

Health

Stroke victim spreads the word about dangers of chiropractic neck treatment

Though chiropractors call risk infinitesimal, Britt Harwe says people need to know what can happen

by Doug Maine

Britt Harwe cannot swallow food. Five times each day, the 40-year-old Clovercrest Road resident must feed herself through a stomach tube. She becomes ill if she misses a regular feeding.

The inability to swallow is just one result of a stroke she suffered on April 19, 1993, on the eve of her daughter's second birthday, after a chiropractor snapped her neck, crushing a vertebral artery.

"The stroke caused a neurological condition called Wallenberg's Syndrome," she said, unleashing symptoms including paralysis on one side of her body, blurred vision and paralyzed vocal cords. "At first in the hospital, the doctors told me they didn't know whether I'd walk or talk ... They did let me go to rehab," she said.

She got better, but her employment was terminated and she had no caregiver. With her young daughter, "I was a caregiver," she said.

In 1997, she received an out-of-court settlement of \$900,000 from chiropractor Robert Fritz, who has since relocated his practice from Rocky

Hill to Ansonia.

"I relearned to walk ... I still have a paralyzed vocal cord," Ms. Harwe said. By the end of each day she can feel soreness in the overworked vocal cord that isn't paralyzed.

She's still working with a physical therapist on balance, strength and coordination, but she now has another mission, spreading the word about the strokes that, like hers, can result from a neck adjustment made by a chiropractor.

Ms. Harwe, who grew up in Wethersfield, was one of the founders of the Chiropractic Stroke Victims Awareness Group, an organization that made a splash last year by advertising on the outsides of transit buses in Connecticut cities including Bridgeport and Hartford. The ads depicted a "doctor" in a white lab coat preparing to administer an adjustment to a patient's neck. Next to the image, in large letters were the words, "Injured By A Chiropractor? Call 860-529-8826."

Besides reaching out to persons who have suffered

strokes after chiropractic manipulations, "we also wanted to let people know that this can happen," Ms. Harwe said.

The group also heard from angry chiropractors. There was even a death threat in an e-mail that was traced to Canada, she said.

Meanwhile, the issue received even wider attention in May when *Self* magazine published a story entitled "A deadly twist," putting a national spotlight on



Britt Harwe

other cases in which young women had suffered strokes after having their neck adjusted by a chiropractor. Though it focused on a 43-year-old New York woman and the stroke she suffered in 2003, the story mentioned Ms. Harwe.

Most recently, in October, the group announced

the launch of a new television ad campaign to air on WTIC-TV Channel 61. Meanwhile, the state's chiropractors have undertaken their own public relations campaign, not to debate the safety of neck adjustments, but to bolster the image of their profession, according to a story on the chiro.org web site called "Putting Risk into Perspective."

The risk associated with neck adjustments is "infinitesimal," according to Dr. Matthew Pagano, immediate past president of the Connecticut Chiropractic Association (CCA). "The most recent research - and there's actually going to be more coming out - puts the incidence of risk of a cerebral-vascular accident at one in 3 million adjustments to one in 5 million adjustments," he said.

By contrast, he said other treatments for chronic neck pain and similar conditions carry much greater

risk. Persons who use a non-steroidal anti-inflammatory medication for three months have a 300 in 1 million risk of dying from gastrointestinal bleeding, Dr. Pagano said.

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— Britt Harwe

have," he said.

"We live in a free country and these women have a very sympathetic story to tell. Even though the risk is infinitesimal, to them it's an important crusade to be on, but I think when you look at all the negative

As for the type of neck adjustment that caused Ms. Harwe's stroke, "I do dozens a day. That is one of the most basic forms of treatment that a patient can receive in a chiropractic office ... As a matter of fact, it is one of the most non-invasive treatments you could

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consequences of traditional types of medical intervention," such as surgical errors and cross-contamination, the chiropractic approach is relatively safe.

For another chiropractor, Dr. Gina Carucci, who practices in Wethersfield, "the issue is not the procedure. It's the health of the artery." Dr. Carucci, the former chair of CCA's public relations committee, said boxers in the ring or persons involved in automobile accidents sustain much more violent jolts to the neck than chiropractic patients and they don't generally suffer strokes.

Environmental conditions or congenital malformations may put patients at risk, she said. "If the incident does happen to an individual, is it traumatic? Absolutely," Dr. Carucci said. "It's a terrible thing

if it happens ... (but) it's not an issue of public health urgency."

For Ms. Harwe, the level of risk is not as important as the fact that the risk exists. "We're not in a position to debate with chiropractors how often this happens ... If it happens to you, it's not insignificant," she said.

Ms. Harwe said she is not out to destroy the chiropractic profession. "I just want people to know," she said. "Chiropractors are the only medical profession I know that advertises their practice is safe, safe as in without risk."

How it happened

Back in April 1993, Britt Harwe's shoulder was in agony. "I was 26. I worked in an insurance agency in

Hartford. I was always on the phone," she recalled. She called her medical doctor, but he couldn't see her until the following week.

People at work suggested she see a chiropractor. She called one, Dr. Fritz, and he got her in for an appointment that day. It was a Friday and during the weekend she was still in pain, so she called and went back to see him that Monday. In the examining room, "he had me lay down to do some neck adjustment ... As soon as he did the adjustment, I felt like a rushing noise in my head. It was like the ocean - dizziness, nausea. I was lying down at the time looking up at him ... I needed help sitting up ... I slumped over to the left," Ms. Harwe said.

Ultimately, she said Dr. Fritz called 911. "He told them, 'my patient is having a reaction' ... They bring me to the hospital. When I got to the emergency

room, the only information they had was she was having a reaction. I was a healthy 26-year-old," so nobody at the hospital suspected a stroke.

"The chiropractor that caused my stroke ... he knew there was something serious enough going on that he called 911," she said. He didn't tell the operator that she couldn't move one side of her body. "He left them in the dark ... They say, well, doctors can make mistakes ... That wasn't a mistake. That was intentionally not telling what happened."

"The biggest thing with stroke is immediate medical attention ... If they had any indication that I was having a stroke, I could have received medication," other treatment, Ms. Harwe said.

Although her own stroke resulted from her vertebral artery being crushed, she said it is more common for a neck manipulation to partially tear the artery's inner wall.

"They do the adjustment of the neck and when that happens they can tear an artery," Ms. Harwe said. There are four layers. If just one or two layers are torn, a patient can walk out of the chiropractor's office.

Then, as the body works to heal itself, blood clots

form. "Turning your head later, the clot dislodges and you have a stroke," she said.

"Strokes after chiropractic neck adjustments happen generally to women in the 25-45 age range," who are otherwise healthy, she said.

Joining with other victims

Ms. Harwe's settlement does not preclude her from talking about what happened; for many victims, that's not the case.

"Luckily, I had a good attorney and I had no gag order," she said.

It was also fortunate for her that Dr. Fritz had malpractice coverage, "because up until 1993,

chiropractors were not required to carry malpractice insurance," she said. The law requiring that chiropractors carry malpractice insurance passed that year thanks to the efforts of another chiropractic stroke victim, Linda Solsbury, who Ms. Harwe met a few years ago, through a third stroke victim, Janet Levy.

Ms. Solsbury, who became a quadriplegic as a result of suffering a stroke in 1985, was awarded \$10 million in compensation but never collected a cent because her chiropractor had no malpractice insur-

ance and filed for bankruptcy. Though she was unable to speak, chew or swallow and could only move an index finger, Ms. Solsbury was able to type on a keyboard and became a successful advocate for mandatory malpractice insurance. She died in 2006.

Prior to her passing, Ms. Solsbury and Ms. Harwe formed the Chiropractic Stroke Victims Awareness Group. Another group, Victims of Chiropractic Abuse (VOCA), was formed by Ms. Levy, with the goal of pursuing changes in legislation relating to chiropractic care in the state.

During the 2007 session of the Connecticut General Assembly, the group proposed a few bills, including one that would extend malpractice reporting requirements to chiropractors.

"The way things are in Connecticut for medical doctors, if they've had malpractice claims or settlements, the insurance companies are required to report them to the Department of Public Health," Ms. Harwe said. The bill that ended up becoming law extended the requirement to a

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— Dr. Gina Carucci, chiropractor

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variety of healthcare professionals, including chiropractors.

"We were quite successful. We got a bill passed and signed into law on our first attempt ... It was quite an education."

Next year, she said VOCA plans to return to the legislature seeking to have chiropractors added to the DPH web site of physicians' profiles. Listings include basic information such as education, papers written, criminal background and malpractice settlements. "If it's available for a medical doctor, it should be available for a chiropractic doctor," she said.

But Dr. Pagano said the information that would be included in the profiles can already be gleaned from the reports filed by malpractice insurers.

Another likely bone of contention is a proposed "informed consent" law that would require all chiropractors to inform patients that there is a risk of stroke before they provide treatment. "I think

informed consent also is very important," Ms. Harwe said. "That way, when they decide to go through with a treatment," they'll know the risks.

However, Dr. Pagano does not think legally mandating informed consent is the answer.

"It's not a question of whether there should be some information given," he said. "Considering the level of risk involved, if you're going to mandate written informed consent, why single out the chiropractic profession ... because the inference is that this treatment is high-risk and it's not," he said.

"That mandate should be applied to all health care professions whose modalities of treatment have a higher risk than chiropractic treatment," Dr. Pagano said.

In his own practice in Winsted, he said, "I've been using written informed consent for eight or nine years and have never had a patient decline to be treated as a result."

Ms. Harwe, however, has no intention of letting up in her efforts to spread the word about the risk of suffering a stroke as a result of a chiropractic adjust-

ment to the neck. "It destroys marriages, it takes a toll on young children. That's why it's so important that people know," Ms. Harwe said. Even if the risk is relatively low, "my point is it doesn't matter - it happens."

In times when more people are turning to alternative medicine, patients need to know that, "just because it's natural doesn't mean it's safe," she said.

"To this day I can't swallow, but at least it's a hidden disability; no one can tell looking at me," she said.

"With the feeding tube, the hard part with that is eating is such a big part of society," she said. Compared to her other disabilities, "psychologically, that's been the hardest one to deal with ... I've learned to deal with it where I can be at social functions around food ... especially at holiday times."

In so far as spreading the word about the risk of stroke from chiropractic neck adjustments, Ms. Harwe said, "it needs to be known that I'm not going to back down. People need to know it. It's an important thing." **WL**