

**Consent to, and appropriateness of
treatment of lower back and leg pain
(11HDC00231, 7 June 2013)**

Chiropractor ~ Manipulation ~ Disc prolapse ~ Unorthodox techniques ~ Standard of care ~ Information ~ Informed consent ~ Record-keeping ~ Rights 4(1), 4(2), 6(1), 7(1)

A 48-year-old woman complained about the appropriateness of the chiropractic care provided to her by a registered chiropractor. The woman had an eight-month history of lower back and leg pain and sought treatment from the chiropractor on four occasions within a month.

At the first consultation the chiropractor diagnosed the woman with right hip bursitis, left sacroiliac joint bursitis, cervical bursitis, and possible pseudo-sciatic symptoms. He also manipulated her lower back. At the second consultation he performed a technique called “urtication”, which involved applying a piece of stinging nettle to various parts of the woman’s body including her abdomen. He did not ask permission to undo the top button of her trousers in order to apply the stinging nettle to her abdomen.

At another appointment, after the patient showed some discomfort during a manipulation of her neck, the chiropractor performed a Periosteal Sensitivity test, which involved the application of pressure to her clavicle and shin bones. He also performed a Poison Point test, which involved touching the woman’s breasts through her clothing. The woman stated that she was “beside herself” when she left the consultation. She attended an appointment with a nurse later that day and advised the nurse that the chiropractor had pinched her nipples. The chiropractor did not adequately explain the risks and benefits of the procedure and how it would be performed. During another appointment the chiropractor performed further manipulations of her neck.

An orthopaedic surgeon subsequently diagnosed the woman with a disc prolapse.

It was held that the chiropractor’s initial assessment was inappropriate and inadequate. He did not have sufficient clinical rationale for his diagnoses of the woman’s condition, nor was there evidence that he gave adequate consideration to whether she had a potential disc prolapse despite her clinical presentation indicating that he ought to have done so. Accordingly, the chiropractor breached Right 4(1).

The treatments that the chiropractor provided were not clinically appropriate in light of the woman’s reported symptoms of lower back and leg pain. His clinical rationale for manipulating her cervical spine was flawed, and his decisions to perform urtication, a periosteal sensitivity test, and a poison point test were not clinically indicated. He therefore breached Right 4(1) by failing to provide services with reasonable care and skill.

The chiropractor had a duty to inform the woman about her condition, to explain that the techniques he was proposing to use were unorthodox, and to provide information about the validity and efficacy of those techniques, as well as the location of the proposed treatment. He breached Right 6(1) for failing to provide information that a

reasonable consumer, in the woman's circumstances, would expect to receive. Because she did not receive sufficient information, she was not in a position to provide informed consent to the unorthodox chiropractic techniques. Accordingly, the chiropractor also breached Right 7(1).

By not keeping clear, legible and full records of the services he provided, the chiropractor failed to comply with his professional obligations and, accordingly, breached Right 4(2). The chiropractor will be referred to the Chiropractic Board of New Zealand.