

Things You Need To Know
Before Choosing a Chiropractor

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Introduction

Thank you for requesting this free report. I sincerely hope that this information assists you in making the best decision possible in choosing a Doctor of Chiropractic, or DC, to best suit your needs. If you're like a lot of people, at some point or other you've had spine or spine related problems, like neck or back pain for example, and have given thought to seeing a chiropractor but have yet to do so because of a few questions you may have concerning chiropractic treatment. Hopefully, after reading this report, you will feel more comfortable in making an informed decision in choosing a chiropractor.

In this report, which is rapidly becoming a small book, I have chosen to share with you my own answers to some of the questions, concerns, and issues that many patients and their friends and families have expressed to me over the years. Please understand that the information contained in this report is strictly my own personal opinion that has been formulated as a result of hundreds of hours of formal and continuing education, as well as 17 years of professional practice and having treated thousands of patients, and aside from references to chiropractic curriculum, has not been quoted from any specific publications, books or manuals.

Tom Menendez, DC

1. What Does a Chiropractor Really Do?

The primary goal of chiropractic treatment is to restore a person's biomechanical function to the best degree possible without drugs or surgery for the purpose of improved health, and of course, relief from pain. The primary means by which this is accomplished is through the use of a wide range of manual adjusting techniques to improve the mobility, alignment and stability of the skeletal structures of the body. While there is variation with regards to personal preference, most chiropractors do this with the aid of various muscle-relaxing and inflammation-reducing therapies such as ice, heat, electrical muscle stimulation, ultrasound, low-level laser, etc. Some chiropractors also implement myofascial massage, stretching, spinal traction and exercises as well as nutritional counseling into their treatment regimen.

Generally speaking, a person whose body is out of whack is eventually going to experience some form of structural malfunction which in many cases can be extremely painful and a drain on the well-being of the individual. Since the spine is considered to be the underlying framework for the rest of the body both structurally and neurologically, it has always made sense for chiropractors to focus their attention here. Even though, however, any good chiropractor should also be quite capable of addressing many problems occurring in any of the related structures of the body such as the shoulders, knees, hips, etc.

A little over 100 years ago, in the early days of chiropractic, and without having the benefit of modern neuroscience to validate the theories of why chiropractic adjustments were so successful in improving people's health, the chiropractic profession hitched its wagon to various metaphysical theories to explain how and why chiropractic adjustments worked in many cases. My own personal spiritual convictions aside, in particular, the supposition that there was an "innate intelligence" in the human body that could be interfered with by spinal misalignments, thereby resulting in dis-ease, and the "flow" of which through the nervous system could be restored by spinal adjustments thus reproducing an optimal state of health, was stubbornly adhered to by many in the chiropractic profession despite decades of scientific advancement which have since shown otherwise.

To this date, some chiropractors still promote the idea to their patients that the cause of back pain, as well as virtually any manifestation of poor health for that matter, can be due to a lack of "life force" which can be restored by spinal adjustments. Unfortunately, this notion is still occasionally presented to the general public by some DC's to the detriment of the entire profession's credibility. And many chiropractors, myself included, still occasionally find themselves in the uncomfortable position of having to live down these claims while at the same time putting forth their best effort to properly educate their patients, as well as practitioners of other respected healthcare disciplines, as they work to hold on to and expand their rightful place in the modern healthcare field.

There has long since been no doubt of the tremendous benefit of chiropractic treatment

for the health and well-being of the general population, but as a profession we are well past the time of attributing the positive results of chiropractic to any extra-physiological or supernatural forces...especially if we're going to charge you or bill your insurance for it.

In truth, here's how it works: All of the joints in your body, and in particular those of the spine, are loaded with thousands of nerve endings in the ligaments, tendons, muscles and skin whose function is to transmit information to and from the brain regarding proprioception (pro-pre-oh-sep-shun: body position sense), temperature, flexibility, pain sensation, manual and even barometric pressure, to name a few.

One of the highest priorities your central nervous system is tasked with is to tell you where your body parts happen to be at any given moment in space and time, and how they should react to the environment. This is how you can stand with your eyes closed without falling over (hopefully), and how you can tell which fingers you are holding out behind your back without having to see them. It is also what causes you to shiver to generate heat when you get too cold, or sweat to cool your body off when it gets too hot, etc.

Without this type of feedback between the brain and the body it controls, either through repetition and learning or through automatic mechanisms, survival would be impossible. As stress in its many forms is applied to the body, which is a fact of life, your feedback systems constantly implement countermeasures to keep the body in balance. In cases of prolonged stress, again a fact of life, you may well adapt to these conditions for a long time and not necessarily know you may be developing a problem as many of your structural feedback loops gradually become overloaded. Just as someone with clogged arteries and high blood pressure might not know that they have a serious problem until it's too late, after years of day-to-day use and abuse you too may feel the urge to proudly exclaim "but I feel just fine" when it comes to your neck or back right up to the moment it suddenly locks up on you without any particular provocation.

So, when a chiropractor adjusts the spine, either with just his hands or with the help of specialized adjusting instruments or tables, he is merely stimulating the joints by carefully taking them *just past* their present active range of motion. Sometimes you get a "pop", and sometimes you don't. This type of stimulation to the pressure and motion-sensing nerves in and around the joints basically serves to "reset" their normal reflex firing patterns.

When done correctly, a well-placed chiropractic adjustment usually produces the immediate effect of muscle relaxation, increased mobility, and reduced swelling as well as pain relief through the triggering of the body's release of endorphins (pain-relieving hormones) and improved joint respiration. Of course any good chiropractor, he or she being a doctor after all, will always take into account the overall health of the individual, as well as the specific joints involved, in order to determine the exact amount of pressure necessary to make an adjustment without exceeding the comfort tolerance of the patient or the structural tolerances of the tissues.

If you're like most people, aside from merely the admonition to "sit up" or "stand up straight", you have probably not been informed from an early age of the importance of proper structural maintenance quite as well as you have been for the proper care of your teeth, for example. And because, as a rule, your spine is not the first thing you see in the bathroom mirror every morning, you may have the quite understandable attitude of "if it ain't broke, don't fix it" when it comes to the proper care of your backbone. It is for this reason that the bulk of chiropractic patients do require some form of acute management when they start care, followed by a period of structural repair, stabilization, correction and rehabilitation after which it is generally advised that the individual practice good spinal hygiene and return for periodic checkups.

2. Do Spinal Adjustments Hurt? (and How Safe Are They)

Without a doubt, in my experience, the greatest barrier in the mind of those suffering from pain and who would benefit tremendously from chiropractic care but who have yet to take that first step into a chiropractor's office is the fear that by "popping the neck" or "cracking the back", getting an adjustment is going to hurt like crazy or maybe even kill or paralyze them.

Before I go directly into the matter, I would like to lay some ground-work by first clearing the air on one point in particular: There is no viable form of treatment whatsoever for any disease or condition known to mankind that is completely without risk. Anyone who tells you that a given treatment is completely risk or side-effect free is offering you a placebo...magnets anyone? copper bracelet? And yes, any physician, MD, DC, or otherwise will tell you that placebo *does* in fact have a limited but sometimes very effective place in the practice of the healing arts. But I know of no therapy in existence that can cause any *direct* physiologic change in the body that does not carry even the slightest potential for harm if performed or administered incorrectly or inappropriately.

In regards to chiropractic, let me first address the issue of any pain or discomfort that may be associated with spinal adjustments. As I mentioned previously, many chiropractors, including myself, use various therapies to reduce any existing pain, muscle spasm, or swelling that may be present prior to rendering an adjustment. I have found therefore, that pre-adjustment therapy does often reduce the amount of effort needed to gently move a vertebrae, or other misaligned or stuck body part, back into place and with less anxiety on the part of the patient.

But no matter with or without the use of any pre or post-adjustment therapy, at no time and for no reason whatsoever should any chiropractor ever attempt to use excessive force in performing a spinal adjustment.

Also, while the goal of every chiropractic treatment session should be to improve function and reduce symptoms to some degree, not all treatment sessions achieve this result. Oftentimes, when dealing with injured, inflamed and painful tissues in and around the joints of the spine, symptoms may initially be unresponsive or even increase for a brief period during the early stages of spinal correction, after which they diminish as the body heals and re-adapts.

Even under the best circumstances and with utmost diligence and precaution to minimize unwanted side effects however, no chiropractor, nor any physician for that matter, can be expected to be able to completely eliminate the possibility of adverse reactions to treatment on each and every visit.

In regards to the safety of chiropractic adjustments, and in particular to those involving the neck (cervical) area, I have this to say: In nearly two decades of practice and having performed tens of thousands of neck and back adjustments on several thousand individual patients, it has never, not once, ever been brought to my attention by any patient, family member of any patient, medical physician, or plaintiff's attorney, nor have I observed that any adjustment that I have ever performed has ever resulted in paralysis, death, stroke, or permanent neurological or musculoskeletal injury of any kind...ever. And I would be willing to bet you my house, car, and stamp collection that somewhere around 999 out of 1000 chiropractors worldwide would be able to say the same thing.

As further evidence of the outstanding safety record of chiropractic I also offer this for consideration: It is widely known that some of the foremost experts in risk-assessment (actuaries) happen to work for insurance companies. These highly qualified statistical analysts build their careers on scrutinizing all relevant data to help insurance underwriters set premiums for policyholders. In return, the company shareholders pay these expert number-crunchers very healthy salaries for telling them how to offset risk and make a profit. I happen to purchase a yearly malpractice policy from one such company. With full knowledge that I perform manual spinal adjustments and/or therapies on a daily basis to patients suffering from severe pain as a result of spinal misalignments, pinched nerves, bulging and/or herniated discs, torn ligaments, pulled muscles, work injuries, whiplash injuries, etc., and often in the presence of complicating conditions such as diabetes, heart disease, liver disease, kidney disease, gastrointestinal disease, osteoarthritis, rheumatoid arthritis, osteoporosis, scoliosis, pregnancy, failed back surgeries, etc., they have determined that the fee that I must pay them for their legal and financial protection, should anything go wrong on my end, is \$769.00 per year.

That amount also happens to be about average for most chiropractors practicing in North America. In comparison to other types of health-care providers treating patients with the same conditions on a regular basis, this premium is a direct reflection of the extremely low risk of chiropractic treatment. The truth is that if chiropractors were "paralyzing" people as often as some of our detractors said we were, there is no question that this

portion of our cost of doing business would be significantly higher, to say the least.

Lastly in this regard, as a doctor of chiropractic, as opposed to being merely a technician or therapist, my colleagues and I have been trained not just to be *familiar* with, but to completely understand the location, function and possible limitation of each and every bone, joint, ligament, muscle, nerve, tendon, artery, vein, gland and organ in the entire human body. With this in mind, why would anyone make the assumption that a chiropractor does not consider it in his patient's best interest, as well as his own for that matter, that he show the utmost respect and care for these structures at all times and to above all do no harm?

In my offices, and I can assure you in the vast majority my colleague's as well, your safety is paramount.

3. Once I Start Seeing a Chiropractor, Will I Have To Keep Coming In Forever?

In the past I have found that this question is asked by people who have two main concerns, and in either case the answer is absolutely not.

One possible concern that an individual might have is that once treatment is begun, somehow or other they will become "addicted" to having their "back popped" and from that point forward they risk becoming dependent upon the chiropractor for a lifetime of never-ending "fixes". In reality, what I have found is that a great many individuals, once having made the discovery that there is a safe, effective and drug-free means by which they can experience relief from pain *and* improved health, decide merely to incorporate regular and/or periodic chiropractic adjustments into their overall lifestyle.

To the non-chiropractic patient, it may appear from the outside a bit odd that their best friend occasionally shouts with glee "Sorry dude, gotta run...I have an appointment with my chiropractor!" Similarly, to the uninitiated, it may seem a bit strange when certain friends, relatives or acquaintances who have found an excellent chiropractor sometimes sound almost evangelical when it comes to their staunch insistence that the next time they go in for an adjustment that "you're coming with me!" In situations like that, it's only *natural* that defenses go up. Don't worry, it's not a scene out of "Invasion of the Body Snatchers" or anything. It is simply that when people find something that works, they usually stick with it, and they usually like to tell people about it. That's all...nothing more, nothing less.

The second concern that many people have in this regard is the uncertainty of whether or

not chiropractor A, B, or C, is going to be a bit, shall we say, “overly insistent”, and that early on in the relationship the doctor is going to attempt to back them into a corner and pressure them to commit to lifetime care. It is sad to say, but sometimes people *do* find themselves in the dilemma of feeling that they have to choose between either A: living in pain, or B: choosing a chiropractor who behaves more like a high-pressure salesman.

It is my opinion that *any* physician, chiropractor or otherwise, who attempts to gain compliance from his patients through the use of guilt, excessive fear of the consequences of *non-compliance*, exaggeration of the benefits of treatment, or any other high-pressure sales tactics such as: requiring the patient (and spouse) to attend “mandatory” lectures or classes as a pre-condition for their case being “accepted”, requiring the patient’s spouse or significant other’s attendance during any review of the patient’s clinical work-ups, insistence upon referrals, or *especially* through the use of any unnecessary delay in the initiation of treatment until such compliance has been acquiesced, is a violation of the ethical foundations of the doctor-patient relationship.

Bottom-line: Chiropractic has eased the suffering of millions of people worldwide where all else has failed. Should you ever seek to be one of those millions, at no time and for no reason whatsoever should you ever feel pressured to commit to or continue care beyond any point where *you* feel comfortable doing so.

4. Will I Need X-Rays?

Most people, when they initially find themselves seeking chiropractic care, are for the most part suffering in a serious amount of pain and sometimes with significant limitations on their ability to perform daily activities. In my experience, the onset of these complaints usually occurred one of two ways; it was either a gradual, progressive, downhill slide which finally reached an intolerable level, or there was an injury of some sort. Or it was a combination of both. Either way, neither I nor most of my patients would feel very comfortable jumping right into treatment without a look-see, and I can tell you that the majority of my colleagues and their patients feel the same as well.

The reason for taking a picture is two-fold. First of all, the most important reason a chiropractor has for taking or ordering x-rays is for the purposes of “ruling out” pathologies and/or illnesses which are not necessarily structural in nature, and which also might not reveal themselves during routine examination procedures.

The second reason a chiropractor has for taking x-rays is that once the determination has been made regarding what the patient is not suffering from, and once any complicating conditions* have been taken into account, a structural analysis of the x-rays can be made. While most chiropractors are highly skilled in using observation and palpation (feeling with the hands) to find spinal misalignments, there’s nothing like a good picture to actually see where certain, and often very subtle yet nonetheless significant, structural faults lie.

For these two reasons, and these reasons only, should a chiropractor expose a patient to x-rays. The taking of x-rays for “patient education”, “post” x-rays done only to measure postural changes after treatment and in the absence of any new injury or complaint, “spinal screening” of non-symptomatic patients, or the taking of x-rays for any other non-clinical or non-diagnostic reason is to be avoided.

Conversely, no doctor should ever be expected to *not* take x-rays when necessity dictates, and then proceed with treatment, due to any claimed financial constraints on the part of the patient.

There are, however, several types of patients who can be adjusted quite safely and effectively without x-rays. Pregnant women, as most people know, should never be exposed to x-rays except in extreme cases where trauma has been reported or if the condition is debilitating and fails to respond to treatment. Also children, young adults, and even regular patients of other chiropractors can also be treated effectively without x-rays in the absence of any report of trauma, evidence of nerve impingement, or any signs of structural instability.

As a diagnostic tool, x-rays have been a mainstay of both the chiropractic and medical professions since their discovery in the late 1800s. For me, trying to imagine how over a century of advancement in healthcare could have possibly taken place without the use of this technology is like trying to imagine where aviation would be today without radar. But while most patients *do* present themselves with conditions that can be more safely and effectively treated through information gathered from x-rays, not all cases require that this procedure be done.

Occasionally, a prospective chiropractic patient may also be tempted to call a chiropractor's office and ask the *receptionist* if they are going to need x-rays. In these situations, I advise that the best course of action the patient could take would be to consult in person *with the doctor*, and then doctor and patient together can decide if x-rays are necessary.

*A complicating condition is one that while not actually being treated, or necessarily *prevents* the patient from being treated, nonetheless may slow the patient's recovery and/or cause the doctor to alter the treatment plan aimed at correcting the primary complaint. For example, someone may present with pain from a bulging disc, but may also have a fused vertebrae, disc degeneration, osteoporosis, etc., as a secondary *complicating* factor which needs to be closely monitored during the course of treatment.

5. Are Chiropractors “Real” Doctors?

It is our position, as well as that of the Indiana Health Professions Board, that no DC should offer chiropractic as a substitute for medical care when indicated. And there are rules in place regarding a chiropractor's limits, or scope, of practice such as not prescribing medication, performing surgery, or treating infectious disease. But yes, a chiropractor is a "real" doctor by virtue of his qualifications to diagnose and prescribe and implement a treatment plan based on that diagnosis.

As a portal of entry to the health delivery system, the DC's responsibilities include wellness promotion, health assessment, diagnosis, and the chiropractic management of the patient's healthcare needs. When necessary, the doctor of chiropractic consults with, co-manages, or refers to other health-care providers. A doctor of chiropractic *is* a physician whose purpose, as a member of the healing arts, is to help meet the health needs of the public, giving particular attention to the structural and neurological aspects of the body.

After having completed the necessary undergraduate pre-requisites, the chiropractic student goes through an additional four-year DC program with 4,965 hours of study in numerous areas relevant to the successful practice of a chiropractic physician . 800 hours of study alone are dedicated to hands-on adjusting courses.

The Basic Science and Clinical Science courses that are taken by chiropractic students are*:

- Gross Anatomy
- Spinal Anatomy
- Cellular Biology
- Histology
- Biochemistry
- Neuroanatomy
- Embryology
- Physiology
- Microbiology
- Pathology
- Public Health
- Nutrition
- Neuro/Musculo/Skeletal Diagnosis
- Laboratory Technique
- Physical Diagnosis
- Radiology Fundamentals
- Radiology Positioning
- Diagnostic Radiology
- Ears, Eyes, Nose, Throat
- Cardiorespiratory Diagnosis
- Laboratory Diagnosis
- Gastrointestinal Diagnosis

Urogenital Diagnosis
Endocrinology
Neurology
Clinical Chemistry
Rheumatology
Obstetrics-Gynecology
Dermatology
Differential Diagnosis
Pediatrics
Geriatrics
Toxicology/Pharmacognosis

The Chiropractic Performance-Based Curriculum includes*:

Chiropractic Philosophy and Principles
Spinal Biomechanics
Neuroscience
Spinal Analysis
Emergency Procedures
Athletic Injuries
Chiropractic Clinical Correlations
Core Adjusting Techniques
Specialized Adjusting Techniques
Patient Management
Physical Therapy
Orthopedics
Research Methods
Research Projects
Jurisprudence and Ethics
Record-keeping and Documentation

The chiropractic student also has to serve at least two years of internship treating patients in a supervised clinical practice at their school clinics prior to graduation. Doctors of chiropractic then have to pass four National Board Examinations as well as individual State Board Exams prior to receiving a license to practice. Chiropractors practicing in the US must also take at least 12 hours of accredited continuing education per year to qualify for annual state license renewal.

Not only do the healthcare licensing boards of all 50 states recognize chiropractors as doctors, but Medicare, Medicaid and thousands of Private Health Insurance plans also recognize chiropractors as doctors and pay for their services. The United States military recognizes chiropractors as doctors, and incorporates them into their health-delivery system to treat servicemen and women.

Having a license to prescribe medications or perform surgeries alone does not

necessarily a doctor make. Yes, Chiropractors are also Doctors.

*Logan College of Chiropractic, www.logan.edu

6. Is Chiropractic Recommended For Children or Elderly People?

7. Is Anyone Besides a Doctor of Chiropractic Qualified to Perform Spinal Adjustments?

8. What If My MD, Personal Injury Lawyer, Physical Therapist or Insurance Claim Adjuster Tells Me *Not* to see a Chiropractor?

9. What Other Problems, Beside Neck or Back Pain, Can Chiropractic Help?

Thank you for requesting our report. As you can see, it is still a work in progress and we

are doing our best to complete it as soon as possible. In the meantime, if you have any questions and would like to speak with us personally, please do not hesitate to contact our offices and schedule a consultation.

Sincerely,
and In Health,

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