

VIENNA CHIROPRACTIC NEWS *Oct-Dec 2013*

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HOURS

M,W,F: 10:00 am to 1:00 pm & 3:00 pm to 7:00 pm

TUES: 10:00 am to 1:00 pm

SAT: 9:00 am to noon (We are open selected Saturdays: Please consult the Calendar.)

CALENDAR

Oct 26: Saturday morning open

28: Chiropractic Independence Day

Nov 2, 16, 30: Saturday mornings open

18: Chiropractic Independence Day

Dec 14: Saturday morning open

25-1-2-14: Winter holidays, closed except

30: "Holiday Repair Day" Hours TBA

Jan 3: Office Reopens... Happy New Year!

4,18: Saturday mornings open

27: Chiropractic Independence Day

Feb 1, 15: Saturday mornings open

24: Chiropractic Independence Day

<p>Would you like to share this newsletter? You can simply forward it, or send us their e-mail address, and we'll send them a copy, compliments of yourself!</p>

DISC... A VOCABULARY AND ANATOMY LESSON

What is an Intervertebral Disc?

An intervertebral disc is a natural shock absorber that nature has developed between the bones of your spine. It is a sort of specialized ligament in the form of a bag made of hundreds of interwoven fibers containing a jelly-like center.

You will hear disc problems described as "bulging", "degenerated", "protruding" or "herniated". All of these tell you that some problem with a disc is causing a nearby part of your nervous system to be vulnerable to dysfunction due to pressure being exerted upon it by some part of the compromised disc.

Picture someone holding a gelatin-filled plastic bag. If you squeeze it in one direction, the gelatin will roll to the side opposite the "squeeze" It may or may not put pressure on or deform whatever is

directly next to the bag on that side. If the bag has tiny holes in it, you may not immediately notice leakage but if you press down on the gelatin, after a while the bag will flatten out. Maybe, as it degenerates, its flatter shape will bulge all around, maybe the bag will just get flatter.

As previously mentioned, a disc can degenerate, bulge, protrude or herniate.

Degeneration: Remember the bag with the tiny holes? Over time or due to trauma, some of the fibers forming the wall of the disc may fray or tear, in which case you will suffer some loss of disc height. Remember that shelf in the kitchen that seems to be getting harder to reach? While you could have a compression fracture causing your spine to be shorter, fractures are not usually so silent. The thing most likely keeping you from reaching that shelf is a loss of height from one or more discs that are not as tall as they once were.

Bulging: Remember when you (mentally) squeezed that plastic bag with the gelatin in it? The gelatin moved to the other side. Think of your hands as the vertebrae above and below the disc. If one of those vertebrae locks at an angle or rotates (this is called a vertebral subluxation complex or VSC), there is pressure on the disc (bag) and the center of the disc (gelatin) rolls to the other side. If it contacts the nerve on that side you may experience pain, tingling or numbness in areas that get their functional information from that nerve. It is also possible, but not as probable, that the disc bulges into the spinal canal, possibly deforming the meninges. In many cases, the disc is not pressing on any sensitive structures and you would never know it was bulging. An adjustment, delivered to correct a VSC can often take care of this problem at the same time, preventing it from developing into a more severe problem.

Protrusion: We are seeing this verbiage on imaging reports much more frequently and we are puzzled by its use. If the problem is a bulging disc, that disc will protrude, but so will a herniated disc. It doesn't make a great deal of sense to use such an ambiguous term when more specific language exists and is in common usage. If you can see that a disc is protruding, you can also determine whether that is because it is bulging or herniating and making that distinction gives you the specific information a provider needs to determine how best to solve the problem.

Herniated: In this case, enough of the fibers have broken for a significant amount of the gelatinous inner disc material to escape. If this material lodges against a nerve, it will cause the nerve to misfire, causing problems ranging from moderate to severe. It is also more likely for a herniated disc to cause meningeal pressure than if it were simply bulging. Meningeal pressure from a herniation may be severe, but with diligent care involving adjustments, rehabilitative exercise, improved nutrition and possibly the help of a good neurologist or orthopedist, it may be possible to avoid that 1000 pound gorilla in the room, spinal surgery. A herniated disc may cause intense functional problems from pain and odd sensations to sexual problems or incontinence. Sometimes, the "escaped" portion of the inner disc will simply dry up and stop causing problems other than decreased shock absorbency and stability (it's a

ligament, remember?) but that may take a long time or not happen at all. It is crucial that you have a herniated disc monitored by an appropriate health care professional. If you are experiencing a change for the worse, seem to be losing bladder or bowel control, are experiencing increasing numbness or loss of sensation, go to the ER and have someone call your doctor.

Not every disc problem is horrendous. Depending on your particular situation, a series of very specific adjustments may be able to contain the problem and even get you past it. Also, if the herniation isn't affecting a nerve or your meninges, you will have few or no symptoms and be completely unaware of the difference unless you are MRI'd for something else entirely. *Note: You cannot see a disc bulge or herniation on X-ray. An MRI is required. X-ray may show you an odd positioning of a bone that can lead you to suspect a disc problem or you may see the shadow of a calcified disc, but that's as diagnostic as x-ray will get you.

The earlier you catch and contain a disc problem, the more successful an outcome can be hoped for. If we feel you need advanced imaging or co-management with another professional, we are, as always, happy to work as part of a team to get you well.

EMAIL

Please consider giving us your most often read email address if we don't already have it. There are perks involved! You will not only frequently get extra information in your newsletter, you will get other information in a more timely way, such as appointment reminders and emergency scheduling changes. We promise not to glut your mailbox.

CHANGES

Have you moved since we last saw you? Changed your phone or email address? Please get us up to date so we can reach you as needed.

EDITOR- IN- CHIEF

Beginning this winter, Dr. Todres will be editor-in-chief of the newsletter published by the International Chiropractors Association's Applied Chiropractic Science program.

NOTICE

Lost a superbill or two? Please don't wait until New Year's Eve to discover this! If you are planning to send yours to your insurance company for reimbursement look through what you have within the next few weeks. If you have some missing, let us know no later than December 14, 2013 (sooner is better). After that, we will be too mired in end/beginning of the year paperwork to deal with a request

for reconstruction of the missing forms until late February. We don't know what your company's time frame is for submissions. We will do up to 5 free of cost, but we have to have them by the 14th. Thanks for helping.

NEED A SPEAKER?

Our own Dr. Masarsky has joined the Speakers' Bureau at the Northern Virginia Community College (NOVA, where he has been an instructor in human anatomy and physiology for more than 10 years. He can speak on a variety of topics related to health and chiropractic, depending on the needs of your group. You can take advantage of this free community service by getting in touch with Dr. Masarsky directly or by calling the NOVA Speakers' Bureau: 703-323-3196.

Want a sample? A recent television interview with Dr. Masarsky is available at this link:<http://www.youtube.com/watch?v=l0Wq2Y0N3B4&feature=youtu.be>

ELEVATOR TALK

For some reason, someone wants to know what chiropractic is all about when you only have a few seconds to tell them. Explanations under these circumstances are sometimes called "elevator talks". They are explanations you can give someone in the time it takes for their elevator to reach their floor.

Some of you already have a wonderful elevator talk to explain to someone why you get chiropractic adjustments, and why they should too. Unfortunately, some of our best patients have told people things like, "My chiropractor cracks my back and pops my neck, and I feel great!" Explanations along these lines sometimes scare people away from chiropractic!

Here's a suggestion for an elevator talk. If it feels right to you, use it. If not, develop your own:

"Let's say someone gives you an urgent message, but it's scrambled. Would it be important to unscramble the message?"

"What if a misaligned or restricted vertebra were scrambling the messages in your nervous system? Would it be important to adjust that vertebra to unscramble them?"

"Chiropractic adjustments help your body unscramble the messages in your nervous system. The benefits include relief from pain or spasm, and many other things besides. You get these benefits without the risk of drugs or surgery. Would you like my chiropractor's name?"

Here's a version with a quick illustration:

"Let's say someone has an urgent message from someone you care about, and it says, 'IFMQ'. The letters in that message are misaligned. You can't respond to the message until you adjust the letters one space to the left in the alphabet. Now the message says, 'HELP'. You can definitely respond to that."

(From here, proceed as in the first talk.)

CONTINUING EDUCATION

This July, we attended a continuing seminar on concussion and mild traumatic brain injury (MTBI). It was presented by Inova Neuroscience Institute. We have always attended seminars throughout the year, but we felt this one was particularly important in the light of so many of our Wounded Warriors living in this area, as well as the numbers of our younger patients playing contact sports (whether or not they were intended to be). We will not mention at this time some of the fancier driving maneuvers we've seen on the road (and off) that also make the above seminar particularly appropriate for study.

ELITE JUDO ATHLETES 10% STRONGER UNDER CHIROPRACTIC CARE

Male and female athletes from a Brazilian national judo team were assigned by coin toss to one of two groups.¹ One group received chiropractic adjustments for correction of VSC in the cervical spine (neck). The other group received a sham intervention. All of the athletes had their grip strength measured before and after the real or sham intervention. The sham group experienced no increase in grip strength. The athletes receiving chiropractic adjustments improved grip strength by more than 10% in both hands. No treatment was applied to the hands or wrists of these athletes, only to the cervical spine. The nerves from this region control the intricate muscular machinery of the hands and wrists.

Grip strength is, of course, very important in the sport of judo, as well as many other sports. For non-athletes, grip strength is important for many activities of daily living.

Grip strength is also an indicator of overall vitality. A number of studies have correlated grip strength to longevity.²

1. Botelho MB, Andrade BB. Effect of Cervical Spine Manipulative Therapy on Judo Athletes' Grip Strength. *Journal of Manipulative and Physiological Therapeutics*, 2012; 35: 38-44.
2. Rantanen T, et al. Midlife Muscle Strength and Human Longevity Up To Age 100 Years: A 44-Year Prospective Study Among A Descendent Cohort. *Age*, 2012; 34: 563-570.

HAVE YOU SEEN ACTION IN AFGHANISTAN and/or IRAQ?

We'd like to offer you a "Thank You" gift, a year's worth of chiropractic care at no cost to you. You can use these visits to help correct or manage a pain problem or to keep you feeling well in general. All we need to see is a copy of your orders within the last five years and your ID. You've been through a lot, body and spirit, and we'd like to say "WELCOME HOME!"

CHIROPRACTIC INDEPENDENCE DAYS

One day per month, we offer "Chiropractic Independence Days". On these days, care is available **independent** of income or insurance. There are no set fees, just a box at the front desk. Into that box, you put what you feel your care is worth, within the limits of what you can afford. (One exception: If you are in the Medicare program, federal law

requires we charge the usual fee. Sorry!) Independence Day appointments get filled early, so call in advance if you want to come in then.

MULTIPACKS

Chronic problems? Stressful or physically challenging work? Just want to catch small things before they become big problems? Ask us about our multipacks of adjustments for individuals and families. Patients find they are a good value and helpful in maintaining wellness.

VIENNA CHIROPRACTIC ASSOCIATES PC

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Address correction requested