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July 13, 2020

Helene Langevin, M.D.
Director, National Center for Complementary and Integrative Health
National Institutes of Health
9000 Rockville Pike
Bethesda, Md. 20892

RE: Request for Information: Soliciting Input for the National Center for Complementary and Integrative Health's New Strategic Plan (NOT-AT-20-013)

Dear Dr. Langevin:

The American Chiropractic Association (ACA) appreciates the opportunity to comment on the Request for Information (RFI) number NOT-AT-20-013, *"Soliciting Input for the National Center for Complementary and Integrative Health's New Strategic Plan,"* released on April 27, 2020.

ACA is the largest professional organization in the United States representing doctors of chiropractic (DCs). ACA members lead the chiropractic profession through collaborative relationships in public health, support for research and evidence-based practice, and the active reporting of functional outcome assessment measures to ensure the health and well-being of the estimated 35 million Americans who seek chiropractic care each year.

ACA appreciates NCCIH's willingness to engage with stakeholders while developing a new strategic plan to advance public health through scientific investigation of integrative and complementary health interventions. We submit the following comments as requested in the RFI:

Research needs and opportunities articulated in the Center's current Strategic Plan that should be modified because of progress over the past 5 years.

The Center's current strategic objectives contain research needs and opportunities that have demonstrated great progress and should be modified to include advancements and emerging research needs. The nonpharmacological management of pain is a primary focus of chiropractic care. Further study of the utilization of multimodal, nonopioid approaches to treat chronic musculoskeletal conditions *outside* the perioperative setting are needed to advance safer pain management. Evidence-based strategies that encourage patients and providers to first exhaust conservative pain treatments remain a critical tool in the fight against the opioid crisis.

Specifically, ACA recommends that NCCIH support increased observational and longitudinal studies of nonsurgical/nonpharmacological treatment of chronic musculoskeletal pain, clinical

presentations, and health outcomes; as well as further study of the primary prevention of chronic pain as compared to secondary and tertiary prevention. As the nonpharmacological management of pain is an ongoing, top scientific priority for NCCIH, chiropractic, manual and osteopathic manipulation must remain a research priority.

In addition, ACA supports the findings of the NCCIH's National Advisory Council for Complementary and Integrative Health (NACCIH) Working Group Report on Clinician-Scientist Workforce Development¹ and urges NCCIH to expand funding opportunities for chiropractic researchers at institutions that offer Doctor of Chiropractic (DCP) programs. Greater NCCIH collaboration and mentorship through additional training grants for chiropractic researchers would increase the research capacity of these institutions.

Gaps and opportunities in basic, mechanistic, translational, and clinical research.

ACA is pleased that NCCIH is working to address research gaps in complementary and integrative health care and urges the Center to increase funding opportunities to further advance scientific understanding of spinal manipulation and extremity joint manipulation and other nondrug, noninvasive services.

Chronic low back and neck pain remain a primary cause of disability in adults worldwide, and have led to an increased reliance on team-based health care.² As such, ACA recommends that the Center study utilization of the biopsychosocial (BPS) model as a multimodal approach to whole-person care in the treatment of chronic low back and neck pain. ACA also supports the NIH-wide effort to balance basic and translational research while encouraging collaboration and cross-disciplinary funding opportunities to address the U.S. musculoskeletal disease burden.³ We encourage the strong consideration and adoption of chiropractic-specific research within the NCCIH Division of Intramural Research (DIR) and Division of Extramural Research (DER.)

Opportunities in implementation science.

ACA encourages strategic investment in knowledge translation and implementation science across disciplines and institutes to advance the utilization of nonpharmacological, nonsurgical approaches for the treatment of back pain and neck pain in the clinical setting.

NCCIH-supported research has shown that access to chiropractic care reduces healthcare costs for older Americans.⁴ We urge NCCIH to continue funding patient-centric research to increase

¹ <https://files.nccih.nih.gov/s3fs-public/Workforce-Development-Working-Group-Report.pdf>

² Gliedt, J. A., Schneider, M. J., Evans, M. W., King, J., & Eubanks, J. E., Jr (2017). The biopsychosocial model and chiropractic: a commentary with recommendations for the chiropractic profession. *Chiropractic & manual therapies*, 25, 16. <https://doi.org/10.1186/s12998-017-0147-x>

³

https://www.boneandjointburden.org/docs/BMUS%20Impact%20of%20MSK%20on%20Americans%20booklet_4th%20Edition%20%282018%29.pdf

⁴ Davis MA, Yakusheva O, Liu H, Tootoo J, Titler MG, Bynum JPW. Access to chiropractic care and the cost of spine conditions among older adults. *Am J Manag Care*. 2019;25(8):e230-e236. Published 2019 Aug 1.

evidence-based data regarding chiropractic treatments for broad use in healthcare settings. NCCIH should support further dissemination of evidence-based information about chiropractic health care and data through the NCCIH Clearinghouse.⁵

Input on high-priority objectives not currently reflected.

ACA encourages NCCIH to dedicate significant resources to identifying and working to end healthcare disparities in complementary and integrative health care. Racial and other disparities in musculoskeletal health care are directly linked to inequalities in healthcare access and quality.⁶ ACA also urges NCCIH to expand on the NIH blueprint and research supplements to promote diversity among Underrepresented Minorities (URM.)

Emerging research needs and opportunities.

Emerging and re-emerging research needs in complementary and integrative health care include the recent expansion of telehealth services during the COVID-19 pandemic. ACA recommends that NCCIH explore how to effectively incorporate telehealth into complementary and integrative health care while utilizing NCCIH- and NIH-supported research to improve patient outcomes and safety during times of global crisis. Additionally, ACA urges the Center to focus on providing opportunities to improve and expand existing practice-based research networks.

ACA appreciates the opportunity to comment and stands ready to assist NCCIH as its strategic plan is developed and finalized. If you have any questions regarding ACA's remarks, please contact John Falardeau at jfalardeau@acatoday.org or at 703-812-0214.

Sincerely,



Robert C. Jones, DC
President

⁵ 42 USC § 287c-21

⁶ Enyinnaya, Ekele I. "Eliminating the burden of musculoskeletal health care disparities: the chiropractic contribution." *Journal of the American Chiropractic Association*, 2011, p. 19+. Accessed 06 June 2020.