HEALTH BASICS

Chiropractor profession

A chiropractor is a healthcare professional who mainly assesses and treats muscle and joint problems.

WHAT IT IS
A healthcare profession focused mainly on muscles, joints, and movement

WHERE IT COMES UP
Back or neck pain, joint problems, and rehabilitation choices

WHY IT MATTERS
Treatment choices, safety screening, and coordination with other healthcare

WHAT IT IS NOT
Not a disease, diagnosis, or medical specialty

WHO TO ASK
A regulated chiropractor or primary care clinician

HOW IT IS CHECKED
Professional registration records; no medical test

Overview

A chiropractor is a healthcare professional who mainly works with problems involving muscles, joints, and movement. People often see chiropractors for low back pain, neck pain, or other musculoskeletal concerns.

Chiropractic care commonly includes hands-on treatment. This may involve moving or applying controlled pressure to joints. Chiropractors may also provide exercise guidance, advice about activity, and help with returning to usual tasks.

Chiropractors are not medical doctors unless they have separately completed medical training. Some use the title "doctor of chiropractic," but the meaning of this qualification and the permitted scope of practice differ between countries and regions.

Professional regulation also differs. In some places, chiropractors must complete an approved program, hold a licence, and appear on a public register. Elsewhere, the title may have different legal protection. Checking the relevant regulator can confirm a chiropractor's qualifications and whether there are restrictions on their practice.

Chiropractic is a profession, not a disease or diagnosis. It is also not one single treatment: chiropractors may use different techniques and may take different approaches to care.

How it works

A chiropractic appointment should begin with an assessment. The chiropractor may ask about your symptoms, daily activities, medical conditions, medicines, previous injuries, and treatment goals. They may examine how you move, check muscle strength and reflexes, or feel the affected area.

One common treatment is spinal manipulation. This involves applying a quick, controlled force to a spinal joint. It may produce a popping sound as gas moves within the joint. The sound does not mean that a bone was "put back into place," and a louder sound does not indicate a better result.

Another approach is mobilisation. This uses slower, gentler joint movements. Treatment may also include soft-tissue techniques, which apply pressure or movement to muscles and nearby tissues.

For low back pain, manual therapy should generally be considered as one part of a broader plan rather than a stand-alone answer. Depending on your needs, that plan may include exercise, staying active, education, and support for returning to work or other activities.

X-rays, MRI scans, and other imaging are not routinely needed for uncomplicated low back pain. Imaging is more useful when the findings could change care, such as when a fracture, cancer, infection, or serious nerve problem is suspected. If imaging is suggested, ask what question the test will answer and how the result would affect treatment.

Why it matters for your health

Research suggests that spinal manipulation can provide small improvements in pain or function for some adults with low back pain. Its overall results are generally similar to those of other recommended non-surgical treatments rather than clearly better.

A person's preferences may therefore matter. Some people value hands-on care, while others prefer an exercise-led or physiotherapy approach. Cost, convenience, previous experiences, and the ability to take an active role in recovery can also affect the choice.

Evidence is less certain for many other uses of chiropractic care. Claims that spinal manipulation can treat conditions unrelated to muscles and joints-such as asthma, infections, digestive disorders, or high blood pressure-are not supported by good evidence. Chiropractic treatment should not replace proven medical care for these conditions.

Safety screening matters because back or neck pain can occasionally have a cause that needs different care. A chiropractor should recognise when examination, medical assessment, or

imaging may be appropriate and refer you when the issue is outside their scope.

Communication between professionals is also important. Tell the chiropractor about diagnoses, surgery, pregnancy, blood-thinning medicine, osteoporosis, cancer, and recent trauma. With your permission, relevant information can be shared with your primary care clinician or specialist.

What can go wrong

Temporary soreness, stiffness, tiredness, or increased discomfort can occur after manipulation or other hands-on treatment. These effects are usually mild, but pain that is severe, worsening, or not settling deserves follow-up.

Forceful treatment may be unsuitable when bones or tissues are fragile. Relevant situations include osteoporosis, a recent fracture, certain inflammatory joint conditions, cancer affecting bone, spinal infection, or some bleeding disorders. The appropriate approach depends on the condition, the body area, and the proposed technique.

Neck manipulation has been associated with cervical artery dissection, which is a tear in an artery supplying the brain. A dissection can cause a stroke. These events are uncommon, and research has not settled how often manipulation directly causes them. Neck pain or headache may also be an early sign of a dissection before someone seeks treatment. Because the outcome can be serious, the possible risk and alternative techniques should be discussed before neck manipulation.

Call emergency services after neck treatment if you develop signs such as:

Back pain accompanied by new loss of bladder or bowel control, numbness around the genitals or buttocks, or major weakness in both legs also needs emergency assessment. These can be signs of cauda equina syndrome, which is severe pressure on the nerves at the bottom of the spine.

Routine follow-up is more appropriate for temporary soreness, questions about the care plan, or symptoms that are not improving as expected. Do not continue a technique simply because discomfort has been described as a necessary part of treatment.

- Sudden weakness or numbness, especially on one side
- Facial drooping, trouble speaking, or confusion
- Sudden loss of balance, severe dizziness, or difficulty walking
- New double vision or loss of vision

- A sudden, severe, or highly unusual headache or neck pain

What you can do

Before booking, check whether the chiropractor is registered or licensed where you live. A public professional register may show qualifications, current registration, and disciplinary restrictions.

At the first visit, give an accurate health history. Bring a list of medicines and mention previous scans, fractures, surgery, cancer, osteoporosis, inflammatory arthritis, or blood-clotting problems.

Useful questions include:

You can decline any technique, including neck manipulation. Consent is an ongoing choice, not a one-time signature. Ask the chiropractor to stop if you feel uncomfortable or want more explanation.

Keep a simple record of pain, movement, sleep, daily activities, and any effects after treatment. This can show whether care is helping with goals that matter to you. If there is no meaningful improvement, ask about changing the plan, seeking another opinion, or using a different service.

- What do you think is contributing to this problem?
- What treatment are you proposing, and what are the alternatives?
- What benefits and harms should I know about?
- How will we measure whether treatment is helping?
- How many visits are being proposed, and when will the plan be reviewed?
- Why is an X-ray or scan needed, and how would it change care?
- Will you communicate with my other healthcare professionals if needed?

Common questions

Is a chiropractor the same as a physiotherapist?

No. They are separate professions with different training and regulation, although their work can overlap. Both may use exercise, education, and hands-on techniques. The exact scope of each profession differs by location.

Does a popping joint mean it was out of place?

Usually not. The sound often comes from pressure changes and gas movement within the joint. It does not prove that a joint was misaligned or that treatment worked.

Can chiropractic care replace medical treatment?

It may be one option for some muscle or joint problems, especially as part of a plan that includes exercise and activity. It should not replace medical assessment or established treatment for infections, cancer, heart or lung disease, neurological conditions, or other non-musculoskeletal illnesses.

Are repeated visits always necessary?

No fixed number applies to everyone. A care plan should state its goals and include review points. Continuing treatment without measurable benefit is a reason to reconsider the plan.

Is chiropractic care suitable during pregnancy or for children?

The evidence, risks, and appropriate techniques differ by age, stage of pregnancy, and health history. Ask what evidence supports the proposed treatment and whether the chiropractor has relevant training. Medical assessment remains important when there are pregnancy complications, injury, fever, neurological changes, or concerns about a child's development or general health.

Sources

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