

MEDICOLEGAL NEWS

ALAN M. IMMERMAN, D.C. -- MARCH 30, 2005

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BREAKTHROUGH LOW IMPACT ARTICLE PUBLISHED IN *SPINE*

For years we have argued that the literature relied upon by the biomechanical engineers is invalid. We have based our arguments on affidavits from the Legal Administrator of the Society of Automotive Engineers (SAE), and from an ASU statistics professor.

Now we have a new source which is far stronger than any previous: Freeman, M.D., Croft, A.C., Rossignol, A.M., Weaver, D.S. and Reiser, M.: "A Review and Methodologic Critique of the Literature Refuting Whiplash Syndrome," *Spine*, v. 24, n. 1, pp. 86-98, 1999.

This article explains in detail the flaws commonly found in the literature relied upon by the engineers. The most frequently found flaws were "inadequate study size, nonrepresentative study sample, nonrepresentative crash conditions (for crash tests), and inappropriate study design." The authors concluded that there is "no epidemiologic or scientific basis in the literature for the following statements:

- Whiplash injuries do not lead to chronic pain,
- Rear impact collisions that do not result in vehicle damage are unlikely to cause injury, and
- Whiplash trauma is biomechanically comparable with common movements of daily living."

Therefore, when a defense medical expert states that "whiplash is a self-limiting condition," we can prove with medical literature this is false and that whiplash oftentimes leads to chronic pain.

When a defense engineer states that low impact collisions are unlikely to cause injury, we can prove with medical literature that there is no scientific basis for making this claim.

When a defense engineer claims that whiplash is similar to common movements of daily living, we can prove with medical literature that this is simply not true.

Bottom line: We must defeat the falsehoods propounded by certain defense experts and engineers. Otherwise, our patients and clients will continue to be denied the compensation which they deserve.

NEW MEDICOLEGAL CONTACT INFORMATION

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