

# Maintenance Care: An Australian Case Study

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**ABSTRACT:** This study provides an Australian perspective of maintenance care. *Method:* A survey of members of the Chiropractic Association of Australia was undertaken. Of the 400 randomly selected chiropractors, 138 responded to the mailed questionnaire. Data from closed questions were correlated, and thematic analysis of open questions was undertaken. *Results:* Maintenance care is perceived as a practice for promoting optimal health. Although some respondents believed this could be achieved by spinal adjustment alone, many also advocated lifestyle education. Maintenance care is believed to benefit all age groups and should be continued for life. Treatment schedules should be tailored to patient needs, but frequency varies from weekly to annually. Most effective for musculoskeletal health, maintenance care is also believed to benefit various visceral disorders. Indications for maintenance care ranged from "being alive" to "condition recurrences." Criteria for evaluating the success of maintenance care varied from "keeping optimal health" (no definition provided) to remaining asymptomatic. Two in three respondents felt that maintenance care should be supported by health funds, and one in three agreed that maintenance care is frequently overused for financial gain. *Conclusion:* Maintenance care is an integral part of chiropractic practice. Its benefits are not perceived to be limited to musculoskeletal health. The frequency and type of clinical intervention used to achieve a wellness outcome varies between chiropractors. The criteria for advocating maintenance care and identifying a successful outcome require clarification if this practice is to be acknowledged in conventional health care circles.

**INDEX TERMS:** (MeSH) CHIROPRACTIC. (OTHER) MAINTENANCE CARE.

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## INTRODUCTION

Maintenance care, although widely practised by chiropractors, is not well accepted or understood within conventional health care.<sup>1</sup> Justification for preventive intervention in conventional circles requires documentation on the mortality and morbidity of the condition being prevented, information on the validity and acceptability of the method used to diagnose the condition and evidence of the efficacy and acceptability of the proposed intervention method.<sup>2,3</sup> The effectiveness of proposed interventions is further graded according to the quality of evidence obtained, with grade I reflecting evidence obtained on at least one properly randomised trial; grade II representing epidemiological evidence and grade III representing the opinions of respected authorities based on clinical experience, descriptive studies, or reports of expert committees.<sup>2,4</sup> Working within this framework, before conventional approval is likely to contemplate acknowledging the value of maintenance care, the chiropractic profession is likely to be called upon to conform to various "scientific" criteria of practice, such as clarification of the natural history of untreated subluxations.<sup>5</sup> Before such substantive issues can be addressed, the essential character of maintenance care needs to be described.

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Recent studies in the United States explored maintenance care as practised in the United States of America.<sup>6,7</sup> This study seeks to undertake a similar investigation in the Australian context. In particular it seeks to identify various practice parameters including indications for, schedules advocated and therapeutic interventions used in maintenance care.

## METHOD

A postal survey of members of the Chiropractors' Association of Australia was undertaken. Four hundred names were randomly selected from the 1999 directory of the Chiropractors' Association of Australia. Care was taken to ensure that chiropractors from each of the states and territories were included. Each of the chiropractors selected using random numbers was mailed a covering letter, an informed consent form, three pages of questions and a reply paid envelope. Potential participants were asked to complete the questionnaire and return it with the signed consent form. Participants were given the option of remaining anonymous. No reminders were sent.

Open and closed questions were used. The open questions fell into three groups. One group requested the respondent comment on the following statements:

- *Maintenance care through spinal adjustment offers a complete system of health promotion.*
- *Regular spinal adjustments should be used in conjunction with other natural measures to promote health.*

Respondents were also asked to complete the following statement: *Maintenance care is defined as...*