on health from the point of view of taking some power from the Corporates who continue to manufacture and sell highly processed foods of little-to-no nutritional value.

Redaction is not retraction

This Journal has redacted its first paper. Redaction means that while the paper continues to exist, it is no longer retrievable from this website. This is a lesser level than retraction which essentially obliterates a paper.

By way of transparency we detected an unacceptable bias towards the topic in one of that paper's reviewers. We also detected some unclear if not misleading propositions leading to a conclusion that the '*CARE Guidelines for Case Reports*' were now to be the only method of writing Case Reports of relevance to Chiropractors. This is not true and we apologise for any suggestion it could be.

The style of Case Reports acceptable to this Journal is variable and is well demonstrated in the many ASRF Case Reports we are publishing and in the variety of reports now appearing from authors around the world. We have made a concerted effort to write and publish in the manner of day-to-day Chiropractic conversations about clinical matters. We keep our finger on this style of communication through our relationship with the ASRF.

While others are now also climbing on the CARE Guideline bandwagon, Dr Cuthbert, our Associate Editor, and I have published a guide to our preferred style. (5) As also previously published we see clinical evidence in a different light and believe that the CARE Guidelines are more about pleasing the medical hierarchy than the day-to-day Chiropractor. While acknowledging them we don't bow to them. We also note other authors (6) are now also promoting what they call a 'shorter form' of Case Report. All this means in that they are encouraging Chiropractors to write in 'Chiropractic' about the care they provide.

Our understanding has matured beyond the limitations of CARE's ideas to accept the approach now found within the JBI *Model of Evidence-Based Healthcare*. (5) This is a cycle which fosters the synthesis of evidence and then its transfer to where it is needed, and its subsequent implementation. Each of these actions is developed as a science. Case Reports are an essential contribution to the development of knowledge and clinical wisdom in Chiropractic.

We must attribute the source of our ideas

In 1995 Terrett published a revelatory article about the misuse of the term '*chiropractic*' in the published literature of potential and realised harm. (7) Today we see a similar piece by another

^{1.} Mike Adams. Brighteon Broadcast News. Wed 4 Sep 2024. https://www.brighteon.com/1483100f-5185-45b4-a34a-646f31665305

^{2.} Rob Inglis. Tassie overdose hotspots. Hobart Mercury. Wed Sep 4 2024 p. 13

^{3.} Liz Gwynn. With Tasmania's 'horrific' road toll already above 10-year average, a crash survivor urges drivers to be safe. ABC News. Mon 12 Sep 2022. https:// www.abc.net.au/news/2022-09-12/tasmania-horrific-road-toll-already-above-10-year-average/101408134.

^{4.} Report on the Tasmanian Population Health Survey 2022. Department of Health, Tasmanian Government. Dec 2023. https://www.health.tas.gov.au/sites/default/ files/2024-01/report_on_the_tasmanian_population_health_survey_2022.pdf.

Cuthbert S, Ebrall P. The contemporary role of the case report in evidence generation for the discipline of Chiropractic Asia-Pac Chiropr J. 2024;5.1. apcj.net/ papers-issue-5-1/#CuthbertEbrallCaseReports

Malaya C, Stuber K, Du Rose A. A novel view of case reports in Chiropractic clinical research: Barriers and solutions for clinicians. J Contemp Chiropr. 2024;7(1):173-9.

^{7.} Terrett AG. Misuse of the literature by medical authors in discussing spinal manipulative therapy injury. J Manipulative Physiol Ther. 1995 May;18(4):203-10.

Australian, Peter Tuchin, reaching the same essential conclusion '*Many case reports incorrectly used the term "chiropractic; when referring to SMT provided by a non-chiropractor (e.g. massage therapist)*'. (8)

In 2013 Tuchin cited Terrett (9) in a related paper which he now cites as #25 in this current paper. Yet in this current paper Tuchin fails to acknowledge Terrett's foundational work on this idea. The pertinent question is, why? given the paper seems to draw its intellectual concept from Terrett's original work.

Our profession needs more than parrot pieces that add a little twist to things that are already well established; indeed we demand new ideas and new explorations over and beyond a '*rinse and repeat*' of another academic's original work.

The thin line of reasonableness

Whatever views you may hold about public health matters the debate is about the limits of what a reasonable Chiropractor may communicate. It is wise to remember that *your* considered interpretation of freely available material by others, is somebody else's conspiracy.

We saw this during the American Presidential election campaign, where some Chiropractors were loud in their endorsement of Harris and their condemnation of Trump. This is a self-inflicted silliness which nobody should take seriously.

However in a hearing before the *Victorian Civil & Administrative Tribunal* (VCAT) which aired allegations raised by the *Chiropractic Board of Australia* (CBA) through the *Australian Health Practitioner Regulation Agency* (AHPRA) on Thursday 31 October 2024, a wide variety of social media posts made by a person in 2019 who at that time was a Chiropractor registered in Australia, were discussed.

The matter is far from resolved and it would be completely inappropriate of me to offer specific comment on that matter, especially given the undoubted expertise of the members of that tribunal. I do feel it appropriate to say that, as registered Chiropractors, there is a narrow spectrum of matters in which it may be considered that a Chiropractor, by virtue of their training, has expertise to allow informed comment.

This expertise will naturally vary from Chiropractor to Chiropractor depending on their individual advanced studies. My pragmatic expression of this is to stay in your own wheelhouse and don't think you are Joe Rogan or Candace Owens.

It is also wise to remember that everything you say will be criticised by another Chiropractor, often an academic of little note but granted status as an 'expert'. These people will eat you alive and the whole question of Chiropractors eating their own is the subject of the detailed report I mentioned earlier on factors which I shall publish in due course.

A matter of morality

The Chiropractic environment in Japan is a mess which is worsening since the closure in 2022 of the nation's only internationally accredited Chiropractic program at the *Tokyo College of Chiropractic*. My association with TCC dates from 1995 and culminated with me serving as President in its final years. It is fair to suggest I have some understanding of Chiropractic in Japan.

In 2015 the *Texas College of Chiropractic* (TxCC) opened the *Nobunori Iwama Anatomical Building*, formerly the *Turley Anatomical Building*. The building dates from 1979 and was renovated in 2014, serving as the home of the gross anatomy laboratory. The renovations included the installation of state-of-the-art equipment, ventilation, flooring, HVAC and high intensity lighting.

^{8.} Tuchin P. What evidence can case reports on spinal manipulative therapy and cervical artery dissection provide? J Contemp Chiropr 2024;7(1)Aug 17. At https:// journal.parker.edu/article/122622-what-evidence-can-case-reports-on-spine-manipulative-therapy-and-cervical-artery-dissection-provide.

Tuchin PJ. Chiropractic and Stroke: Association or Causation?. Int J Clin Pract. 2013 (Sep); 67 (9): 825–833. Documented at https://chiro.org/Stroke/ Chiropractic_and_Stroke.shtml.

Two other matters to note from 2015 was the awarding of the title of '*Honorary DC*' to Iwama, the head of the *National Healthy Life Promotion Association (Zenkenkai*) by TxCC where he trained. (10) It was noted elsewhere that Iwama '*studied abroad for a short time in the United States, the home of chiropractic, completed their training and returned to Japan*'. Also in 2015 TxCC President Brad McKechnie DC, DACAN stepped down as president (October 31). (11) The *Journal* is not suggesting any relationship among these three matters. We note that the street address given for what is called '*The Japan Chiropractic Association*' (12) on the web pages of a business index (13) is 5912 Spencer Highway, Pasadena, TX, the same street address as TxCC. This seems an unusual intimacy.

The 'JCA' considers that '*in Japan Chiropractic is a folk remedy*' (14) and on reviewing some of the 'courses' they claim to offer, in a most laissez-faire manner, I am disgusted to see an accredited Chiropractic College selling them '*Texas Chiropractic College*' certificates on completion of a few hours of Year 1 or 2 human anatomy.

This matter has been building since 2006 when, in April of that year, TxCC opened the *Yasunori Iwama Education Center*, containing 45 faculty offices, a 4,000-square foot state-of-the-art assessment centre, a chemistry laboratory, and a 750-seat auditorium that includes classroom seating for up to 100 students. (15)

Donald Petersen Jr of the highly reputable *Dynamic Chiropractic* news outlet has raised serious concerns (16, 17) about these and and related events, especially the ad hoc nature of supposed 'chiropractic' training delivered in Japan by Iwama's commercial operation, *zenkenkai*. (18) Read Petersen's articles to see the learning in beauty therapies and some manual therapies which is offered.

But it gets worse. A press release dated 7 May 2024 from the American Chiropractic Association opens with 'The American Chiropractic Association (AmCA) recently welcomed more than 200 members of the Japanese Chiropractic Association (JCA) to its membership roll. JCA initiated the international membership agreement as part of its mission to popularize and increase utilization of chiropractic care in Japan'. (19)

In that same release the AmCA claims to 'attract the most principled and accomplished chiropractors, who understand that it takes more to be called an AmCA chiropractor'. Given that the AmCA grants membership to Japanese nationals who may have completed a short demonstration course in human anatomy at TxCC makes a nonsense of their claim to be 'leading the profession'. (19) None of these supposed 'chiropractors' are of the required educational standard to be admitted as members of the Japan Chiropractic Register. (20)

This disgraceful selling-out of Chiropractic must be ended

Ethical members of the global Chiropractic profession rightly want to put a stop to this debasement of the profession in Japan. Pragmatic members of the profession realise nothing will

^{10.} Accessed 28 December 2024 [Japanese] http://www.nippon-chokuhan-eastkanto2nd.com/2015/05/post-de0a.html

^{11.} CHRON. Press Release. Accessed 28 December 2024. https://www.chron.com/neighborhood/pasadena/news/article/McKechnie-resigns-as-President-of-Texas-9844702.php

^{12.} JCA. Home. 28 December 2024. https://www.japan-chiropractic.jp/program/

^{13.} ChiroUniverse. 29 December 2024. https://www.chirouniverse.com/pasadena/japan-chiropractic-association

^{14.} zenkenkai. [Japanese]. 28 Decemv\ber 2024. https://www.zenkenkai.jp/nobunori-dc

^{15.} Texas Chiropractic College. Campus facilities. 28 December 2024. https://www.txchiro.edu/life-at-tcc/campus-facilities/

^{16.} Petersen DM Jr. Would you rather be a Chiropractic Therapist. Dynamic Chiropractic. Jan 2025. https://dynamicchiropractic.com/article/102549-would-yourather-be-a-chiropractic-therapist

^{17.} Petersen DM Jr. Chiropractic at Risk Globally. Are TCC and the ACA Supporting a Second Chiropractic Profession? Dynamic Chiropractic. Jan 2025. https:// dynamicchiropractic.com/article/102549-would-you-rather-be-a-chiropractic-therapist

^{18.} zenkenkai. Home. At 28 December 2024. https://www.zenkenkai.jp/cooperation

^{19.} The American Chiropractic Association. ACA Welcomes Japanese Members. 7 May 2024. https://www.acatoday.org/news-publications/aca-welcomes-japanesemembers/

^{20.} Japan Chiropractic Register. At 28 December 2024. https://chiroreg.jp/english/

happen if we simply '*follow the money*' and appreciate that the structures put in place to grow and protect the profession are to weak to stand-up to TxCC and demand an end to these activities.

TxCC is accredited by the *American Council on Chiropractic Education*. There most recent report states: (21)

Interim Report (2/2023); Interim Site Visit (03/2023). Council actions: At its July 2023 meeting, the Council continued the accreditation of the doctor of chiropractic degree program at TCC with no further reporting required, at this time.

Bases and reasons for decision: The Council reviewed all materials related to the interim site visit review regarding the CCE Accreditation Standards (and applicable policies) and determined that the program meets the standards for accreditation in program effectiveness (Standard 2.A.3), student achievement (Standard 2.A.4), assessment of learning outcomes and curricular effectiveness (Standard 2.H.2), and distance/correspondence education (Standard 2.K.1-2).

I would like to think the CCE would have an interest in the quality of short courses provided by an institution but according to the January 2025 version of the CCE standards this is not the case. All that is required, no matter how paltry the offering, is that the institution confirms the identity of the person receiving any such program. (22, pp. 25-7.)

Just as we can dismiss CCE as having no authority or interest in the integrity of Chiropractic education offered by a college they accredit to visiting students resident in Japan, so we can dismiss the *Councils on Chiropractic Education International*, (23) a grandiose sounding body with less power and influence than a Mr Whippy ice-cream van. The CCEI claim responsibility for '*Worldwide Quality Assurance for Chiropractic Education*' but obviously not in the case of TxCC's activities in Japan.

Perhaps we could rely on the *Council on Chiropractic Education Australasia* (CCEA) the body which accredited the TCC? No, as the CCEA has no statutory authority in any country outside Australia and New Zealand and may only accredit an institution in another country when invited to do so. I can not imagine zenkenkai inviting CCEA to accredit its short courses for *'beauty chiroaestheticians'*. (24)

How about the WFC intervening? After all, their new '*International Chiropractic Education Alliance*' must surely be concerned with what is happening in Japan, yet again I have no expectation given the newness of this body and its impotence though association with the WFC. The ICEA does have 'a core purpose of promoting consistency and high quality standards of chiropractic education, underpinned by WFC principles, including the pillars of evidence-based, people-centered, interprofessional and collaborative practice'. (25) This body is expensive to be part of and only has institutional members and no founding member from Japan.

Which brings us to the peak professional body in Japan, the *Japan Association of Chiropractors*, JAC. (26) This association is the only reputable Chiropractic association in Japan and grew our of the original *Japanese Chiropractors Association*, a name now taken by the Iwama group. I was present during the transition of the true JCA to JAC and posed proudly in 2019 with the outgoing JCA flag. Japanese law is a little blurry to me as an outsider but I know that under Australian law, Iwama and his crew could not register 'JCA' as 'their' association. This speaks more now to the intent of Iwama than to any legality.



^{21.} Council on Chiropractic Education. Accredited Doctor of Chiropractic Programs. Texas Chiropractic College. https://www.cce-usa.org/dcp-information.html

^{22.} Council on Chiropractic Education. CCE Accreditation Standards. Principles, Processes & Requirements for Accreditation. At 29 December 2024. https://www.cce-usa.org/uploads/1/0/6/5/106500339/2025-01_cce_accreditation_standards_current_pdf

^{23.} Councils on Chiropractic Education International. Home. At 29 December 2024. https://www.cceintl.org/?lightbox=dataltem-j4r5zfft1

^{24.} Zenkenkai. About. At 29 December 2024. https://www.zenkenkai.jp/about

^{25.} International Chiropractic Education Alliance. At 29 December 2024. https://www.wfc.org/website/documents/1307_icea-framework-document-2024_11_23.pdf

^{26.} Japan Association of Chiropractors. Home [English]. At 29 December 2024. https://jac-chiro.org/en/home/

Our question must become, '*what is the JAC doing about this?*' Perhaps it is their lack of action which is behind the growing discontent among Japanese Chiropractors with the irrelevance of JAC. From my observation there are two modes of responsible Chiropractic practice in Japan; the traditional manner of a small office with a reasonable patient flow, sufficient to provide a good living as epitomised by members of the JAC, and an emerging model of multi-doctor practices with TCC graduates which have high patient flows and a larger clinic footprint even in high-rent areas such as Ginza. It is obvious to me that good patient care delivered with a progressive mindset is the way forward to build a stronger profession in Japan.

The threat to the profession stems from the WFC's inability to do anything meaningful and the continuing obtuseness of Japanese lawmakers to legitimise the profession. In broad terms the American's are to blame as during their occupation after WWII they denied continuance of local laws in Hokkaido which legitimised Chiropractic as a discipline. Now lawmakers find it all too hard to separate international-level Chiropractors from the local practitioners of bone-setting and other therapies, including those now under the auspices of Iwama's *National Healthy Life Promotion Association* for which annual registration is ¥ 10,500 (AUD\$107).

Their business model requires a registration fee of Y 22,000 (AUD\$224) and annual membership fee of Y 29,700 (AUD\$302) and before commencing any supposed training, one must complete the *'beginner's Cairo business seminar'*, which costs Y 418,000 (AUD\$4,259)

From their website: 'After the beginner's warmer business seminar, you can receive internship from a senior teacher. As a chiropractor, you will gain confidence in responding to patients through practical training at treatment centres and treatment venues of seniors who are already active. In addition, you can review the skills until you are satisfied. In addition, the guidance fee for teachers who are in charge of guidance during your internship will be borne by the headquarters. The instruction fee is paid to the teachers in charge according to the success of everyone's income'. (27)

There is also the *Japan Council Chiropractic Education* (28) which of course closes the loop for zenkenkai by 'registering' its 'graduates', those who have completed a 2 or 3 day workshop, and seems to offer liability insurance. It is no surprise that the principal is given as Yasunori Iwama, this time giving his address in Japan. (29)

A truism is that a foreign national with a professional qualification, perhaps a 'DC' from a US college, can practice in the US for less than 6 months and not pay income tax. They can then return to their home country and again practice for less than 6 months and not pay income tax. The result is obvious which explains rapid wealth accumulation without the encumbrance of societal expectations for honesty.

Good clinical news from CBP

A new paper (30) from Oakley et al has shown positive clinical outcomes associated with correcting a *'significant thoracolumbar kyphosis and anterior C7-S1 sagittal vertical axis'*. Harrison's research team are contributing to build the evidence of positive health outcomes from correction to sagittal spinal curvatures.

I can only but wonder how this may relate to Joel Pessa's new findings about '*Glymphatic Circulation in Human Nerves*'. (31) It seems that daily we edge a little closer to mechanisms which help us understand what we are going with our patients. Pessa concludes '*Ventricular infusion and*

^{27.} zenkenkai. Support. At 29 December 2024. https://www.zenkenkai.jp/support#support1

^{28.} apan Council Chiropractic Education. Home. At 29 December 2024. https://www.jcce.jp/

^{29.} Dun and Bradstreet. Business Directory. At 29 December 2024. https://www.dnb.com/business-directory/companyprofiles.japan_council_chiropractic_education_co_ltd.54c0eb280e80d74cd77f491a99ec70cb.html

^{30.} Oakley PA, Gage WH, Harrison DE, et al. Non-surgical reduction in thoracolumbar kyphosis and sagittal vertical axis corresponding with improved sensorimotor control in an older adult with spinal deformity: a Chiropractic Biophysics® case report. J Phys Ther Sci. 2024;36(11):756-64. DOI 10.1589/jpts.36.756.

Pessa JE. Ventricular Infusion and Nanoprobes Identify Cerebrospinal Fluid and Glymphatic Circulation in Human Nerves. Plast Reconstr Surg Glob Open. 2022 Feb 17;10(2):e4126. DOI 10.1097/GOX.00000000004126. Open access at https://pmc.ncbi.nlm.nih.gov/articles/PMC8856590/

nanoprobes identify CSF flow in neural sheaths of human nerves. CSF flow in nerves is an open circulatory system that occurs via channels, intracellular flow, and cell-to-cell transport associated with glial cells'.

It is an open access paper well worth a read and is available through the link in citation 31.

Phillip Ebrall Editor BAppSc(Chiropr), GC Tert Learn Teach, MPhotog, PhD, DC (Hon), FACCS, FICCS Research Scientist: History and Philosophy - Chiropractic [Field 220299] pebrall@me.com

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