



Policy statement by Chiropractic Australia on paediatric care

Adopted: August 2015

Modern chiropractic primarily involves the diagnosis and management of disorders of the neuromusculoskeletal system affecting all ages. While the treatment of adults remains the majority of chiropractic practice, chiropractors commonly attend to the care of infants and children.

Just as in the treatment of adults, when chiropractors are called on to care for children the treatment goals must not be in conflict with the best available clinical evidence. In situations where the available evidence is incomplete or poor it is important that parents are fully advised of the evidence base for the proposed treatment and that conservative goals are set. Commonly, a trial of treatment may be undertaken in such circumstances before making a final decision on the best course of management. This is especially important in cases where the primary symptom may be non-musculoskeletal in nature.

A collaborative approach in the delivery of care is recommended as part of a patient centred approach. Caring for children brings with it additional responsibilities for health professionals and in providing chiropractic paediatric care practitioners must ensure they practice within their limits of competence, training and experience.

Suggested reading

1. Calvo-Munoz I, Gomez-Conesa A, Sanchez-Meca J. Prevalence of low back pain in children and adolescents: a meta-analysis. *BMC pediatrics* 2013;**13**:14 doi: 10.1186/1471-2431-13-14[published Online First: Epub Date] | .
2. Kjaer P, Wedderkopp N, Korsholm L, Leboeuf-Yde C. Prevalence and tracking of back pain from childhood to adolescence. *BMC musculoskeletal disorders* 2011;**12**:98 doi: 10.1186/1471-2474-12-98[published Online First: Epub Date] | .
3. Jeffries LJ, Milanese SF, Grimmer-Somers KA. Epidemiology of adolescent spinal pain: a systematic overview of the research literature. *Spine (Phila Pa 1976)* 2007;**32**(23):2630-7 doi: 10.1097/BRS.0b013e318158d70b[published Online First: Epub Date] | .
4. Chaibi A, Tuchin PJ, Russell MB. Manual therapies for migraine: a systematic review. *The journal of headache and pain* 2011;**12**(2):127-33 doi: 10.1007/s10194-011-0296-6[published Online First: Epub Date] | .
5. Tuchin PJ, Pollard H, Bonello R. A randomized controlled trial of chiropractic spinal manipulative therapy for migraine. *Journal of manipulative and physiological*

therapeutics 2000;**23**(2):91-5 doi: 10.1016/s0161-4754(00)90073-3[published Online First: Epub Date] | .

6. Bronfort G, Haas M, Evans R, Leininger B, Triano J. Effectiveness of manual therapies: the UK evidence report. *Chiropractic & osteopathy* 2010;**18**:3 doi: 10.1186/1746-1340-18-3[published Online First: Epub Date] | .
7. Bronfort G, Haas M, Evans RL, Bouter LM. Efficacy of spinal manipulation and mobilization for low back pain and neck pain: a systematic review and best evidence synthesis. *The spine journal : official journal of the North American Spine Society* 2004;**4**(3):335-56 doi: 10.1016/j.spinee.2003.06.002[published Online First: Epub Date] | .
8. Cassidy JD, Bronfort G, Hartvigsen J. Should we abandon cervical spine manipulation for mechanical neck pain? No. *BMJ (Clinical research ed.)* 2012;**344**:e3680 doi: 10.1136/bmj.e3680[published Online First: Epub Date] | .
9. French SD, Walker BF, Perle SM. Chiropractic care for children: too much, too little or not enough? *Chiropractic & osteopathy* 2010;**18**:17