Spinal Manipulation — Not an ‘Adjustment’
How Does Manual Physical Therapy and Chiropractic Differ?
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Spinal Manipulation, also known as ‘High-Velocity Low-Amplitude Thrust’ or ‘Spinal Manipulative Therapy’, is an ancient art and science tracing its origins to the earliest of medical practitioners. Practiced principally by physical therapists and chiropractors, it is also utilized to a lesser degree by medical and osteopathic physicians. Spinal manipulation is unique compared with other manual therapy techniques in that the clinician applies a rapid impulse, or thrust, in order to achieve a gapping and subsequent cavitation of the target joint. Joint cavitation is accompanied by an audible release recognized as a ‘popping’, or ‘cracking’, sound. Spinal manipulation is used by physical therapists to facilitate movement, relieve pain, increase circulation, relax muscles, and improve muscle function.

A common misconception is that spinal manipulation by a physical therapist is synonymous with a chiropractic adjustment. So the question follows: what is the difference between the two? Between manual physical therapy and chiropractic? While technique application between the professions can be very similar, the two professions operate under divergent treatment models. A clearer understanding of the context and reasoning used to guide treatment will help differentiate between these two professions.

The key phrases in the Wisconsin Definition of Chiropractic Practice Act are *spinal column adjustment* and *spinal subluxations and associated nerve energy expression*. Most chiropractors, to varying degrees, subscribe to the theory of the ‘spinal subluxation complex’, which asserts that the subluxation of a vertebra actively alters neurological function, which, if left untreated, will lead to disorders and disease of the various organ systems. Chiropractic purports to treat *all* systems of the body, and this is done with the spinal adjustment. The term ‘adjustment’ implies treatment of the ‘spinal subluxation complex’ with the intent to manage or prevent conditions known or unknown in any system of the body. As no other medical discipline adheres to this theory, the ‘adjustment’ is uniquely chiropractic. It is important to realize that spinal manipulation and ‘adjustments’ are not synonymous. Spinal manipulation is but one of several therapies used by chiropractors to achieve an ‘adjustment’.

Physical Therapy takes a completely different treatment approach, as you will find described in the Guide to Physical Therapist Practice where the disablement model and evidence-based practice are the central themes to our scope of practice. **Physical therapists do not perform ‘adjustments’.** We do, however, utilize *spinal and extremity manipulation*, along with other manual therapy techniques and exercise, in the treatment of *neuro-musculo-skeletal pain and dysfunction* in order to restore mobility within these systems. **We do not utilize manipulation to manage, co-manage, or prevent diseases or conditions in the other body systems.** Perhaps this in itself defines why *spinal manipulation* is not an ‘adjustment’. And why, although appearing similar on the surface, manual physical therapy and chiropractic are very different animals. The physical therapist’s approach to treatment, whether utilizing spinal manipulation or another manual therapy, is predicated on identifying specific somatic dysfunction—in the spine, pelvis, or extremities—for the sole purpose of achieving clinical improvement within the neuromusculoskeletal system.