



TESTIMONY OF DR. JOSEPH BAUDILLE  
ON BEHALF OF THE NEW YORK CHIROPRACTIC COUNCIL  
BEFORE THE  
JOINT SENATE TASK FORCE ON OPIOIDS,  
ADDICTION & OVERDOSE PREVENTION  
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BRONX, NY

Honorable Chairs of the Joint Senate Task Force on Opioids, Addiction & Overdose Prevention, thank you for the opportunity to submit this testimony on behalf of the New York Chiropractic Council (the Council). I am Doctor Joseph Baudille, President of the Council and a practicing doctor of chiropractic (DC) who has seen firsthand the devastation of opioid addiction. And the Council's mission is to help end it.

The opioid and heroin epidemic has hit many of our communities, both in New York and nationally. Overdose deaths resulting from opioid abuse have risen sharply in every county of every state across the country, reaching a peak in 2014: 28,647 people, or 78 people per day – more than three overdose deaths per hour. It does not discriminate against age, sex, race, or economic status. The statistics are staggering to comprehend, but behind these charts and numbers are human suffering, families torn apart, and loss of precious life.

One of the prime factors fueling this crisis is the over-prescription of opioids for pain relief. Though there are a number of methods the medical profession can utilize to relieve pain, opioid prescriptions for musculoskeletal conditions are exceeded only by opioid prescriptions for cancer patients. However, we know that not only do opioids not resolve the underlying cause of pain, but their ability to mask pain also comes with harmful, addictive side effects.

Amidst the continuing stories in the news, the reports on local tragedies and the numerous legislative hearings all over the country to White House press conferences, the one thing we keep saying to ourselves in the profession is that chiropractic care can help! But unfortunately, chiropractic has not received the attention it deserves to become part of the solution to this statewide and national crisis.

Chiropractic's origins date to 1895, treating neuro-musculoskeletal conditions without the use of drugs. For well over a century, DCs have studied the relationship between structure (primarily the spine) and function (primarily of the nervous system), and how this interrelationship impacts health and wellbeing. Due to this emphasis on the spine, chiropractors have become associated with spinal and skeletal pain syndromes, and we bring our non-surgical, non-drug rationale to the management of these problems. DCs are the quintessential example of non-pharmacologic providers of health care, with particular expertise in neuro-musculoskeletal conditions. In other words, every day we successfully treat pain without the use of addictive drugs.

The Joint Commission, a respected, independent, not-for-profit organization which accredits and certifies nearly 21,000 health care organizations and programs in the United States, has stated that “[b]oth pharmacologic and

nonpharmacologic strategies have a role in the management of pain. . . . Nonpharmacologic strategies [include]: acupuncture therapy, chiropractic therapy...” In May 2017, the Food and Drug Administration drafted changes to its blueprint on educating health care providers about treating pain, to recommend that medical doctors get information about chiropractic care and acupuncture as therapies that may help patients avoid prescription opioids. This is a start, but chiropractic has so much more to offer and should be proactively offered to those suffering acute and chronic pain, as an option to an addictive drug!

When we began our chiropractic training, we learned the essence of chiropractic – it is a powerful combination of the art, science, and philosophy of all things natural. This opioid crisis, on the other hand, is unnatural, and one of its solutions should therefore ideally involve natural healing, and thus the connection to chiropractic. Recent research in the field of neuroscience reveals that there is a direct relationship between abnormalities in the spine, nervous system and brain. According to chiropractic researcher Dr. Matt McCoy, “[b]asic science research shows that the proper development and function of the brain relies on proper structure and movement of the spine from an early age.” Research further shows not only that the developing brain relies on normal structural integrity and joint movement, but that complex neurochemical communication and pathways involved in helping humans “feel good” are tied into spinal biomechanics and their related neurological pathways.

“‘It makes perfect sense once you understand the neurological connections between the spine, the brain and how we feel good,’ added Dr. McCoy. ‘The seat of human emotion is the Limbic System and we know that this system extends all the way down the spinal cord. By removing obstructions in the spine, things like addiction and a sense of well-being are affected.’” This is exactly what chiropractors are trained to do.

Additional research from the Journal of Manipulative and Physiological Therapeutics revealed that higher per-capita supply of DCs and Medicare spending on chiropractic actually reduced younger, disabled Medicare beneficiaries from seeking an opioid prescription. Further, Dr. James Whedon presented a study of over 12,000 subjects which revealed that when patients saw DCs, they had a significantly lower risk of receiving an opioid prescription, at lower overall costs to these patients for their care. As you can see, research shows the potential that chiropractic has to offer here, and we would be happy to provide the Task Force with full copies of these and others studies which show how chiropractic helps resolve both pain and addiction, without the use of costly, and addictive drugs.

Thank you for this opportunity to submit this testimony on behalf of the New York Chiropractic Council. As state leaders in the field of chiropractic, the New York Chiropractic Council welcomes the opportunity to work with the Task Force and continue the discussion of how all New York chiropractors can help be a part of the solution to the opioid crisis. To that end, it is our hope that the Task Force devote a future hearing or hearings to the topic of non-pharmacological alternatives for pain treatment to introduce adjunctive care into the ongoing dialogue to find real, workable solutions to end the opioid epidemic. Let this presentation be the start of that continuing conversation.

Thank you for your time. We are happy to answer any questions you may have.