

For Neck Pain, Chiropractic and Exercise Are Better Than Drugs

The headline above is from a January 7, 2012 article in the health section of the New York Times. This article, as well as a similar one from Medical Press on January 4, 2012, is based on research published on January 3, 2012 in the Annals of Internal Medicine. The research studied 272 adults who were suffering with neck pain for 2- to 12-weeks duration. The subjects were divided into three groups, and received either chiropractic adjustments (called SMT or spinal manipulative therapy in the study), home exercise with advice (HEA), or prescription medication. The adjustments were delivered by one of five chiropractors while the medications were prescribed by medical physicians. The medications consisted mainly of nonsteroidal anti-inflammatory drugs, acetaminophen, or both.



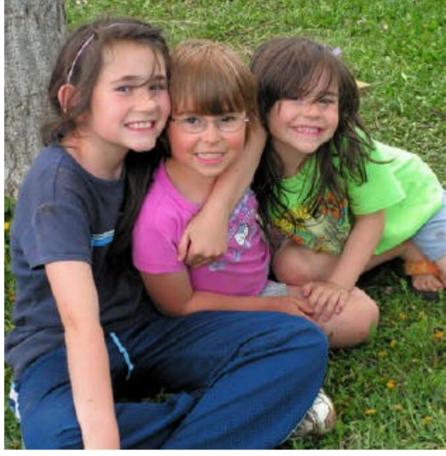
The care in each of the three groups lasted only 12 weeks in this study. The people in the study were asked to rate their pain initially and at various points thereafter up to 12 months later. The level of pain was recorded for each of the participants at the intervals of at 2, 4, 8, 12, 26, and 52 weeks. The results reported that chiropractic adjustments did better in helping neck pain patients and showed "a statistically significant advantage over medication after 8, 12, 26, and 52 weeks." Even though the care rendered for each of these groups was only for 12 weeks, the long term follow-up showed that 53 percent of the people who had received chiropractic continued to report at least a 75 percent reduction in pain. The exercise group also had similar numbers. However, the group taking medication showed only a 38 percent reduction in pain overall.

Dr. Gert Bronfort, an author of the study and research professor at Northwestern Health Sciences University in Minnesota, noted his reasons for the study included a lack of information on choices for people with neck pain. "There was a void in the scientific literature in terms of what the most helpful treatments are," Bronfort said. He noted that the results showed chiropractic superior to medications. "Even a year later, there were differences between the spinal manipulation and medication groups," Bronfort said.

Not only did the group taking medications not fair as well in pain reduction, there was also a problem with usage as people kept taking them in an attempt to get help. "The people in the medication group kept on using a higher amount of medication more frequently throughout the follow-up period, up to a year later," said Dr. Bronfort. "If you're taking medication over a long time, then we're running into more systemic side effects like gastrointestinal problems."

Flu Vaccine Hampers Children's Natural Immunity Warns New Study

Above is the headline from a December 12, 2011 article posted on 121 Doc. The article was based on research published on the November 2011 issue of the Journal of Virology. The research shows that flu vaccine may weaken some children's immune systems to other influenza viruses.



Lead author Rogier Bodewes, from the Erasmus Medical Center in Rotterdam Netherlands explained his beliefs by stating, "Annual vaccination against influenza is effective but may have potential drawbacks that have previously been underappreciated and that are also a matter of debate."

In this study, researchers collected blood samples from 27 healthy, unvaccinated children whose average age was 6 years. The researchers compared these blood samples to the blood samples from 14 children with cystic fibrosis who had received the annual flu shot. The results showed that the unvaccinated children had a superior immune response, involving broader protection against the types of viruses children are exposed to during the flu season.

The study results showed that the vaccinations seem to, at least temporarily, increase one type of immunity while decreasing general immunity to many other forms of viruses and other ailments. While studying the effects of seasonal vaccinations, the

researchers found that unvaccinated children developed virus-specific T cells that normally increased with age and are required for overall immunity. In contrast, researchers found that the blood samples of vaccinated children showed no increase in number of virus-specific CD8 T cells over time.

The articles and study note that many countries do not recommend routine flu vaccinations to healthy individuals and children. Dr. Bodewes, wrote, "Most countries recommend annual flu vaccination of certain high-risk groups to protect against seasonal influenza. Furthermore, some countries recommend annual influenza vaccination of all healthy children more than six months of age."

Resolution of Breech Presentations Following Adjustment of Subluxations

The research published in the Journal of Pediatric, Maternal & Family Health on December 12, 2012 documents a series of cases of breech pregnancies that were resolved following chiropractic care.

The study documented the outcomes in five cases of women who had breech pregnancies that were successfully resolved under chiropractic care utilizing Webster's Technique. The Webster Technique is also called the "In-Uterine Constraint Technique." The authors stated that "Webster Technique was developed by Dr. Larry L. Webster, DC (1945-1999) to address lumbopelvic subluxations and related biomechanical improprieties."The Webster Technique, essentially, is a specific set of adjustments that have shown remarkable results for women with breech pregnancies.



The case series reviewed 7 documented cases of women who had a breech presentation late in their pregnancy, and were helped with chiropractic. Several of the cases presented in the study were very striking in their results. In one of the more interesting cases, a 21-year-old woman was told just one day before her due date that her baby had turned and was now stuck in a breech position. Her physician told her that she needed an immediate "external cephalic version" (ECV – a forceful procedure used to try to turn a baby in-uterine) procedure as she and the baby were in grave danger.

The woman scheduled the ECV procedure, but went to a chiropractor before the scheduled appointment. Due to the closeness of her delivery time, the chiropractor performed the Webster technique three times that day. The next morning, the woman was scheduled for the EVC procedure and was to undergo an ultrasound prior to the EVC to determine the baby's positioning.

The authors of the study best described the next set of events. "During the ultrasound procedure, the OB-GYNE began 'flicking' his finger at the screen as if to test whether it was working or not. For some reason he could not find the head in its previous position just 24 hours prior. Instead, with a sense of disbelief, the medical doctor stated, 'I don't believe this; the baby is in the proper vertex position'." In the conclusion of the study, the authors wrote, "This presentation contributes to the knowledge base that pregnant patients may derive benefits from chiropractic care beyond low back pain."

When Cancer Screening Does More Harm than Good

The headline above appears in the Healthland section of Time on January 6, 2012, based on a study from the Journal of the National Cancer Institute published on the same day. The article, and several others on the same subject, report that the new study showed that men who routinely have prostate exams do not have a higher death rate than those who do not. In fact, the articles suggest that the screening can lead to unneeded procedures and adverse effects.



The new study followed 76,000 men at 10 sites nationwide over a period of about 13 years. Half of the men got annual PSA (prostate-specific antigen) tests along with rectal exams during the six years of the study. The other half, called the "community care" group, continued to receive care from their regular doctors without receiving a routine PSA exam. Although doctors did find about 12 percent more cancers in the group that got the regular PSA screening, both groups had about the same numbers of deaths. This showed that detecting the additional cancers did not reduce the death rate from the disease.

Dr. Gerald Andriole, lead author of the study and chief of urologic surgery at Washington University School of Medicine in St. Louis commented, "The finding is along the lines that routine mass screening of men is probably not very beneficial as far as reducing the chance of dying from prostate cancer." The article reporting on this study notes that the increased number of findings in the men who got regular PSA tests leads to extra procedures that carry their own risks. In a January 6, 2012 ABC Good Morning America article, Dr. David Penson, director of urologic surgery at Vanderbilt University Medical Center noted, "The test is far from perfect, there are many false positives because of other conditions that can elevate PSA levels, such as an enlarged prostate. That can lead to a cascade of events -- prostate biopsies are not comfortable and carry a risk of infection and a small risk of dying."

In a CNN article on the same day, Dr. Andriole summed up his recommendations by saying, "In the case of a man undergoing an annual checkup, I would not recommend that a PSA test be included with other 'routine' blood tests without a specific conversation between the doctor and patient or caregiver and patient about the pros and cons for him, the patients' specific circumstances."

Improvements in Developmental Delay, Colic and GERD in a Child Undergoing Chiropractic

A case study published on January 2, 2012 in the Journal of Pediatric, Maternal & Family Health documents the case of a baby girl who was suffering from developmental delay, colic and GERD, and who was helped by chiropractic care.

According to the US National Library of Medicine, Gastroesophageal Reflux Disease (GERD) is a condition in which the stomach contents (food or liquid) leak backwards from the stomach into the esophagus (the tube from the mouth to the stomach). This action can irritate the esophagus, causing heartburn, and other symptoms.



In this case, a mother brought her 15-month-old daughter to a chiropractor after noticing that the girl was developmentally behind where she should be. These developmental issues included not standing, walking or talking appropriately for her age level. The baby was only crawling, and could not say more than two-syllable words.

The study reported that, previously, the mother had brought her baby to the chiropractor at the age of five months. At that time, the baby was suffering from GERD and colic. These issues were both resolved within three chiropractic adjustments. The study was recorded later when the child was 15 months of age and was suffering from the developmental delay issues.

A chiropractic examination revealed subluxations in the upper neck. Specific adjustments were initiated once a week for a 19-week period. The results showed that by the third adjustment the child was walking with some assistance. The study reported that by the 6th visit, the child was walking by holding on to a table and had added words to her vocabulary. By the 9th visit, she had taken 6 steps by herself and increased her vocabulary by three more words.

An update assessment was done on the 19th visit. At this time, the girl was 19 months of age. She had improved her walking and was now at the level of a 12-month-old. Her speech was at the proper developmental level for her age, and she no longer had any signs of other developmental delays.

FDA to Limit Antibiotics to Treat Livestock to Prevent Superbugs

The headline above appeared in a January 4, 2012 Washington Post Business article, and reports on the US Food and Drug Administration's plan to restrict the usage of certain antibiotics in livestock. The move is being made to reduce the growing risk that the germs that are being created as a result of the widespread use of antibiotics would be stronger and more resistant to treatment, therefore endangering humans.



The article notes that the antibiotics being used are the same ones used to treat people who have serious infections. Dr. David Wallinga, a physician with the Institute for Agriculture and Trade Policy, who also works with the Keep Antibiotics Working coalition, stated, "This is an incredibly critical class of antibiotics for humans. In the medical world you'd call it a 'big gun' or a 'drug of last resort.' It's effective against a pretty broad spectrum of bacteria." Dr. Wallinga added, "When someone comes into an emergency room and you don't know what they're sick with, you try to treat them with one of the big guns. When your big guns start being ineffective, you're really in trouble."

In opposition to the ban, the National Cattlemen's Beef Association argued that there is not enough scientific evidence to say that the use of antibiotics is unsafe. Their spokesperson, Kristina Butts, stated, "The top priority for cattle producers is to raise healthy cattle because healthy cattle are the foundation of a safe, wholesome food supply."

Rep. Louise Slaughter, of New York, a microbiologist who has pressured the federal government on the issue stated, "This is a modest first step by the FDA, but we're really just looking at the tip of the iceberg. We don't have time for the FDA to ploddingly take half-measures. We are staring at a massive public health threat in the rise of antibiotic-resistant superbugs. We need to start acting with the swiftness and decisiveness this problem deserves."

In a January 4, 2012, Los Angeles Times article on this issue, Representative Slaughter, who has written legislation in the past intended to prevent antibiotic overuse, concluded, "With over 1 million Salmonella cases in the U.S. each year, at least 30,000 Americans will contract cephalosporin-resistant bacteria every year. I'm glad the FDA is finally acting but how many Americans have needlessly been sickened in the meantime?"