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Music: "Oh No, Ross and Carrie! Theme Song" by Brian Keith Dalton. A jaunty, upbeat instrumental.

Carrie Poppy: Hello! Welcome to *Oh No, Ross and Carrie!*, the show where we don't just report on fringe science, spirituality, claims of the paranormal—we take part ourselves.

Ross Blocher: Yep! When they make the claims, we show up, so you don't have to. I'm Ross Blocher.

Carrie Poppy: And I'm Carrie Poppy, and we are back to crack Ross's back.

Ross Blocher: (Laughs.) Alright! Yeah. Chiropractic.

Carrie Poppy: Chiropractic. We've had it on our list probably since 2011.

Ross Blocher: From the beginning! (*In a movie announcer voice.*) In the beginning, the list contained chiropractic.

Chiropractic, it feels like a really big topic. And whenever people would ask me about it, I had kind of a go to line about this. I said, "From my understanding, the origins of chiropractic are pseudoscientific. But nowadays people are so used to going to chiropractors, they're everywhere." You know, I would kind of liken it to sort of a coin flip or something. You might get someone who's a witch doctor, and you might get somebody who is using mostly evidence-based practices, doing physical therapy-like stuff.

But I wasn't 100% sure on that. So, I just said, you know, buyer beware. Do a little bit of research, look for red flags. So, I was always curious for the podcast for us to try this, but I thought, well, first I need something to go horribly wrong with my back.

Carrie Poppy: (Laughs.) So, you're like, "I got to wait to be 41."

Ross Blocher: Yeah. And I can't say it's been horribly wrong or anything like that. But I had enough of a complaint and frequent mornings where I'd kind of wake up and be like, "Oh, there's no comfortable way to get out of bed."

Carrie Poppy: Oh, really? Okay.

Ross Blocher: So, I thought okay, hey, this is the time. Now I can finally go start seeking out the advice of chiropractors.

Carrie Poppy: I feel like I've been very lucky with the back pain thing.

Ross Blocher: That's great. It's a good thing to be lucky in.

Carrie Poppy: I mean, knock on wood, I'm 40 now. So, get back to me in 10 years. But yeah, you know, I just feel like upright apes in general are always complaining about their backs, and I'm not.

Ross Blocher: It's one of those easy go-tos when talking about human errors and unintelligent design that evolution gives us. Obviously, we're pretty awesome. Like, human bodies are cool. I don't want to complain too much. They heal themselves. Come on. That's amazing.

Carrie Poppy: Yes, God, if you are listening, we are not that pissed off about your design of the human body. But we have notes.

Ross Blocher: Also, God, you're welcome to come on the show anytime.

(Carrie laughs.)

We always leave the third mic open for you.

Carrie Poppy: Absolutely. I know we've shat on you a lot, but you are welcome here.

Ross Blocher: Full rights of representation. But you know, in as much as the word miracle or miraculous is useful, I would say our bodies are miraculous. So, I just don't want to complain too much. But given the bodies that we have, they are not perfect. They do fall apart over time.

Carrie Poppy: They keep the score.

Ross Blocher: Eventually, we do die, all of us so far.

Carrie Poppy: That's true. Uh, WELL...

Ross Blocher: Well?

Carrie Poppy: You hear about Jesus. Oh, he died; he just came back.

Ross Blocher: (*Chuckles.*) Did he?

Carrie Poppy: Okay, complicated. (Laughs.)

Ross Blocher: Yeah. There's so many ways I want to get distracted by that. But yeah, so chiropractice—first of all, just the word itself is interesting.

Carrie Poppy: Yes! Let's do a whole episode about this. What's going on with this?

(Ross cackles.)

I hate having to talk about it, because you have to talk about this noun that sounds like an adjective the whole time. (*Using a stuffy academic voice*.) "Well, let's discuss chiropractic." What?! Chiropractic what?

Ross Blocher: It sounds like an adjective! Yeah. You find yourself in many sentences where you don't quite know how to finish them, because you have to conjugate chiropractic somehow that it just doesn't want to go.

Carrie Poppy: So that the person knows you're done! (*Laughs*.)

Ross Blocher: I know I've said this before, but I feel this way about the Jehovah's Witnesses. 'Cause you want to refer to the practice and belief of Mormonism or Unitarianism. Or Jehovah's Witness-ism?

(Carrie echoes him with a laugh.)

Yeah, how do you refer to like the practice and belief itself? Yeah, chiropractic has that problem big time. Also, chiro means hand.

Carrie Poppy: Oh, does it?

Ross Blocher: Yeah, so chiromancy is another word for palm reading.

Carrie Poppy: Oh, of course. Okay. Uh-huh.

Ross Blocher: And no one really uses this word—chirography is another word for handwriting as opposed to typeset.

Carrie Poppy: Oh, I see.

Ross Blocher: And then chirality gets talked about a lot in the sciences, where asymmetry matters. Say like the left-handed version of a protein does something different than the right-handed version. The exact same molecules, but in a flipped configuration can do very different things. So, there we go.

Carrie Poppy: That makes sense.

Ross Blocher: That's my examination of chirality. And then, you know, practice. Doing.

Carrie Poppy: So, those people who have their organs flipped inside their body, I wonder if that has that word in it.

Ross Blocher: Oh! If people would refer to that as chirality.

Carrie Poppy: Yeah.

Ross Blocher: That would make sense. I do remember hearing a rumor that Mother Teresa had her organs flipped around, and apparently that is not true.

Carrie Poppy: Oh, really? I know it does happen, but yeah, it's rare.

Ross Blocher: The things people say. Now I feel like I need to double check it.

Carrie Poppy: I mean, it'd be interesting if she is one. I feel like it's one of those things where the actual number of people who have had it is known, because it's so rare. Like, you'll come up with a number like 36!

Ross Blocher: Right. Oh yeah, this would come up right away if Mother Teresa actually had that.

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Carrie Poppy: Oh, definitely. She wouldn't sit for an x ray anyway. She was like, "I gotta go make people miserable."

Ross Blocher: That's one of those weird situations where you go to look something up and you realize not only was that thing I'd been told not like a popular belief, it was just one one-off telling me bad information.

Carrie Poppy: Ugh, hate it.

Ross Blocher: And now, with anchoring bias, it stayed with me for years, and I still think of that.

Carrie Poppy: UGH! I'm still mad at one faceless man I met 15 years ago who told me not to comfort my dog. Because it just sent me into the spiral of like, "Really, what happens?"

And he was like, "Well, the dog is anxious, and you're telling them, good job, you're anxious. You know, this is when I reward you."

And I was like, "Really? Okay." And it like fucked me up about Toomey.

Ross Blocher: Oh, no!

Carrie Poppy: I know. You gotta look it up. Don't just listen to men. Look it up.

Ross Blocher: Women occasionally get things wrong too, so. Just to be extra safe.

Carrie Poppy: (*Giggles.*) Well, I think I listened to him because he was a man, is what I'm saying.

Ross Blocher: Fair. Oh, interesting. The same information from a woman you would have just disregarded? "You're just a woman!"

Carrie Poppy: I think just like the feeling was, "Oh, right. I have this motherly bias that I'm probably blind to. And you're seeing something I don't see, because you are not a woman." That was the...

Ross Blocher: Oh, interesting! Okay. That there was a gendered aspect to the advice itself.

Carrie Poppy: Yeah, that's how I interpreted it at the time, as a young woman.

Ross Blocher: Oh, here we go. Okay. So, situs inversus is what that's called when you have the organs reversed. And it says, "As hearts and livers are chiral—"

Carrie Poppy: Mm! There we go!

Ross Blocher: This is in a Wikipedia article. "Geometric problems arise placing an organ into a cavity shaped in the mirror image." So, there you go. Chirality matters! That's why we're talking about chiropractice.

So, we were waiting for the right problem to arise. And over the years, many people have written us about chiropractors, asked about chiropractors. So, I think it's one of our most requested alternative medical topics.

Carrie Poppy: So, I think a problem for me was I've been to a chiropractor.

Ross Blocher: You have! Yeah, I was waiting to hear about this.

Carrie Poppy: Okay. Yeah. And I didn't want to go back. (*Laughs*.)

Ross Blocher: Back?

Carrie Poppy: Yes. True. Also that. Yeah, I've been to a couple, like when I was really young, early 20s, and I was trying to figure out my headaches. I went to chiropractors.

Ross Blocher: Okay. At the time you were trying a lot of different things. You were going to the psychic eye, and you know.

Carrie Poppy: Yeah. True. (Laughs.)

Ross Blocher: And didn't have that negative association. Okay. So, we mentioned backs. Typically that's what people think of chiropractic for is that "Oh, my back hurts. I got lower back problems. Very common. I've got upper back problems. I've got a misalignment. I've got something popping out. I need to go see a chiropractor." And it's just become sort of a popular understanding. No one really questions that when a friend says, "I'm going to go see the chiropractor."

I guess because of who I am, I was going to say like, I wouldn't immediately stop and be like, "Don't do that!"

Like if someone said, "Oh, I'm going to take homeopathy for this," I would say, well, let's talk about homeopathy for a moment.

Carrie Poppy: Depending on what they're sick with. But yeah.

Ross Blocher: And I feel like I'd be a little more reluctant with someone seeing a chiropractor to be like, "Whoa, whoa, let's have a conversation first before you go see the chiropractor."

And I was watching a talk from the 2019 SciCon by Jan Bellamy, and she was saying that there are 77,000 practicing chiropractors in the US.

Carrie Poppy: Wow.

Ross Blocher: Yeah, that's a lot.

Carrie Poppy: Are they all from the Cleveland College of Chiropractic?

Ross Blocher: They might be. Yes.

(Carrie laughs.)

Remember that, because it'll come up in this investigation quite a bit. And she said it's a 12 billion per year business. I noticed in this book, *Trick or Treatment*—a favorite of ours—

Carrie Poppy: Mm-hm, by Simon Singh and Edzard Ernst.

Ross Blocher: Now her talk was in 2019, and this book was from 2008, I think. It was saying that it was like a \$3,000,000,000 industry. So, it could have just gone up incredibly since then, but we're talking billions here. Yeah. And I mean, insurance covers it. Most insurance does. Medicaid covers seeing a chiropractor. And depending on what you're getting taken care of, you know, it might be really straightforward and maybe the chiropractor can take care of it.

Carrie Poppy: What if someone is listening to this, and they've just never even heard the word chiropractic? How would you define it?

Ross Blocher: Good question. Generously and how I feel most people understand chiropractic, I'm going to say that it's a specialist who deals with issues relating to the back and the spine and can help make adjustments.

Carrie Poppy: Okay. Yeah. I think that's similar to my picture. I think I would maybe expand back to spinal column, because I think they're going up into the neck and stuff as well.

Ross Blocher: Yeah. But as I've learned, learning more about this topic, chiropractic does not restrain itself to the back. Depending again on who you go see, they might say, "Oh, you know what? Whatever ails you, we've got a way of dealing with it."

Carrie Poppy: In fact! BJ Palmer, son of the creator of chiropractic—I found an ad from him in the early 1900s specifically saying that! Saying whatever your disease is, I can cure it by cracking your back.

Ross Blocher: And you can find practitioners today on YouTube, which BJ Palmer never could have dreamed of!

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Still saying, "Yeah, we can take care of whatever ails you." Not all are going to say that.

Carrie Poppy: And shouldn't.

Ross Blocher: Yes, we can say that outright. So, what I wanted to do with this investigation was to see at least a few chiropractors. So, we're going to talk about three chiropractors that I saw. This is going to be a three-part episode.

Carrie Poppy: Okay. Oh, wow! We're setting our goal at the beginning?! Whoa! This isn't us. Okay! (*Laughs*.)

Ross Blocher: Yes! This—I'm constraining it. It's going to happen. It makes sense.

Carrie Poppy: Okay, okay. Wow! Okay.

Ross Blocher: We will be visited by three spirits of chiropractice. See?

Carrie Poppy: I like chiropractice.

Ross Blocher: Yeah, I've used it.

Carrie Poppy: It should just be that.

Ross Blocher: I've used it in sentences, and nobody's ever balked.

Carrie Poppy: I did think about it.

(They laugh.)

Ross Blocher: I think maybe I've seen people kind of gaze slightly into the distance like is that right? It sounds right.

Carrie Poppy: Is that right? I think I've heard this other crazier word. Do I tell him it's a crazier word?

Ross Blocher: He seemed confident.

Carrie Poppy: He gave a better word, but it's wrong. What do I do now?

Ross Blocher: I'm going to look this up later.

(They laugh.)

I might send Ross a text to tell him not to say chiropractice.

Wait, let's try Googling that.

Carrie Poppy: No, it's a good word. I think we just need to own it as like your creation, the alternative we're putting forth. Yes, we know! But chiropractice is the new juice of 2024.

Ross Blocher: I just put this in Google search, and it said, "Showing results for chiropractic instead of chiropractice." The hell are you talking about?

Carrie Poppy: Aw, see. They don't get it. They don't get it like we do.

Ross Blocher: You know, I didn't want to claim this as mine. Oh, definition of chiropractice by the free dictionary. "A system of healthcare that focuses on disorders of the musculoskeletal system and nervous system and their effects on overall health." Never mind. It took me to chiropractic for the definition. You know what? Every time you use chiropractice, think of me.

Carrie Poppy: A dollar.

Ross Blocher: Do it in remembrance of me. Yeah. Donate to MaximumFun.org/join. Okay. So, that's the basic setup. Now I've been conflicted here. I keep telling Carrie about this. There's so much juicy, wild information about the history of chiropractic. But I feel like if we spill all those beans right off the bat, it's going to prejudice you against these—

Carrie Poppy: (Playfully.) Or toward!

Ross Blocher: Or toward the practitioners that we're going to be interacting with.

Carrie Poppy: So, don't look it up.

Ross Blocher: Look it up at your will. I mean, let's lay out the basics. So, Carrie's grabbing her book.

Carrie Poppy: I'm pulling out the basics. Well, I wanted to read you this great definition from *Snake Oil Science: The Truth About Complementary and Alternative Medicine* by R Barker Bausell.

Ross Blocher: Great name.

Carrie Poppy: It is. And I love this book. Have you read this one?

Ross Blocher: No, I haven't! Definitely on my want to read list.

Carrie Poppy: Check it out sometime. It's really good. Okay, so here is their one paragraph definition of chiropractic manipulation. "On one level, the proposed biological basis for this therapy is relatively conventional. It does not posit any unmeasured sources of energy. Nor does it depend upon any new body systems. Few physiologists would also take issue with the importance of the nervous system, the chiropractor's locus of operation, in human health and disease. What's unconventional about the therapy's hypothesized mechanism of action is the large number of conditions that chiropractors consider to be due to the abnormal positioning of the spinal column coupled with the argument that short, manual thrusts can correct these abnormalities. It is these corrections, then, that are hypothesized to be capable of curing the diseases involved. From a more transitory perspective, it's certainly not difficult to imagine that such a radical and somewhat violent manipulation of as large and sensitive a body system as one's spine could cause the patient to feel different immediately following the experience. This experience does not appear to cure anyone of anything, however. Since it is reputed to be most rare for chiropractors ever to tell patients that they no longer need treatment for their ailments."

Ross Blocher: Okay. I mean, the only thing there that I might take some exception to is right at the beginning, it was saying how there's no unsubstantiated energy system.

Carrie Poppy: The subluxations thing. I was wondering about that too.

Ross Blocher: Okay. So, chiropractic was originally created by this guy named DD Palmer, Daniel David Palmer, in 1895. And we'll kind of leave it there, but it kind of came out of this belief that he had magnetic hands and could heal people. And then he created this system around it after this sort of chance healing that he did on this guy by hitting him on the back, essentially. That everything is connected to the spine, kind of like what we see with reflexology, where everything maps to the feet. Or iridology, where the eye also has this mapping to the whole body, and you can diagnose somebody from looking in their eye. There's similar ones for the ear, for the hands. So, why not the back, right?

Carrie Poppy: I noticed that this said chiropractic manipulation, so I guess that's kind of saying the manipulation itself, there's an argument for, right? Like, we're going to move the spine back into place. That's theoretically possible.

[00:15:00]

Ross Blocher: But this original idea of this mapping between all the body parts and how you could sort of fix things by manipulating mostly along the spinal column, that involved this innate intelligence.

Carrie Poppy: Okay. Yeah. Tell me more. I haven't heard this.

Ross Blocher: Alright. So, this is the idea of this communication that happens from the brain to the various extremities and organs, this innate intelligence. That it's actually kind of a spiritual thing, that it's like God's way of communicating through the brain to the body and running things in proper order. And that when things are out of alignment, when you have subluxations, those are impeding on that natural flow of innate intelligence.

Carrie Poppy: So, subluxation is a word that you won't hear outside of chiropractice.

(Ross confirms.)

That means energy blockage.

Ross Blocher: Yeah, pretty much. And we'll definitely bring this up with each chiropractor that we see. And their kind of chosen synonym for subluxation now is just, "Oh, it's just misalignments."

Carrie Poppy: Well, yeah. And it does feel like there's—yeah, there's a spiritual version of this. And there's a sort of non-spiritual version.

Ross Blocher: Yes. Therein lies the wiggle room. How seriously do you take subluxations? That's kind of the word to watch out for when you're vetting a chiropractor.

Carrie Poppy: Oh, interesting.

Ross Blocher: How do they feel about subluxations?

Carrie Poppy: I would just want to know whether they want to manipulate my neck. I would be out of there.

Ross Blocher: Okay, so that's another big thing with chiropractic is neck manipulations. So, they'll do sudden—

Carrie Poppy: Yeah. It's fucking scary.

Ross Blocher: Sudden quick movements to your neck. And other parts of your spinal column, but—

Carrie Poppy: Like, whip your neck to one side.

Ross Blocher: Yeah, snap it—or crack it. You know, it's—

Carrie Poppy: Unexpectedly sometimes.

Ross Blocher: It's scary.

Carrie Poppy: It's so scary, you guys. I had it done years ago, and I was like <u>never</u> again. And then I looked it up and realized, oh, it can be dangerous. How could this ever be worth it?

Ross Blocher: Even deadly if you have like a preexisting condition, bleeding in the neck.

Carrie Poppy: A rod in your back.

Ross Blocher: Yeah. And for a long time, whenever we talk about seeing a chiropractor, Carrie would be like, "Mm. I'm good."

(Carrie agrees with a chuckle.)

And so, I'd think, okay. Well, we'll see what happens to my back.

Carrie Poppy: Even at USC medical school! They sent me to a chiropractor at the medical school, and she wanted to manipulate my neck, and I said, "Oh, I don't want you to manipulate my neck."

And she said something like, "Okay, well then we won't warn you," or something like that.

(Ross "oh no"s.)

And I said, "No. I am telling you not to manipulate my neck. I'm giving you instructions not to manipulate my neck."

And she was like, "Ohhhh, okay. Okay." Yeah. But it like took force.

Ross Blocher: Oh my goodness. Alright. So, you've had interaction with, you were saying kind of in your early 20s. And was this more recently, the USC—?

Carrie Poppy: Yeah. USC would have been 2014. That was when I had mystery sickness.

Ross Blocher: While we were making the podcast. So, if you had to estimate, how many chiropractors do you think you've seen?

Carrie Poppy: Three, I think three. One in Stockton where I went to undergrad. She could not fix my headaches. One in Chico. She was convinced she had fixed my spine, but I didn't notice anything. And then the one at USC that I went to the one time.

Ross Blocher: Okay. Well, then we've seen the same number of chiropractors. And please insert your stories as you remember them wherever you can. But let's talk about the visit to the first chiropractor that I went to. And we were recording our episodes about remote viewing when I called up the first place and just found them doing a Google map search, looking for an area roughly halfway between us. And when you do a search, they're all over the place! It's like searching for a Subway. You know, like—and I mean Subway sandwiches. You know, we don't have a subway system.

Carrie Poppy: Yeah, here in LA it's harder.

(They laugh.)

We have.

Ross Blocher: It happened to be on Los Feliz. I know a lot of people in Los Angeles call it Los Fee-liss. I don't know.

Carrie Poppy: Oh, right. Yes, I've heard both.

Ross Blocher: I just go with the happy, Los Felise. I know how to say it, so might as well.

We met up there on a Monday. And it was just one of these little business malls, where you find chiropractors very often. There were two dentists in the same little business complex. There was a psychologist. There were two film companies. There was a place called A&B Development. Oh, and there were two different acupuncture businesses as well.

Carrie Poppy: Did I go to this?

Ross Blocher: Yeah, we met there the first day. You might have come in from the other side. Because you were already waiting there when I got there.

(Carrie "oh"s in confusion.)

Really? Is this throwing you? This place.

Carrie Poppy: Yeah. The first one—ohhh! This place! Oh, look, there's me. I'm definitely there.

Ross Blocher: Photographic evidence of us.

(They laugh.)

Carrie Poppy: I'm for sure there.

Ross Blocher: I wasn't expecting this particular confusion.

Carrie Poppy: (*Laughing.*) Okay. Now I recognize the inside of the lobby. I—yeah. Okay. You're right. You went to three. I had the other two in my head. Okay.

Ross Blocher: Yeah, 'cause you went to each location at least once. And there are certain things that will emerge as odd themes. One of them was that I came in looking for Pinnacle Chiropractic, and the business directory listed Lifeline Chiropractic with the same doctors' names.

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So, one of the first things I asked the person at the front desk when I got there was, "I saw the sign saying Lifeline Chiropractic."

And she said, "Oh, that was just the old name." Okay. Changed their name.

Carrie Poppy: Why did you change it?

Ross Blocher: Just one. Not too weird, but—oh yeah. I got to give them credit for having a 666 in their phone number. Appreciate that. Okay. So, we both showed up. You were there waiting for me. It's, you know, this like tan office; looks like every medical office you've ever been to, little window at the front and like a door leading into like where you can be treated. But you wait in the little antechamber, and you fill out paperwork.

Carrie Poppy: And you see these trifolds that say, "Share with your friends and family." And I say, thank you! I certainly will.

Ross Blocher: Oh, we get so excited when we see trifolds. You grab these ones. I got a bunch from another place we went to.

Carrie Poppy: And when I see "share with your friends and family", I say to myself, "I have hundreds of thousands of friends and family to share this with."

Ross Blocher: We haven't delved into these, but yeah, they have all these little brochures. Should we just break them out?

Carrie Poppy: Yeah!

Ross Blocher: Okay, what do you got there?

Carrie Poppy: I have Myths and the Chiropractic Lifestyle.

Ross Blocher: Okay, I've got Whiplash and the Chiropractic Lifestyle. Oh, you should have this one.

Carrie Poppy: (*Laughs.*) Okay. Oh, headaches. Great. They're kind of thin. Like, there's a lot of imagery.

Ross Blocher: Oh yeah. Very little text. Adjustments and the Chiropractic Lifestyle. Here, I'll let you have Stress and the Chiropractic Lifestyle. You're welcome.

Carrie Poppy: Oh, wow. Here's The Truth About Chiropractic. "Chiropractic doctors are well educated. Based on contemporary research findings, improved technology, and educational standards, more people are choosing chiropractic care every day."

Ross Blocher: So, it's a myth that they're not well educated.

Carrie Poppy: Yeah, I guess that's what they're speaking back to, but they're not actually writing down the myth. So, it's kind of implied.

Ross Blocher: Did we mention the front picture on the trifold is a psychic with a glowing ball that she's got her hands over?

Carrie Poppy: Right, and she's dressed up like a Romani person. Yeah, I'm sure this would not go over well with people from that group. Okay, "the truth is chiropractic is a conservative, drug-free approach to better health that has helped millions of people since 1895."

Ross Blocher: 1895. Which is worth pointing out, because I think when people think of homeopathy, when they think of chiropractice, they think it's much older than it is. Like, it's an ancient practice. No, it was founded by an American guy at the end of the 19th century. Let's see what else was invented in 1895. Invented in 1895. Volleyball was invented in 1895! There we go. Chiropractic is as old as volleyball.

Carrie Poppy: (Laughs.) Okay. There you go.

Ross Blocher: There we go.

Carrie Poppy: Returning to Myths and the Chiropractic Lifestyle. "Chiropractic is scientific. Specific technique protocols are used to locate malfunctioning areas of the spine. As sophisticated diagnostic equipment becomes more available, researchers are affirming what chiropractic doctors have known all along. Chiropractic works!"

Ross Blocher: That's introducing another important piece of the chiropractic history, which is that—I'm trying to avoid just saying regular doctors—you know, the medical establishment on the whole, not a big fan of chiropractic. There's been a long-running fight between the American Medical Association and chiropractic, which has operated as its own separate set of review boards and certifications and schooling, all of that, over the years.

Carrie Poppy: Yeah. I got to say, whenever I've looked into one of these stories where something awful happens at a chiropractor, I am not impressed at what happens to the chiropractor. They seem to keep practicing for the most part. I mean, or you have like Dr. Vibe, who moves to California, and nothing much changes for him.

Ross Blocher: I was going to say, we mentioned at the end of that investigation with quote/unquote "Dr." Steven Schwartz that you had found that he had been censured for using the term doctor without saying DC or chiropractic somewhere. And then—

Carrie Poppy: So, he just left the state.

Ross Blocher: Right. And I don't think we mentioned in the podcast that you'd also found that his license had expired in 2017, as it was. So, doubly—yeah, he'd left the state. So, now he's in California. And I did file a complaint with Colorado again. And they said, "You should tell the board in California." So, now I need to do that. They didn't seem too concerned. Yeah.

Carrie Poppy: Yeah, yeah. Okay, good luck. Well, that's good work. Good for you.

Ross Blocher: Anything else from our myths?

Carrie Poppy: Yes, one more. "Myths versus truth: Because of philosophical differences, misunderstandings, and economic competition, countless myths have circulated about chiropractic. Find out if conservative chiropractic care is appropriate for your specific health care needs or goals." And then it says, with a picture of a baby, "Chiropractic is so safe, even newborns receive adjustments."

Ross Blocher: UGH! I was going to say earlier, when we were talking about the neck adjustments, that there are videos online where you can see adjustments happening. So scary.

Carrie Poppy: On a baby, you mean?

Ross Blocher: On everybody.

[00:25:00]

But yes, babies, on infants, newborns.

Carrie Poppy: Where your bones are goo.

Ross Blocher: Yeah. And they're performing these quick snapping motions.

Carrie Poppy: Oh my god. A horrible idea.

Ross Blocher: It's horrific.

Carrie Poppy: I don't know much about baby anatomy, but my internal sense is that should be illegal. That's my first thought.

Ross Blocher: Feels like a rational response.

Carrie Poppy: Yeah. Anyway, it sure sounds dangerous.

Ross Blocher: And you can find videos of chiropractors doing the <u>weirdest</u> stuff. It's one of those fields where it is kind of loosely regulated, and people will bring in their own other modalities. So, this guy will be like, "Oh, I'm going to do this with my feet, and I'm going to put my feet on your neck and snap it that way." It's just like weird stuff.

Okay. I have Whiplash and the Chiropractic Lifestyle. This is the green brochure. It's got a lady with a neck brace and almost a Mormon pose there. She's looking very concerned about this. Okay. "The chiropractic approach to these types of injuries is to use specific chiropractic adjustments to help normalize spinal function."

Carrie Poppy: Fine. I mean, theoretically fine. Theoretically, if like my spine's out of alignment, putting it back seems like a good idea. It just becomes like is this the person to do that? Do they have the way to do that? Stop telling me about theory.

Ross Blocher: Oh, this is interesting. "If worn too long, a cervical collar can further weaken supportive muscles and actually lengthen recovery time." I would believe that.

Carrie Poppy: I have had that experience.

Ross Blocher: Oh, you have?

Carrie Poppy: Yes. I got like a bad—I don't know, frozen neck kind of thing several years ago and didn't know what to do. And I put on one of those neck elongating things, and it got so much worse. And then I called Kaiser, and they were like, "Oh, take the neck thing off! Don't wear that!"

Ross Blocher: Well, and they knew that too, without being a chiropractor.

(Carrie confirms.)

I'm looking at this Adjustments and the Chiropractic Lifestyle brochure. There's a few standouts here. One is that "every chiropractic adjustment is tailored to each patient." That seems to be a big talking point for them. We're going to make this unique to you.

Carrie Poppy: It's personalized.

Ross Blocher: And I think we'll hear various ways that happens. "Usually the doctor's hands—" which makes sense. Again, we're talking about chiro-practice, "—or a specially

designed instrument is used to deliver a highly accurate thrust. After years of training, each doctor has selected a variety of methods and has become skilled in their delivery."

Carrie Poppy: A highly accurate thrust.

Ross Blocher: Which is also a nod to them kind of bringing in their own custom modalities, things that they've learned along the way. Oh yeah, that was another thing that Steven Schwartz was censured for by the Board of Colorado was him using a technique that wasn't proven. Even the Board of Chiropractic was saying, "Hey, you shouldn't be using this thing."

Carrie Poppy: I think it was you need to tell the patient that it is experimental if you're going to use it.

Ross Blocher: Okay. Totally fair. And here we go. "Chiropractic adjustments are so safe even newborns and children can receive adjustments to repair the damage caused from the birth process, learning to walk, or other childhood trauma."

Carrie Poppy: Wow. From the birth process.

Ross Blocher: That... does not sound reasonable.

Carrie Poppy: (*Chuckles.*) I mean, there are lots of birth injuries. I doubt that would be the way to fix them. Okay, so in the stress one, basically it tells you that stress has been around as long as humans have been around, but stress is so bad right now. And then it says, "Finding the weak links in your spine, the major communication pathway of your nervous system, and helping restore better function can make a profound difference in your response to stress. It may not be possible to remove the stress from a busy life. However, with the help of your chiropractic doctor, you can respond better to the unique challenges you face."

Sure. Vague. Like, all of these just say "let us crack your back", right?

Ross Blocher: Uh-huh. And when answering what an adjustment is, they say "it's the use of a specific force in a precise direction that helps normalize spinal function. When the 24 bones that protect the spinal cord lose their normal position or motion, delicate nerve tissue can become choked or irritated. Each day, millions of delighted patients choose chiropractic over drugs or surgery as a commonsense approach to better health." That seems to be another talking point is, hey, we're not going to drug you up. We're not going to operate on you, which I feel is a common alternative medicine talking point. Like, "They just want to give you drugs! They just want to perform surgeries that are really going to mess you up."

Carrie Poppy: I understand the surgery comparison. I'm not sure I understand the drug comparison. Like to me, it's much gentler to take an ibuprofen than to have someone yank at my back.

Ross Blocher: Yeah, I feel like a lot of people just think drugs and immediately think, "This is altering every aspect of me; this is introducing things nature did not intend."

Carrie Poppy: Yeah, which is so interesting. Because it's like a drug—I mean, if you swallow it, you're sending it into your belly through a really advanced metabolic system. So, you're not just like—if you manipulate a back, you're taking the entire system and just like fucking with it.

[00:30:00]

With a medicine, at <u>least</u> you're going like through the evolutionary pathways of the digestive system.

Ross Blocher: That still just is bonkers to me. Like, the other day I took a Benadryl maybe for the first time? But I was trying to stop my nose from running.

Carrie Poppy: Mm! I bet it worked.

Ross Blocher: It sure did. And it was just crazy. It's this tiny, little pill. And just to think this goes down to my stomach, and it doesn't know where to target. So, it just kind of diffuses through my body. And yet, this tiny little pill is enough to stop my nose from running for like two hours. Crazy!

Carrie Poppy: Yeah. Crazy.

Ross Blocher: And then it made me really drowsy. And I remembered, oh, right. That's supposed to be the thing of a Benadryl.

Carrie Poppy: Yeah, that's true too. Okay. So, that's—oh yeah. Headaches. We have one more. "There are many types of headaches. A frequent and overlooked cause of headache is the malfunction of spinal bones!" Did you know this? I didn't expect that.

Ross Blocher: I didn't know that.

Carrie Poppy: "When bones of the spine lose their normal position or motion, sensitive nerves and blood vessels to the head can be affected. When spinal nerves and related tissues are stretched or irritated, they can produce throbbing headaches. Aspirin and medications may cover up these warning signs, but do not correct the underlying structural cause."

Could be true.

Ross Blocher: Someone else trying to heal your migraines.

Carrie Poppy: Yeah, well that's initially why I went.

Ross Blocher: Okay. Alright, so back in the lobby of Pinnacle Chiropractic, they gave me all the forms that you usually get.

Carrie Poppy: (Sighs.) Sorry. Can I read you the last part of this?

(Ross confirms.)

"Many patients report headache relief. Others find that the correction of their condition takes longer, because their spinal problem has existed undetected for many years."

Ross Blocher: (*Chuckles.*) They don't even say, "Because it was something else causing this."

Carrie Poppy: Right, right. Also, they're clearly staving off the possibility that I go, "No, headaches are still here."

And they're like, "No, no, no, we covered that. That just means you need to come to us even more and pay us more money."

Ross Blocher: Uh-huh. Now that's going to be a theme that comes up with chiropractic, is getting you on the repeat.

Carrie Poppy: On a maintenance schedule.

Ross Blocher: Yeah. It won't with this particular chiropractor, but it sure will with the next.

So, I'm filling out my paperwork here and giving them all my, you know, vitals, basic info. But they want to know what my chief complaints are, which makes sense. That's great. So, here's what happened to me. I go running regularly, most regularly with my buddy, Keith. We usually meet up every week, do like six miles together. And about—

Carrie Poppy: I've met Keith. He's cool.

Ross Blocher: Yeah, good guy. Amongst the running—I'm saying here on the form 6+ months ago. So, now it would be 8+ months ago. Anyways, I started noticing this just tightening in my calf that was happening all the time, and it was annoying. And then over time, like if I would be sitting for a long time, I would feel like a numbness in that right leg.

Carrie Poppy: Yep. Sounds like sciatica.

Ross Blocher: And it would be mostly in the upper part of the leg. So, that was getting annoying. So, those were kind of the main complaints. But then I also had a significant other one, which is that I'd started weightlifting again lately, and I was also catching myself with really bad posture a lot. And I was feeling just good old fashioned lower back pain. And that's the one that was kind of making it hard to get up in the morning. So, I'm like, oh, okay. I need to be a little more careful with what I'm doing here. And that had just been two months before I filled out this form. So, those are my main complaints. I'd also had a sore neck that had been sticking around longer than it should. Like, you wake up with a sore neck, and it just—it wasn't going away.

It has long since gone away. So, that wasn't a major focus for this form. And I don't think the chiropractor focused on it either. So, then they wanted to know just illnesses and medications, recent hospitalizations, all that stuff. So, the intake form. They just want to know what they're working with. They also had a little diagram, front and back of a human body with some bones. And so, I sort of diagrammed where I'm feeling these various pains, mostly in the right leg, lower back. And then, aha! The informed consent to chiropractic treatment. This feels important.

Carrie Poppy: Oh, I don't like that number two. I mean, I'm glad they're informing you.

Ross Blocher: Number one is real simple. "Some patients experience stiffness or soreness after the first few days of treatments." Okay, number two—yeah, what do you see there?

Carrie Poppy: "Some types of manipulation have been associated with injuries to the arteries of the neck, leading or contributing to serious complications including stroke. This occurrence is exceptionally rare and remote. However, you are being informed of the possibility regardless of the extreme remote chance."

Ross Blocher: Okay! There's something to be aware of.

Carrie Poppy: Number three. "I will make every effort to screen for any contraindications to care. However, if you have a condition that would otherwise <u>not</u> come to my attention, it is your responsibility to inform me."

Ross Blocher: Okay, I mean, on one hand, fair. But. (*Chuckles.*)

Carrie Poppy: I mean, you don't know what the contraindications to care are, though. So, it's their responsibility to figure out what those are.

Ross Blocher: So, that's a good point. It's their responsibility to ask questions that would provoke any relevant contraindications. Fair. Number four, "other complications may include fractures, disc injuries, dislocations, muscle strains, cervical myelopathy, costovertebral strains,"—I'm learning new things—"and separations and burns."

[00:35:00]

Carrie Poppy: Uh-huh! Okay! "The probabilities of these complications are rare and generally result from some underlying weakness of the bone or tissues, which I check for during the history, examination, and x-ray when warranted." Why is this in first person? It makes it sound like you're doing these things.

Ross Blocher: Well, I am the undersigned.

Carrie Poppy: Oh, it is supposed to be you?

Ross Blocher: No, you're right. You're right. They're switching the first person here. I did not pick up on that at all. You're absolutely right. They are using I to refer to the doctor and then I to refer to me signing this thing.

Carrie Poppy: But, okay, so "I acknowledge I've had the opportunity to discuss the associated risks as well as the nature and purpose of treatment with my chiropractor." Had you even met them?

Ross Blocher: (*Laughing.*) No, of course not.

Carrie Poppy: Okay, great. Love that.

Ross Blocher: Signing this, yeah.

Carrie Poppy: I often am taking things up to the front and going like, "But I haven't met this person. I haven't, and you're causing me a bunch of stress. Please help me."

Ross Blocher: I often do the cost benefit analysis of, okay, I know I'm signing this. Technically, this has not taken place yet.

Carrie Poppy: Yeah, I get too much stress about it. "I consent to the chiropractic treatments offered or recommended to me by my chiropractor, including spinal manipulation." Again, he has not met this person! "I intend this consent to apply to <u>all</u> my present and <u>future</u> chiropractic care." (*Laughs*.)

Ross Blocher: And I signed it.

Carrie Poppy: Anybody! You should write "to anybody" on there.

(They laugh.)

Give this to whoever.

Ross Blocher: Yeah, so that's what I signed off on. And you know, I consider myself of sound mind and sound body. I'm just hoping—

Carrie Poppy: (*Laughs.*) But thinking about it again, but—

Ross Blocher: I'm relying on statistics, that I'm gonna be okay.

Carrie Poppy: Right. Yeah, that's right. And having been through the Titan submersible, I no longer rely on statistics.

Ross Blocher: Fair enough. Got their business card. So, there's four people who operate in the office. The main names are, I think, a brother and sister, I read in some of the reviews.

Carrie Poppy: Oh, okay. I saw the same last name there. Yeah.

Ross Blocher: And then there's two other like associate chiropractors who are in the same office. And so, I was assigned to the last one listed on the business card, not one of the siblings who run the place. And let's call him—

Carrie Poppy: Kevin. Great.

Ross Blocher: Yeah! Great. Okay. Also on the walls are various diplomas from the Cleveland Chiropractic College.

Carrie Poppy: So, we would come to notice that a lot of these people have gone to Cleveland Chiropractic College.

Ross Blocher: It's the second time you've heard it, but it won't be the last.

Carrie Poppy: Nope.

Ross Blocher: Yeah, all of these kind of printed, framed things were all for the main practitioner here. But they also had smaller licenses up. We see that like he went to a professional development educational seminar. Again—

Carrie Poppy: Oh, Parker Chiropractic Research Foundation. Oh, Parker not Palmer.

Ross Blocher: Yeah, I know I did a double take. I thought Palmer. Yeah.

Carrie Poppy: Palmer's the name of the inventor.

Ross Blocher: We see he's got a letter from the National Board of Chiropractic Examiners. Again, not the guy that actually saw me, just the guy who kind of owns the practice here. Also, past the lobby, there's two great signs here. One says, "Healthy habits include chiropractic."

Carrie Poppy: We have a lady drinking water, another lady eating an apple, someone on a treadmill, two children hugging, a guy brushing his teeth.

Ross Blocher: A woman getting proper sleep, somebody washing their hands, and a lady showing a vertebral column to a man. Yeah. (*Chuckles*.) Okay. And then—

Carrie Poppy: Healthy habits include holding this prop.

Ross Blocher: And then we have another one that says, "Work, play, live". And it has, you know, like the businessman and the snowboarder and the runners and the bicyclists and the happy family. And right at the bottom it says, "Chiropractic adds value at every level."

Carrie Poppy: Mm! So true.

Ross Blocher: Motivational. Oh, by the way, as we were sitting in the little chairs as I was filling out the forms, we had a Himalayan salt lamp between us.

Carrie Poppy: Good, good. That makes me feel safer. What does salt do? What did the salt lamp people—? The salt cave. What was it supposed to do?

Ross Blocher: Yeah. Just about your breathing. It's supposed to provide all this—

Carrie Poppy: Breathing. Okay, good. I did breathe the whole time.

Ross Blocher: Yeah, I didn't stop breathing. It was pleasant. I liked it.

Carrie Poppy: I like that "avoid back surgery?", question mark, is on a trifold. They were like, we can't just say avoid back surgery. That is making way too big a promise. Avoid back surgery, question mark?

Ross Blocher: Yeah. And this poor woman is against a bright red background, and she's just screaming in pain, clutching her lower back.

Carrie Poppy: Yeah. And leaning backwards. Interesting.

Ross Blocher: Very much to the point of what we were talking about earlier, that they're saying this is the noninvasive way to get your back looked at.

Carrie Poppy: Wait, I would think if your lower back hurt, you'd curl forward. Like, to relieve the pressure on the lower back.

Ross Blocher: You'd think so, but that's not the stock image they found.

(Carrie agrees with a laugh.)

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[00:45:00]

Ross Blocher: And while we're on that note, check out this Max Fun show.

Carrie Poppy: (Gasps.) A complex network!

Promo:

Music: Exciting, upbeat music.

Ify Nwadiwe: Since 2017, *Maximum Film* has had the same slogan.

Alonso Duralde: The podcast that's not just a bunch of straight white guys.

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Drea: Well, some of them.

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Ify: I'm Ify, a comedian who was on strike last year in two different unions.

Drea: I'm Drea. I've been a producer and film festival programmer for decades.

Alonso: And I'm Alonso, a film critic who literally wrote the book on queer Hollywood.

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Alonso: We may not be straight White guys, but we love movies, and we know what we're talking about.

Drea: Listen to *Maximum Film* on Maximum Fun or wherever you listen to podcasts.

(Music ends.)

Ross Blocher: So, when they were ready, they brought us in to speak with Kevin, as we're calling him.

Carrie Poppy: Kevin!

Ross Blocher: And we are led into the exam and treatment room, which is just to the right as we walked in. So, it looked like there were more offices towards the back, but we stayed toward the front. And it was just like bedroom size. It was maybe 9 feet wide and 12 feet deep. You know, small room. And Dr. Kevin—

Carrie Poppy: Chiropractor Kevin, that's even better.

Ross Blocher: Chiropractor Kevin directed Carrie to sit in a little observation chair to the right and then had me sit on this examination table. Pretty straightforward.

(Carrie laughs quietly.)

Carrie's laughing because we're looking at this picture of me face down on the examination table.

Carrie Poppy: Yeah. Just such surrender.

(They laugh.)

"Well, here I am."

Ross Blocher: Yeah, pretty much. Yeah. Let's describe this room. We've got all kinds of stuff going on.

Carrie Poppy: Okay. Yeah. The room is not well decorated.

Ross Blocher: Sparse posters, but the required posters for a chiropractic office.

Carrie Poppy: Taupe walls, as boring as possible. Several printouts taped to the wall.

Ross Blocher: And these feel very similar to ones we see elsewhere, like "the autonomic nervous system". And it's just this diagram. You see kind of like a human who's been cut in half looking to the side, and you see his vertebral column. And there's just tons of little labels to every little node. This is this, that is that. And then you've got this front-on view of a spine with all of the organs just splayed out and flying to every side of it, with little nerve lines connecting them. And those are all labeled as well.

Carrie Poppy: It's kind of cool.

Ross Blocher: Yeah, it looks very much like what you would see in a reflexology office.

Carrie Poppy: Oh, you don't feel like you'd see that at a doctor's office, an MD's office?

Ross Blocher: Oh, quite possibly.

Carrie Poppy: Oh, okay. And what was on the wall there? I'm just curious. I remember snapping that photo really quickly. "Quick reference guide. Number one, pretreatment. Two, you gotta set up the table. Three, patient gets on the table. Four, adjusting the angle. Five, pull all the slack out of the harness. Six, select a treatment protocol. Seven, treatment is over." I don't want to see this. (*Laughs.*) I don't want to know you have to be reminded.

Ross Blocher: The practitioner is using this spinal decompression treatment, and they've got like the seven reminders of how to set up the table and tighten the straps.

Carrie Poppy: (*Snorts with laughter.*) And number three is "patient gets on the table". I don't know! It just doesn't inspire confidence that he needs this.

Ross Blocher: Yeah. He didn't hook me up to this particular treatment, but if he had been doing that and just kind of glancing at the wall with each step, I would have been unsettled.

(Carrie giggles.)

But you did get a picture of another printout that definitely caused me concern.

Carrie Poppy: Oh yeah?

Ross Blocher: So, this one, it's a spiral notebook that Carrie just happened to get a photo of. It was just sort of poking out. And—

Carrie Poppy: Oh my god. Yeah. I took this photo so fast. This was like three-second—

Ross Blocher: One of those things where you're like, "This might be interesting later." Well, it turns out it is.

Carrie Poppy: I see the word penis now.

(They laugh.)

Ross Blocher: This has four steps to follow. "One, target to spongy tissue in five different areas. Step two, 300 impacts per area, total 1,500 impacts in one treatment. Step three, twice a week, treat consistently for three weeks. Then stop for three weeks and start next course." And then we get the context. "Step four, should be more impacts at the top end of penis."

Carrie Poppy: What?!

Ross Blocher: "And less impacts at the bottom of penis." What are we doing to the penis?

Carrie Poppy: Also—we are electrocuting it. Look at the top!

Ross Blocher: Yeah, there's little electrical bolts stuck to the portions of the penis. What is happening with this treatment?

Carrie Poppy: And why does it say Crura? Crura 300? Penis—?

[00:50:00]

Ross Blocher: Yeah, that's like the infrastructure of the penis, like—

Carrie Poppy: Oh! That's the penis itself I'm looking at there? Okay.

Ross Blocher: I think so, yeah. Like, the base of it spreading out.

Carrie Poppy: Oh wow, yeah, I think he's electrocuting people's penises. Not positive, but I think so.

Ross Blocher: That's a very curious piece of paper.

Carrie Poppy: You gotta go back! Should we call?

Ross Blocher: Yeah, thankfully, my penis did not make any appearances during this particular session.

Carrie Poppy: But you don't want to call and ask if he wants to do this to you?

Ross Blocher: (*Laughs.*) I'm just crur-rious.

Carrie Poppy: I guess maybe you would need to have a penis-related complaint to make the show honest.

Ross Blocher: I'm trying to think of a penis-related complaint.

Carrie Poppy: Get Cara in there.

Ross Blocher: The crura is the plural—it's an elongated part of an anatomical structure, especially one which occurs in the body as a pair. Okay.

Carrie Poppy: Oh, interesting!

Ross Blocher: Something I definitely didn't see during the visit at all. But when I saw your pictures, I was like, "Hello! What's going on here? What are—what's happening to people's penises in this office?"

Oh yeah, we're looking at this diagram. So, there was this device in the corner that he didn't use either, but it looked like an old-fashioned lawnmower handle, or like maybe if you had like a scooter, but just the top part that holds onto the board. And then at the bottom of it there were like these two roller pads. I thought it was something he would use for like rolling on someone's back, like lay down on the floor, and I'm going to use this as sort of a massage technique.

Carrie Poppy: Press and push.

Ross Blocher: Nope! This diagram shows this woman kind of holding that portion in her groin and then reaching out to grab the handlebars and just getting in all kinds of awkward positions.

Carrie Poppy: Okay, so she's stretching out her lower back by like elongating her upper back. Okay, that's—that could feel good.

Ross Blocher: I would've used that thing incorrectly. Oh, here we go. Three types of care. This is a sign showing you how chiropractic helps you reach your health goals. And we've got a range of—

Carrie Poppy: (*Chuckling.*) I see a problem right away.

Ross Blocher: This is something you would never see just in a regular doctor's office where they're like, "Let's talk about philosophies of how long we're gonna have you come back here."

Carrie Poppy: Mm! I have had therapists do that. Mm-hm.

Ross Blocher: Oh, you know what? That's a good point. But yeah, it goes from high frequency, if you have obvious symptoms, and then very low frequency if we're just focused on prevention and maintenance. But they're saying the three types of care are initial intensive care, then rehabilitative care, and then wellness care. I mean, that all makes sense.

Carrie Poppy: Yeah, well, except for prevention and maintenance and wellness care, that's where all my questions are now. Because it's—

Ross Blocher: Yeah, how necessary are these visits?

Carrie Poppy: Yeah, how well are you getting me if I need to keep coming back? <u>Maybe</u> the answer is very, but like that's not obvious to me that like, oh, I'm going to be doing <u>so</u> well, I'm going to keep wanting to come for the rest of my life? That's a big claim.

Ross Blocher: Right. And maybe not true for certain types of treatment, but you think generally the idea is I'm going here to be treated so that I don't have to come back here at some point.

Carrie Poppy: Yeah! I don't want to see you every day, Kevin.

Ross Blocher: And, you know, maybe that turns into, "We'll see you next year."

Carrie Poppy: Yeah, maybe.

Ross Blocher: And at the bottom it says, "How long you decide to benefit from chiropractic care is always up to you." Good thing to say.

Carrie Poppy: Mmmmm! You can leave any time.

Ross Blocher: That's right. And one other important, very chiropractic sign is the Doctor of Chiropractic Curriculum, and it has this tall series of plinths. And you've got the human body at the top of this box. It says practice, and under practice is your internship, and under your internship is chiropractic and diagnostic sciences, which includes a <u>lot</u> of things. The stuff you're supposed to be learning about. Toxicology, OBGYN, geriatrics, pediatrics, dermatology, psychiatry, neurology, orthopedics, rheumatology. I didn't realize how fun this list would be to read when I started reading it. It goes on.

(Carrie chuckles.)

And then, once you get past the National Board one, then we're looking at basic sciences, which includes pathology and branches out to microbiology, public health, nutrition, biochemistry. And then finally, at the base of the pyramid is anatomy and physiology. Oh, I see. I read from the statue down, but it was working up like Maslow's hierarchy of needs. I see. So, you start with your basic sciences, then you get your diagnostic and chiropractic sciences, your internship, and then you're ready to practice. Okay.

Carrie Poppy: Cool.

Ross Blocher: It makes for a good visual.

Carrie Poppy: Gosh, I wish I could show up at one of these chiropractic schools and like see what it's like, and then go to a medical school and see what that's like. But I can't.

Ross Blocher: Oh, and also a sign called "subluxation degeneration". It's showing us a guy who's semitransparent; you can see a bit of his skeletal structure, and then a series of x-rays showing us the normal cervical bones in your neck, and then going to phase one, phase two, and phase three of problems.

Carrie Poppy: So, the degeneration here is actually good. Because you don't want subluxations, right?

[00:55:00]

Ross Blocher: No, I think they're using degeneration as a negative thing here. Because it says, "When proper spinal function is compromised, a serious degenerative process is set in motion. This is called subluxation degeneration."

Carrie Poppy: Got it, got it.

Ross Blocher: "If neglected, it gets worse with time."

Carrie Poppy: Got it, like a degenerative disease instead of degenerating the subluxation itself. Got it. Okay.

Ross Blocher: So, then we see the cervical bones, the thoracic bones, and the lumbar bones with x-rays showing this is how bad it can get. Okay. So, I'm just sitting on this plain examination table while he looks through my chart. And I explained to him all of my issues, like I did to all of you earlier. And I said that the feeling in my right leg feels like either a pinched nerve or a lack of blood flow. It just feels kind of weird and sort of hollow and desensitized. Yeah, and he—

Carrie Poppy: Is this on the bottom of the leg or on the top?

Ross Blocher: Feels like it's just inside of it.

Carrie Poppy: Interesting.

Ross Blocher: So, I don't know if I could say whether it was in the front or back. So, he also suggested sciatica and kind of explained how that works and said that's more of like a muscular manipulation kind of thing. But he said we'd know more with an MRI or an x-ray. He doesn't offer those himself. They're not available at the clinic. But it seemed like he really wanted to have some x-rays to look at—or MRIs. And you know, he explained how the x-rays will let me see overall bone configuration. MRIs let me see soft tissue. That would be really helpful. Here's how much they cost generally outside of insurance, because you might have to go back to your regular doctor to get them authorized otherwise.

"But I've got some people for you." And he was saying you can get like an x-ray for 40 or 50 bucks a piece. The MRIs are going to cost more. He's saying they used to be 300, now they're 400. So, significant outlay of cash if you're trying to work outside of the system. And in this case, my work insurance—which is Cigna—didn't support any of these visits. None of them were eligible. I mean, kind of good for them.

Carrie Poppy: Maybe. Sounds like we don't know yet.

Ross Blocher: Fair point. So, it was clear that he wanted to have more info to go on. Which is great. And I asked him before, "Well, what did chiropractors do before they had x-rays to go on? Or MRIs?"

Carrie Poppy: Yeah! Fuck around.

Ross Blocher: And find out!

(They chuckle.)

He said—he actually brought up subluxations at that point and said they would use maybe their hands or other means to kind of feel these things out and make adjustments as best they could, based on that feel. And that's where I asked him what he thought of subluxations as, and he defined them as, "Well, I like to think of them as misalignments." But he even said, "For some people, it's more of like a religious/spiritual thing."

Which was interesting—A) that he offered that, but B) also, it gave me a little more confidence in him that he was putting some distance between himself and those ideas, even though he had posters that mentioned subluxations up on the wall.

Carrie Poppy: Mm-hm, mm-hm. Yeah, it sounds a lot like the idea of chi. Just sort of a way of thinking about the body working as a unit, a metaphor that might work for you. But then the metaphor becomes too real for some people, and then all of a sudden you have like a whole religion around it.

Ross Blocher: And this is really what I wanted to get to the bottom of, like how many chiropractors does it take to find one that really treats this as a spiritual phenomenon? So, even though he didn't have this diagnostic stuff, he already knew he was going to be charging me \$100. So, let's give this guy what we can!

So, he has me lay down, and he starts testing my flexibility in different ways. Has me reach over here. Oh, he had me like get up and touch my toes. And he was quite impressed with my flexibility.

Carrie Poppy: Congrats. I can't touch my toes.

Ross Blocher: Yeah, thanks. He was saying like, "Oh, you're more flexible than I am!"

Carrie Poppy: Aw.

Ross Blocher: And he was probably about my same age. I would guess maybe early 40s.

Carrie Poppy: Okay. I don't picture a person at all right now. An empty room.

Ross Blocher: Oh wow. Good looking fellow Armenian man.

Carrie Poppy: Okay.

Ross Blocher: He gave us a bit of his history. He was telling us that, "In my country, I was like an engineer." He worked on electrical stuff.

Carrie Poppy: Oh, that's right! I remember him saying this. Where was he from? Did he say?

Ross Blocher: Armenia.

Carrie Poppy: Armenia. Okay.

Ross Blocher: And he just mentioned that he had friends that were in chiropractic and kind of learned this is a thing you can do. It's going to be pretty much the career path.

Carrie Poppy: It is a thing you can do.

Ross Blocher: And then he had me lay down on my stomach. And he was pushing, pulling various things along my back and asking me if this hurts, does that hurt? If I pull your arm back like that, does that feel tight? And I would just kind of give feedback. "Oh yeah, it would. Definitely feel that. And no, that's fine. That feels actually kind of comfy. Thanks."

Oh yeah. You even asked him, to the earlier point about sciatica, "What would you recommend if it was sciatica?"

And he said, "Oh, probably physical therapy. 'Cause you'd want to be working on the muscles rather than the spine." That always makes me a bit comfortable when a practitioner of any sort kind of refers me to other people for something outside of their ken. It tells me, oh, you have sort of a range of the things that I treat.

Carrie Poppy: Yeah, though he didn't refer you.

Ross Blocher: He didn't, but he was saying if it turned out to be that. He did refer me to an x-ray technician.

[01:00:00]

He wrote out like the little recommendation if I went to one of those places to get the scans, which I did not. He asked me if I wanted to try a TENS unit, which we've looked into before—like with our flex belts, the ab belts.

Carrie Poppy: Mm-hm. (Chuckles.) Oh, those were awful.

Ross Blocher: So, transcutaneous electrical nerve stimulation. So, again on my stomach, he put these leads on my back. And then he had this little device that they were plugged into and—oh no, he set it to 11 minutes. That's not cranking it up to 11, but he had electricity kind of going through each one and just asked me, "Is this uncomfortable? Can I turn it up a little more? Can I turn it up a little more?" And I would get to the point where finally it was doing that kind of—

Carrie Poppy: Yeah, it shocks you.

Ross Blocher: —grabbing at your muscles and making them tense. So, I said, "Okay, that probably is good right there."

He's like, "Okay, we'll do it just a little more."

(Carrie "wow"s.)

Yeah. And then he left me like that for 11 minutes. So, you and I chatted while I just had my back, I don't know, getting zapped with electricity. It felt fine. So, 11 minutes later I start

beeping, and then he comes back in. And this time he starts doing more exercises where he's having me on this table either on my back or on my belly overlapping my legs, and he'll do this kind of—I don't know, get me like in the right pose, like where one leg remains straight and the other one's kind of bent with the foot crooked over the straight leg. And then he'll just sort of lean up his body against me and do this quick bodily thrust and ask me, "How did that feel?"

And sometimes like, oh, okay! Sudden, but fine. And then other ones like, oh, wow, definitely that—I felt that in my lower back.

Carrie Poppy: In a good way? A bad way?

Ross Blocher: Don't keep doing this.

Carrie Poppy: Okay. Okay. But not a relief.

Ross Blocher: Not a relief, but like you're identifying the area of pain. It felt like it was kind of diagnostic.

(Carrie affirms.)

Yeah. I don't know. I guess that gave him info, but he was still saying that, you know, "I'll know a lot more when I see the x rays or MRI." Which is, again, good. I want him to want that information. And then he asked me if I want a bit of a massage. Yeah, sure. So, he pulls out this black device called the BodySport!

Carrie Poppy: Yes! I remember this. He just had a bunch of great massage guns, basically.

Ross Blocher: Yep. And this will be a theme as well. Yeah, there's this whole other bed lying next to me that has these little pressure guns, which we'll talk about later in another visit. Boy, yeah, this bed is hooked up to the nines with all of these little adjusting pads and tables. I never got put on that one in this first visit.

"Yeah, she looks better!"

"See, we both think you look better."

Ross Blocher: We'll definitely talk about it on the third chiropractor, because he used that thing liberally.

Carrie Poppy: Okay. Oh, that's—yes.

Ross Blocher: Yeah. You remember where he put that first.

Carrie Poppy: (*Laughing.*) That's right. Yes, I do. And now the listeners are guessing correctly. Fascinatingly, not the penis.

Ross Blocher: No, but close.

(They laugh.)

So, yeah, he had these massage devices. Now, one of them—the red one over there, that looked like some kind of like construction tool. Like, it's got sort of like a—

Carrie Poppy: Like a jackhammer or something.

Ross Blocher: Yeah, exactly. It's this rubber-coated rod that's clearly just going to be jackhammering your body. And then it's got like this metal plate out behind it that you would normally use for like a saw or something, where you need to keep the thing running straight on a plane. It just looked a little intimidating. He didn't use that one. He used the BodySport, which is this big, black—sort of like a belt sander that, instead of having sandpaper at the bottom, just has this rectangular pad. And so, he put that up against my back and turn that on. And hey, that was pretty comfy. You know, (mimics the whirring sound).

Carrie Poppy: Yeah. Nice massage.

Ross Blocher: Got that for a while. I'm all for it. You know like, hey, alright. Getting some of my money's worth here.

Carrie Poppy: Yeah. I love that stuff. Vibrating chair. Love it.

Ross Blocher: Yeah. Great. Do it.

Carrie Poppy: Those things at the fair that vibrate your feet.

Ross Blocher: Mm-hm. So, then after we're done with that, he has me flip over. And he says, "I'm going to check on your neck. Is that okay?" So, you know—

Carrie Poppy: I scream, "NOOO!" and throw everything.

Ross Blocher: He's got strong hands, and he's ever so slightly picking up my head as he's just kneading and moving it around and getting a sense of the range of motion. And again, he

says, "Oh, your neck is really flexible!" Okay. Learning new things about myself. I guess that's good.

And he says, "I can adjust your neck. Do you want that?"

Carrie Poppy: I scream, "Nooo!" And I push over the table again.

[01:05:00]

I had to pick it up.

Ross Blocher: I realize this is a tense moment, but he's asked. Well, I guess earlier when I was on the TENS machine, that was a TENse moment.

(They chuckle.)

But he's asked, which is nice. And so, I say okay, I'm just going to play the odds here. And that's when you say to him, "So, was that the thing that there was a disclaimer about that we signed?"

And immediately—like, he stops everything he's doing.

(Carrie cackles.)

He lets go of my neck. He puts his hand up like—he puts his hands up like he's under arrest. And he's like, "I'm sorry, what?"

(They giggle.)

And you said, "Oh, I'm sorry. I didn't mean to scare you."

Carrie Poppy: Sounds right.

Ross Blocher: And he's like, "Are you talking about problems with the blood or coronary arteries? Was this an old paper that you read?"

And I'm like, oh, you're protesting too much, buddy!

Carrie Poppy: Yeah! What?! What are you saying? An old paper?

Ross Blocher: And I said, "Oh, just the form that I was filling out before I came in here."

And he said, "Oh, okay. Well, that kind of thing, it's one in a million. And it's only if you like already have an accident. You don't have an accident, do you?"

"N-not that I know of!"

"Yeah. I mean, if there was already bleeding in the neck, you could increase the bleeding. But I mean, I'm going to be honest. I've never seen anything like it my entire life."

Clearly he'd heard of it.

Carrie Poppy: (Laughs.) Yeah, he's talking about in that "old paper"!

Ross Blocher: So, I consented again. I said, "I'll take the adjustment."

Again, he was holding my neck again with his hands, but then suddenly just this really quick motion of my head just being jerked to the left and back.

Carrie Poppy: Hate it. Hate it.

Ross Blocher: And, oh—it was like that stomach dropping out of you feeling of like the rollercoaster right as you're about to drop. It was just—it was so nerve-wracking, and it was loud too.

Carrie Poppy: Oh my goddd. Yeah. Well, you're trusting a stranger with your life.

Ross Blocher: Yeah. And you know, you see the movies where the secret agent goes through, and he comes up behind somebody and like—(neck snapping sound)—sort of motion, and they drop to the ground dead. It was very much like that motion!

Carrie Poppy: Yeah, and he could have done that if he wanted.

Ross Blocher: Ugh! Made me super uncomfortable. But it happened. I survived. I'm okay.

Carrie Poppy: It's also how they kill chickens en mass as well. You just grab them by the head, and you just—(*snapping sound*)—until their body weight disconnects.

Ross Blocher: Even knowing it was coming, it was so fast and forceful, and it was really scary. Absolutely was.

Carrie Poppy: Yeah. Yeah, yeah, yeah. I don't endorse!

Ross Blocher: And he checked with me. "Feels good? No pain?"

"Uh, no pain."

So, again, at this point like we've kind of used up the time. I think he just wants to give me a little bit of value, you know, before being able to like really recommend a treatment. And so,

he offers to put some cream on my back. It's the Icy Hot. And my back was tingling for the next like three hours or whatever. 'Cause, yeah, he rubbed that on. You know.

Carrie Poppy: Stuff's nice.

Ross Blocher: Yeah. It feels nice. But also now you have a little stickiness inside your shirt.

Carrie Poppy: Yeah, then you're like oily. Yeah, yeah.

Ross Blocher: Not wild about that. And he wrote down the prescription for the x-ray. And you were heading out to meet up with Drew for lunch at the village bakery.

Carrie Poppy: Oh, was I? How nice.

Ross Blocher: Yeah. Anyway, so you headed off, and he and I just chatted a tiny bit more. He said that "You know what? To be honest, you're in pretty good condition. Most of the people I see are way worse."

Carrie Poppy: "But your <u>friend</u>, what is her fucking deal?"

Ross Blocher: (*Laughs.*) Well, we did talk about you. Like, he just wanted to know like, "Oh, so she was interested. Has she ever had chiropractic before?" And I said I wasn't sure, 'cause I wasn't at the time, but said that you were definitely curious about it. And you know, thanks for letting her come along. But the impression I got was that "If I don't see you again, I'm not going to be like super stunned. You seem like you're okay."

He didn't mention future visits. He didn't try to get me on the schedule, didn't have me talk to the person out front other than to pay the \$100, which I did with my HSA—the Health Savings Account. So, that was it.

Carrie Poppy: Okay, so you came in for—what was your number one complaint?

Ross Blocher: Number one complaint I would say is the hollowness in my leg, whatever that feeling is.

Carrie Poppy: Okay, the thing that I'm thinking, "Oh, that sounds so much like the one time I had sciatica." So, did that get better?

Ross Blocher: Uh, not after that visit.

Carrie Poppy: Did he do anything to your leg?

Ross Blocher: Not that I recall. I would say like the closest thing would be when he was having me get in those poses where he would then kind of like thrust his body against mine.

Carrie Poppy: Oh, that's true. Yeah, you were kind of in like a pigeon-like pose, right?

Ross Blocher: Yyyeah.

Carrie Poppy: That is—okay, so I'll say this. When I had sciatica, the Kaiser physical therapist did recommend pigeon pose to me.

Ross Blocher: Pigeon pose? Okay.

Carrie Poppy: So, if it were—here, I'll show you pigeon pose. You tell me if this is kind of what he was doing or making you do.

Ross Blocher: Show me pigeon pose. Okay. Okay, so Carrie is leaning forward, and at her hips she has one leg extended all the way back. And then her right leg is tucked underneath her. And I think your foot is angling towards the left there? Okay, yeah, you showed me that before. I should start doing that on the regular. I will say this is something that kind of goes away and comes back. And so, I'll go like a couple weeks without it and be like, "Oh, I guess it's gone!" And then be like, "Oh, you again."

Carrie Poppy: Ugh, it's so painful if it's that.

Ross Blocher: Yeah, it hasn't been particularly painful. It's just like annoying.

[01:10:00]

It feels like something is wrong.

Carrie Poppy: Oh, it doesn't feel—? Oh, okay, I guess I was missing that. Okay, pain doesn't feel right as a description.

Ross Blocher: Not quite. Yeah, and it doesn't—and even the tension in my leg—I feel like that one disappears even longer. It'll come back, you know, maybe every month, and I'll be like, oh! I'm still having a slight issue with that, but it doesn't prevent me from running. It's tense, but it's not painful.

Carrie Poppy: Yeah. Huh. Okay.

Ross Blocher: So, anyways. Yeah, these are my amorphous complaints that I will be bringing to two other chiropractors. So, as we continue with this investigation, we will tell you more backstory of chiropractic—

Carrie Poppy: (Chuckling.) You get it?

Ross Blocher: And some of these other themes that we see across practitioners, as I hope that I will somewhere in the mix get a chiropractor who's a little more on the loopy side of things.

But my impression after seeing Kevin is that mostly I wouldn't feel too bad sending someone to him. They're not going to have something that's like obviously pseudoscientific. Now we talked about the neck adjustment. You could tell him no. You know, if you didn't want to. And he would clearly respect that. Anyways, I thought, okay, this is the end of the spectrum that is more rational, more like physical therapy. I'm looking for someone maybe a little kookier. Let's see what we find.

Carrie Poppy: Oh, I would still say this was a waste of your time. If you were not making a podcast.

Ross Blocher: Yeah, I guess I'm looking just in terms of am I concerned? And I'm less concerned here.

Carrie Poppy: That's fair. Yeah. Other than the neck thing, I think same.

Ross Blocher: Would I people like, "No, no, no, no! Wait! Let's have a conversation before you go to this person"?

Carrie Poppy: Yeah. My big concern would just be like how much does my friend know about medicine, and how much will this just confuse them and send them down eight months of confusion? When really we could be sending you to urgent care one day for something basic.

Ross Blocher: That's totally fair. Yeah. Yeah, maybe we'll have a conversation after you come back if you're on your way out to the appointment. We can talk later.

Carrie Poppy: Okay. There you go. Yeah.

Ross Blocher: I don't have to stop you right now.

Carrie Poppy: Yeah. What do they call it after you have ayahuasca? And then they're like, "But you need to have a conversation, or you're not okay"?

Ross Blocher: Integration.

Carrie Poppy: Integration. There you go. Yeah, yeah.

(Ross laughs.)

You have to integrate the experience.

Ross Blocher: Or an intervention. You know, we don't need to have that just yet. And I think another thing that we'll cover in future episodes is like, "Well, where do you go then, if not a chiropractor?" Which has always been kind of my running question, which is like, okay, but people have back problems. So, if not the chiropractor, who do you see?

Carrie Poppy: Especially when chiropractors are saying we can treat a bunch of things that aren't the back. It gets very confusing if your chiropractor says they can treat your tonsillitis.

Ross Blocher: YES! Right.

Carrie Poppy: Now what do I do? Okay, now I have to have a running list of every single doctor you should go to besides the chiropractor?

Ross Blocher: Indeed. Big topic, but thanks for joining us on this first foray into the world of chiropractic.

Carrie Poppy: Yes. Thank you. Well, I'm glad you survived.

Ross Blocher: Yay! For today, yeah.

Carrie Poppy: We'll see if you survive number two. We'll seeee!

Ross Blocher: We'll see. I could die next time. These are the stakes.

(They chuckle.)

For those who don't understand chronology, yes, obviously I survived all three visits.

Carrie Poppy: He's here, he's here.

Ross Blocher: But our theme music is by Brian Keith Dalton.

Carrie Poppy: This episode was edited by Ross Blocher.

Ross Blocher: Our administrative manager is Ian Kremer!

Carrie Poppy: You can support this and all our investigations by going to MaximumFun.org/join and become a member!

Ross Blocher: Yes, thank you! You are part of our family if you are a supporter of the show. Thank you so much. We really, really appreciate that. You can also support us by telling a friend, getting them hooked on the show, playing your favorite episode, recommending it, or leaving a positive review on whatever platform it is you use to review podcasts.

Carrie Poppy: Or write to your mother. Tell her that you're sorry about the worst thing you did in childhood, but that it'll be okay if she gets hooked on *Oh No, Ross and Carrie!*, and you guys can talk about it every week.

Ross Blocher: And you can CC us on that email to your mom.

Carrie Poppy: Yes. Yes, you may.

Ross Blocher: And we'll back you up.

Carrie Poppy: Yeah. 100%.

Ross Blocher: You know, you should—

Carrie Poppy: No matter what you did. No matter what!

Ross Blocher: (Laughs.) Yes. We'll just say, "Forgive her. It's in the past."

Carrie Poppy: "She's a listener!"

Ross Blocher: "But listen to our show."

Carrie Poppy: (Giggles.) No, we won't.

Ross Blocher: And remember from *Trick or Treatment* by Simon Singh and Edzard Ernst, "It is important to stress that the term innate intelligence is utterly meaningless beyond Palmer's unique view of the human body. On the other hand, the term subluxation is used in orthodox medicine, but has a meaning that has nothing to do with blocking innate intelligence. If a doctor talks about subluxation, it simply means a partial dislocation of any joint, such as a twisted ankle. In short, Palmer's innate intelligence and subluxation carry no scientific significance."

Music: "Oh No, Ross and Carrie! Theme Song" by Brian Keith Dalton. A jaunty, upbeat instrumental.

Promo:

Music: Relaxed, lo-fi synth.

Brea Grant: Oh darling, why won't you accept my love?

Mallory O'Meara: My dear, even though you are a duke, I could never love you. You... you... borrowed a book from me and never returned it!

[01:15:00]

Brea: (Gasp!) Save yourself from this terrible fate by listening to Reading Glasses.

Mallory: We'll help you get those borrowed books back and solve all your other reader problems.

Brea: Reading Glasses, every Thursday on Maximum Fun.

(Music fades out.)

Transition: Cheerful ukulele chord.

Speaker 1: Maximum Fun.

Speaker 2: A worker-owned network.

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Speaker 4: Supported—

Speaker 5: —directly—

Speaker 6: —by you!