

Finding the Support to Move Forward

A guide by Amy LaGrange, BS, LMT, GCFP

Photo credit: Ideal human skeleton shown standing contrapposto, with the left hand on hip Cooper Hewitt, Smithsonian Design Museum



My first encounter with Feldenkrais



One of the keys to easier movement

can be found by moving like a baby.

posture

flexibility

balance

self image



Meet Liv.

Watch Liv
explore and
learn.

She is moving.

She is developing
awareness.

She is learning.



Meet Liv.

Watch Liv
explore and
learn.

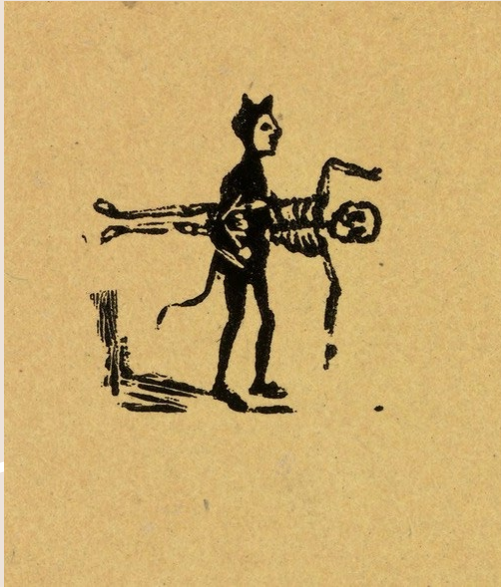
She is moving.

She is developing
awareness.

She is learning.



If you know what you are doing, you can do what you want. If you do not know what you are doing, you cannot do what you want.



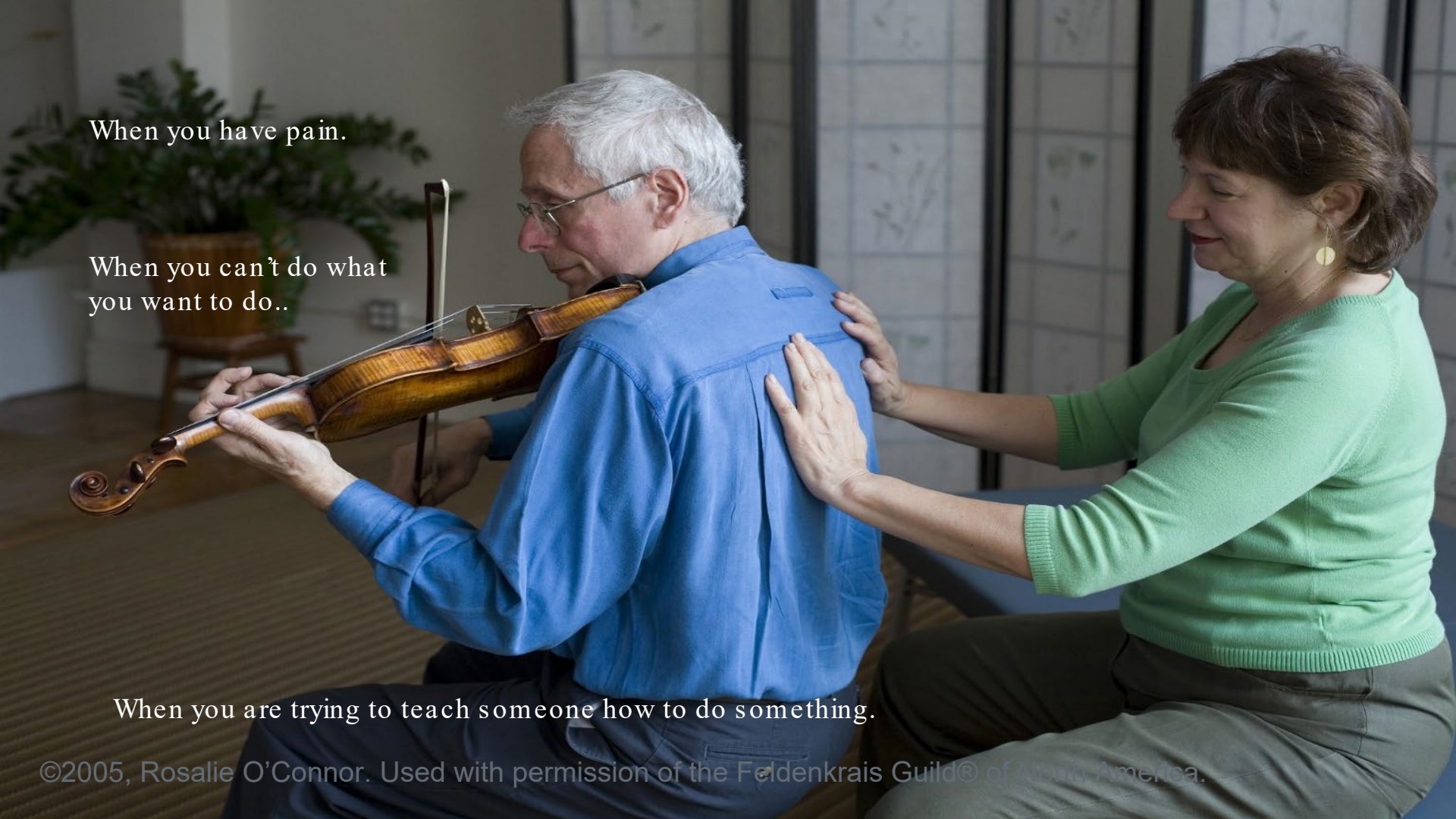
And most of us have no idea what we are doing!

When you have pain.

When you can't do what
you want to do..

When you are trying to teach someone how to do something.

©2005, Rosalie O'Connor. Used with permission of the Feldenkrais Guild® of North America.



What is Feldenkrais?

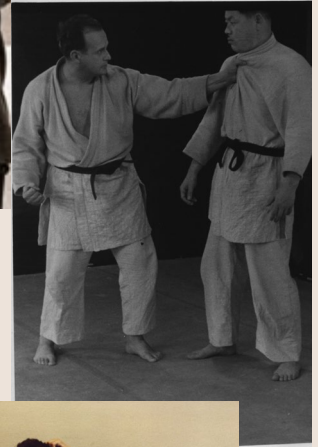
..or maybe more importantly...

Who was Feldenkrais?

A scientist, a scholar, a teacher

An athlete, a mover

A creative thinker with bum knees.



**Moshe wondered if he
could teach himself to
organize in the less
painful way more often.**

He helped himself..and developed two
modalities that Feldenkrais practitioners
now use to help their students.

Functional Integration® Awareness Through Movement®

Photo credit: © International *Feldenkrais*® Federation Archive



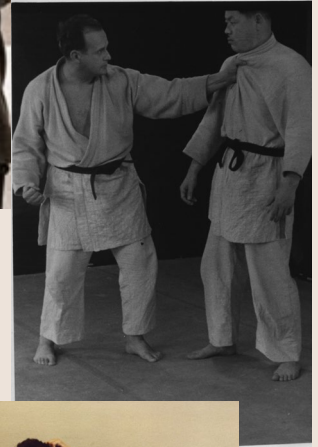
What is Feldenkrais?

A way to develop awareness through exploring movement.

A tool to learn to use your skeleton well so your muscles don't have to work so hard.

A methodology to discover more options.

“Structured play
for adults.”



Ask yourself:

What would you like to improve or have be easier for you to do?

Stand up

Stand

Reach

Run

Golf

Hike

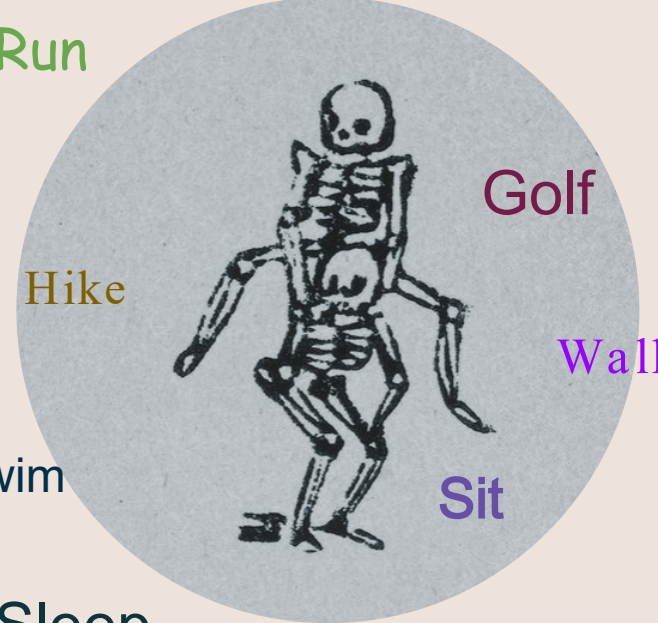
Walk

Swim

Sit

Sleep

Get up off the floor





If the shoe fits...

Photo credit: New Shoes, Amy LaGrange

Make the impossible possible...

the possible easy...

and the easy elegant.

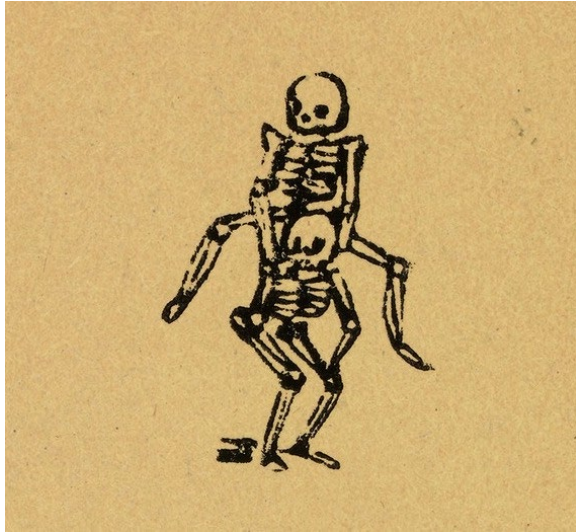
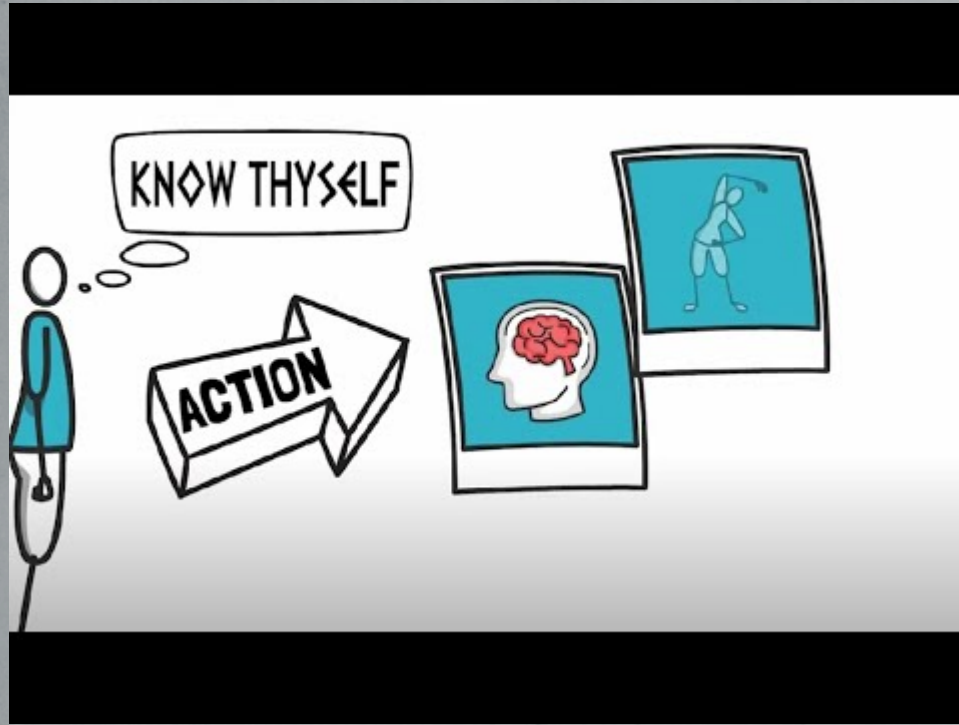
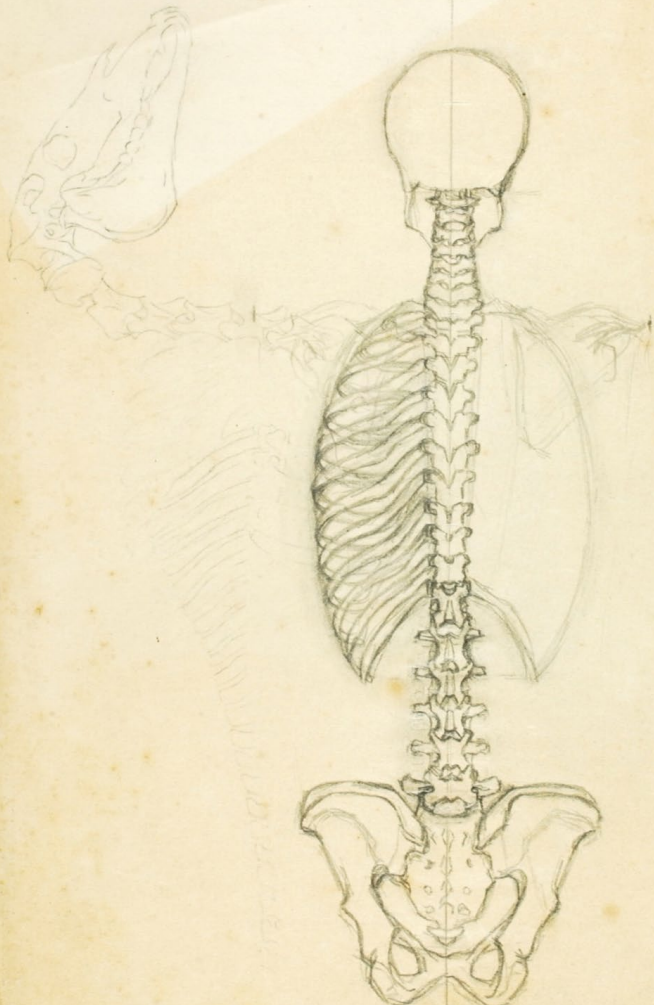


Photo credit: Politics, Calavera for a policeman, All Hallow's Eve, José Guadalupe Posada, Smithsonian American Art Museum, Gift of Jack Lord.



Without learning to know ourselves as intimately as we possibly can..we limit our choices.

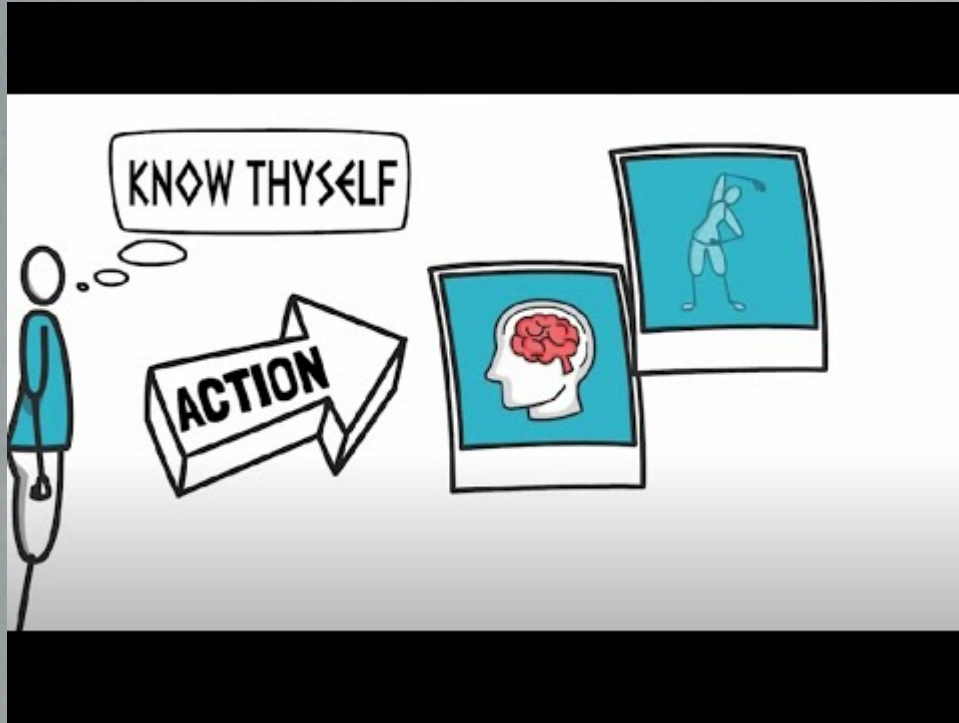
Video credit: Future Life Now, Cynthia Allen,
https://www.youtube.com/watch?v=_X2etVHUZE



Come to the front of your chair.


Let yourself be supported by
your sits bones with your
thighs free.

Your feet flat on the floor.



What I'm after isn't flexible bodies, but flexible brains. What I'm after is to restore each person to their human dignity.

Video credit: Future Life Now, Cynthia Allen,
<https://www.youtube.com/watch?v=X-2etVHUZE>



Come again to the front of
your chair. Let yourself be
supported by your sitting
bones with your thighs free.
Your feet flat on the floor.

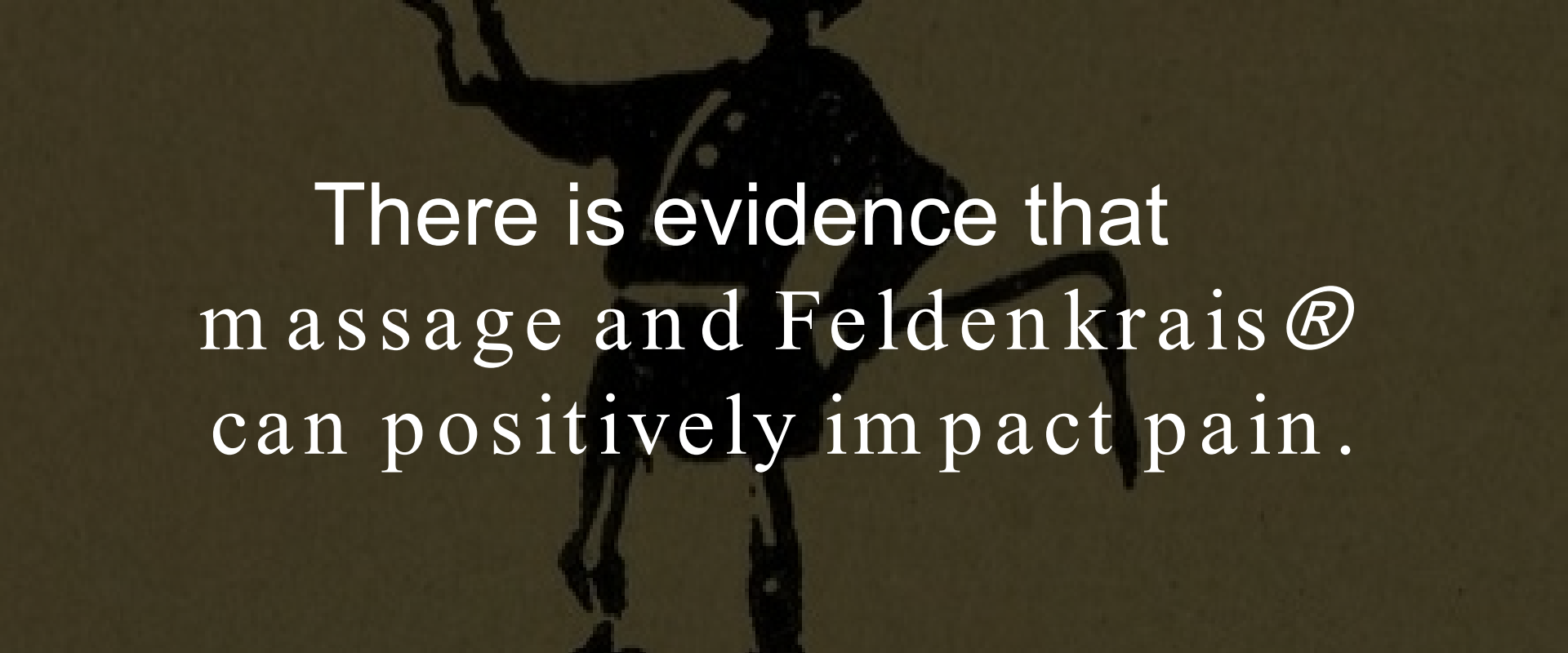
Let's get moving!



Bodywork, Feldenkrais® and Integrative Medicine

How do these work together?

- **Address pain and discomfort**
Commonly considered application
- **Induce relaxation**
Stimulates parasympathetic nervous system response
- **Examine habits of self -use and self -organization**
Developing self awareness
- **Improve function**
Having several options for doing the same thing. Choice. Developing agency.



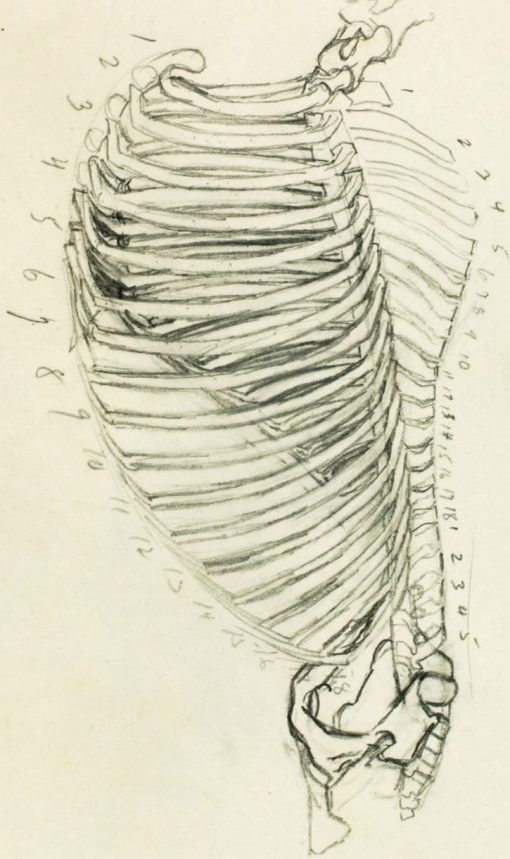
There is evidence that
massage and Feldenkrais®
can positively impact pain.

So much of it is anecdotal.

A 2017 systematic review of seven randomized controlled trials involving 352 participants with arthritis found evidence that massage therapy is superior to non-active therapies in reducing pain and improving functional outcomes.

We have similar reviews regarding LBP, lymphedema, and recovery after sports activity.

Some Feldenkrais® studies....



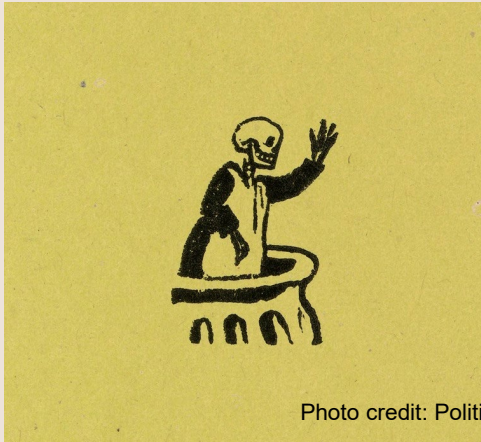
Hillier, S., & Worley, A. (2015). The effectiveness of the feldenkrais method: a systematic review of the evidence.

Connors, K., Galea, M., Said, C., & Remedios, L. (2010). Feldenkrais Method balance classes are based on principles of motor learning and postural control retraining: a qualitative research study.

James Stephens and Susan Hillier, (2020), Evidence for the Effectiveness of the Feldenkrais Method.

The Feldenkrais Method improves functioning and body balance in people with intellectual disability in supported employment: A randomized clinical trial

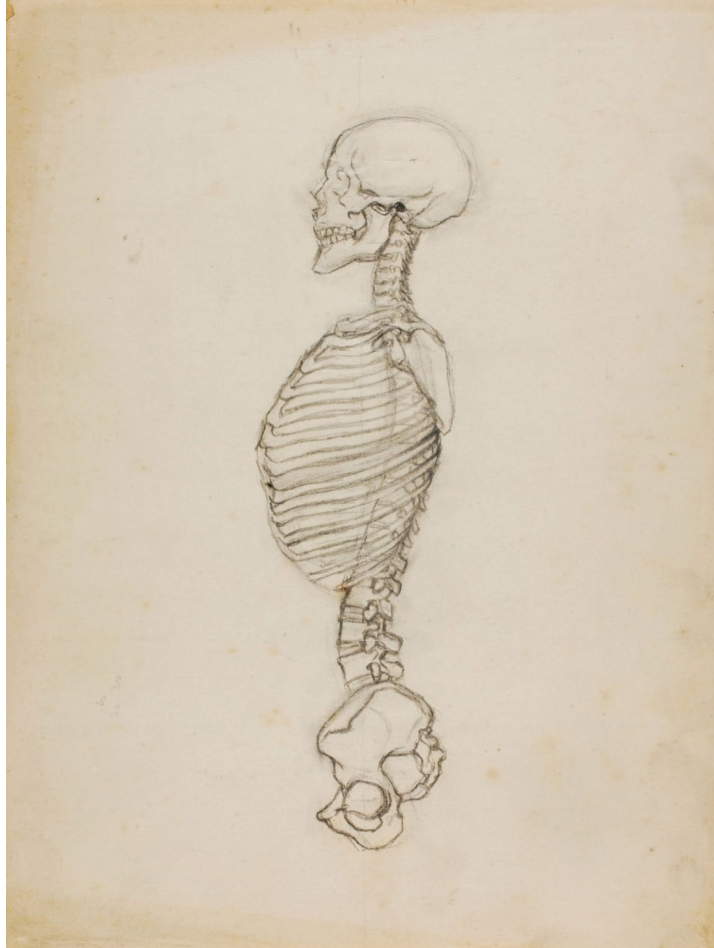
After the intervention, improvements were observed in functioning and body balance in the experimental group.



This study indicates that a 30-week program of FM classes is able to improve the functioning of middle-aged individuals with ID.

So, it appears that more study is necessary.





I believe that knowing oneself is the most important thing a human being can do for himself. How can one know oneself? By learning to act not as one should, but as one does.

Moshe Feldenkrais

What would you like to improve or have be easier for you to do?

Stand up

Stand

Reach

Run

Golf

Hike

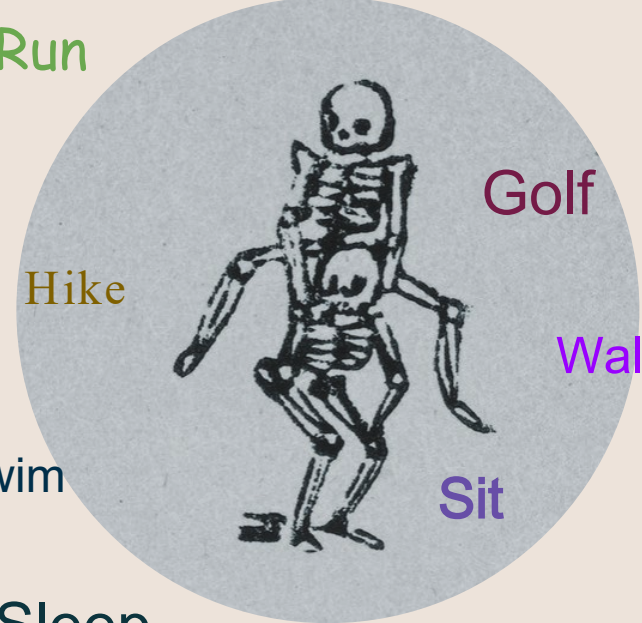
Walk

Swim

Sit

Sleep

Get up off the floor



Finding the Support to Move Forward

ALaGrange@unmmg.org

[Move Better, Feel Better Around the World in 48 Hours](#)

[The Feldenkrais Project](#)

[Uncommon Sensing](#)

Photo credit: Ideal human skeleton shown standing contrapposto, with the left hand on hip Cooper Hewitt, Smithsonian Design Museum



Western Medicine Meets Chinese Medicine

Nadia Marsh MD
Assoc. Prof. of Clinical Medicine
FACP, ABPS
Dept of Medicine
April 29, 2022

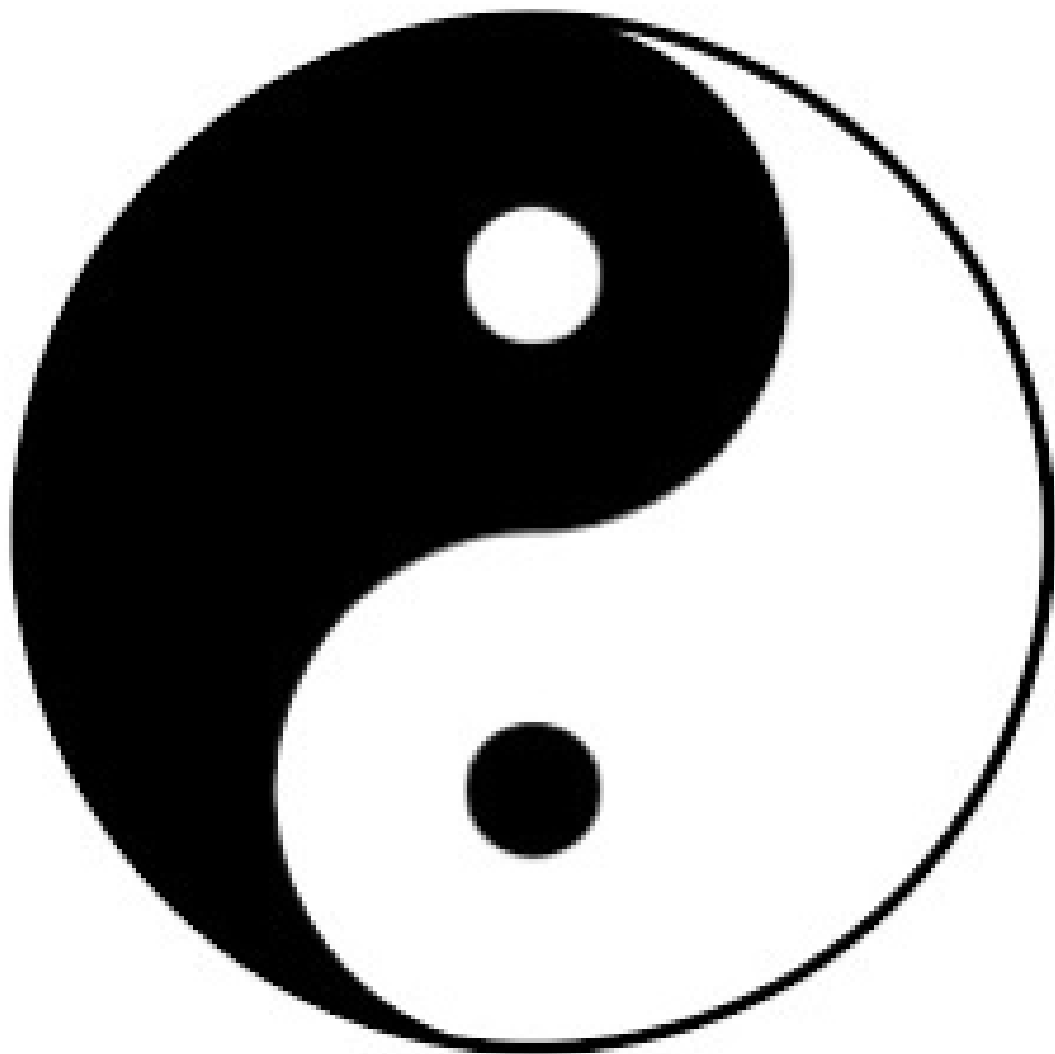
Objectives

describe concept of Chinese Medicine

compare Western and Chinese Medicine approaches in individual patients

discuss the challenges of developing a conventional evidence base model of RCTs for acupuncture

demonstrate some acupuncture points for individual patients



Qi Deficiency



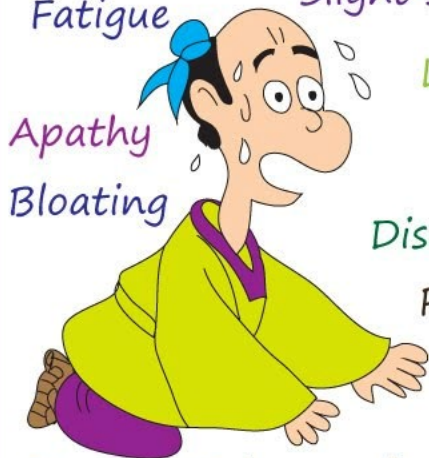
Sweating on slight exertion

Poor appetite

Shortness of breath

Spontaneous daytime sweating Food sensitivities

Fatigue Slight sensitivity to cold Lethargy



Loose stools

Dislike to speak

Apathy

Weakness at Menses

Bloating

Disillusionment

Dizziness

Pale Complexion

Muscle Weakness







Mental Fatigue

Tongue: Pale, maybe with teethmarks

Pulse: Weak, Empty



The 8 Principles

 Yin	 Yang
Deficiency ↓	Excess ↑
 Cold	 Heat
Internal 	External 

Ms. B

Hx of ovarian insufficiency since the age of 17

Hot flashes

Overweight

“Tired all of the time”

Wondering if “I will ever become pregnant”

Yin Deficiency



Red Facial Cheeks Mental restlessness

Low grade fever Five Palm Heat

Feeling of heat especially in evening

Feeling hot and bothered Fidgetiness

Night sweating Uneasiness Insomnia

Poor memory Dry mouth and throat

Anxiety Dream disturbed sleep

Propensity to be startled

Mental Fatigue Malar Flush

Tongue: Red, no coat

Dizziness



Blood Deficiency 血



Floaters in eyes

Dry Hair or loss

Pale Complexion

Easily Startled

Dry skin

Scanty periods

History of heavy periods

Insomnia

Mental Fatigue

Muscle Cramps

Brittle nails

Dry eyes

Amenorrhea

Not grounded!

Dizziness

Tongue: Pale, Dry, Thin

Blurred vision

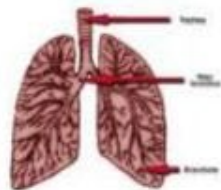
Pulse: Weak, Choppy, Thready, Thin

Organs and Functions

Yin Organs



Heart



Lungs



Spleen



Liver



Kidneys

PC

Yang Organs



SI



LI



ST



GB



BL

TW

The Organs of the Body: The Harmonious Landscape

Yin Organs

Liver

Spleen

Kidneys

Heart

Pericardium

Lungs

Yang Organs

Yin Organs

Stomach

spleen

Gall bladder

liver

Bladder

kidneys

Small intestine

heart

Large intestine

lungs

Triple burner

pericardium

Pulse Positions



HT

LV

KD yin



LU

SP



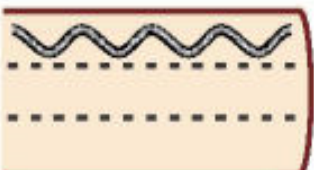
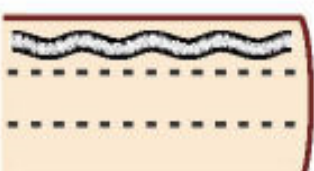
KD yang

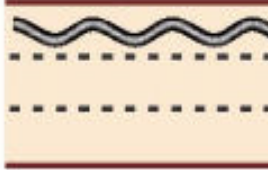

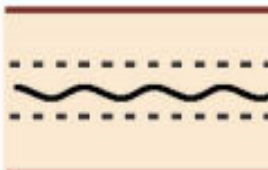



Pulses

Stagnation	Blood	Choppy, wiry or surging
	Phlegm	Rolling
	Cold	Tight, slow or deep
Deficiency	Qi	Rapid and weak
	Yin	Rapid and weak
	Yang	Slow and weak

Pulse Categories

Category	Pulse Type	
Felt with Light Pressure	Floating Pulse (1)	
	Surging Pulse (11)	
	Hollow Pulse (15)	
	Drumskin Pulse (17)	

Category	Pulse Type	
Forceless	Deficient Pulse (7)	
	Short Pulse (10)	
	Faint Pulse (12)	
	Thready Pulse (22)	

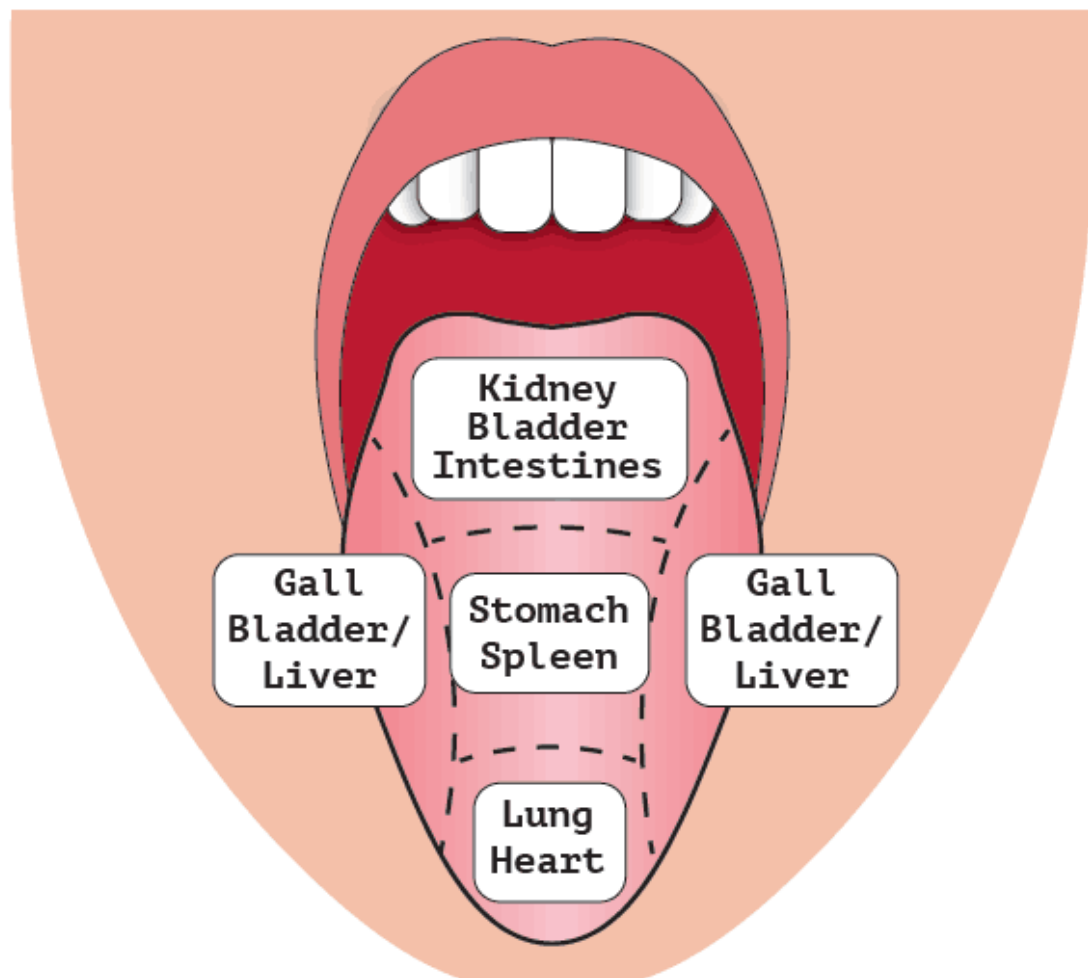
QI DEFICIENCY

Thin white coating

Tooth marks

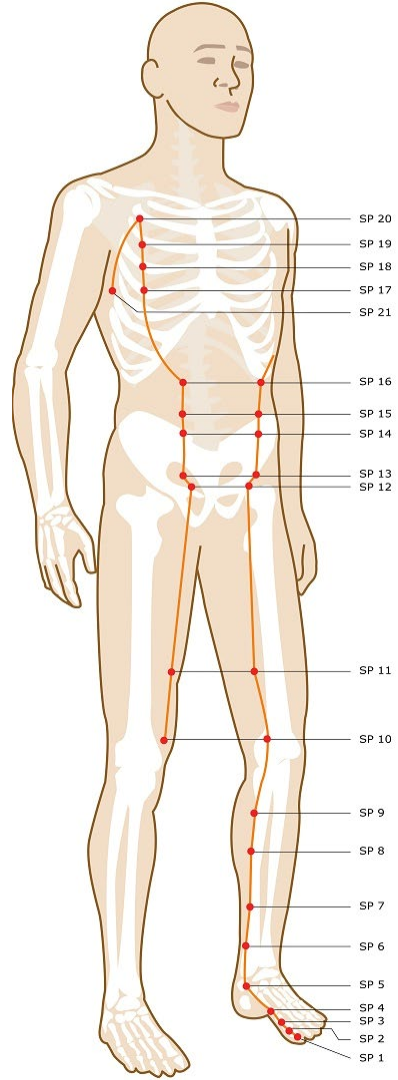
Pale tongue with
few red spots

Fatigue
Poor appetite
Spontaneous sweats
Shortness of breath
Over thinking
Worrying



Spleen Qi Deficiency and Blood deficiency in gynecology





Liver

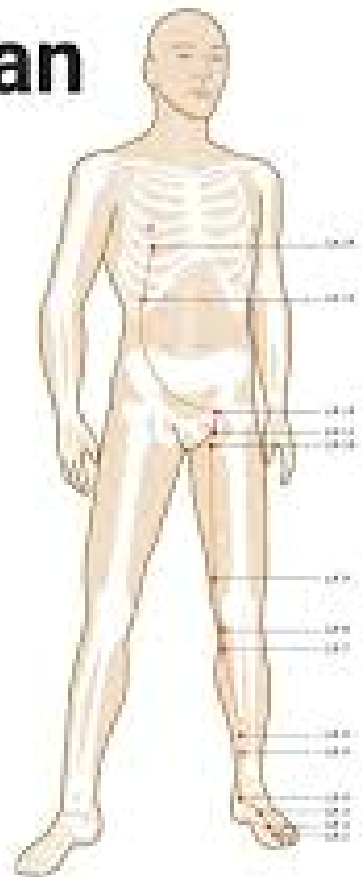
Liver - ensures that energy and blood flow smoothly throughout the body, it stores blood, and is connected with the tendons, nails, and eyes

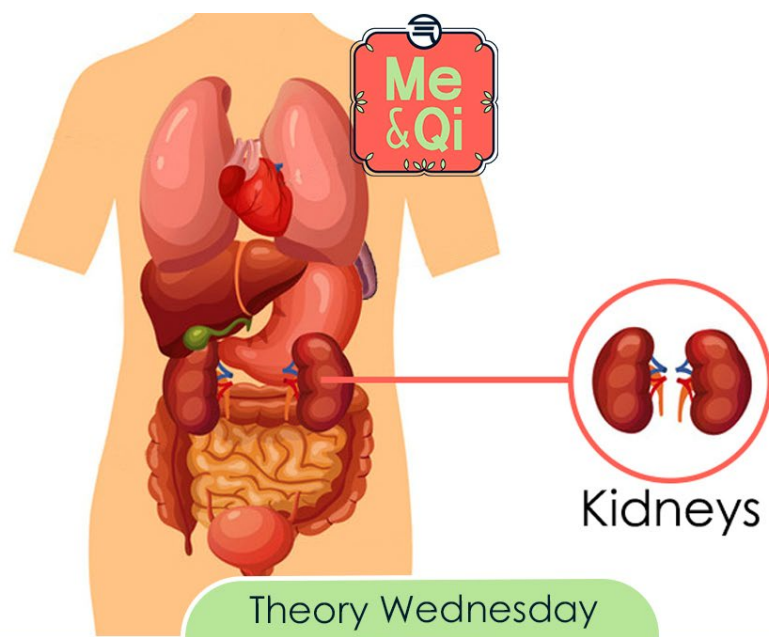
Emotion- it is connected to anger, which when out of balance is expressed as PTSD, depression, or lack of feeling.

E.g excessive menstrual flow due to liver's blood storing ability,

Liver Meridian (TCM)

- 14 Pressure points
 - Wood Element
 - Yin Organ
 - Stores the Blood
 - Sense Organ -
The Eyes
 - Governs Free
flowing of Ki
 - Houses the
Ethereal Soul





Theory Wednesday

The Kidneys in TCM

"The root of Essence, Yin and Yang"

Emotion | **Fear**

Main functions | **Store Essence**
Govern birth, growth, development and reproduction
Rule water

Common | **"Kidneys Loathe Dryness"**

Essence Deficiency

Mental restlessness late closure of fontanels

Mental Fatigue

chronic weakness of knees and legsthroat

Hair loss

Mental retardation Uneasiness

loose teeth Insomnia

Poor long term memory

poor bone development

softening of the bones

Premature greying of hair

Chronic soreness of the back

Weakness of sexual activity

mental dullness

Tongue: Red, no coat

Dizziness Smiling Body

Pulse: Floating Empty rapid



Kidney Points on the ankle



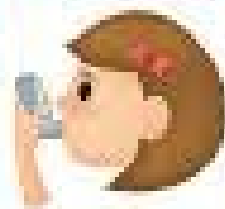
LUNG Qi Deficiency



Weak
Cough

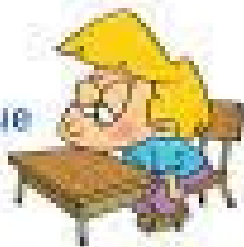


Short of
Breath



Asthma

Fatigue



zzz

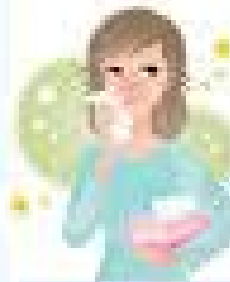


Sleep
Apnea

Weak
Voice

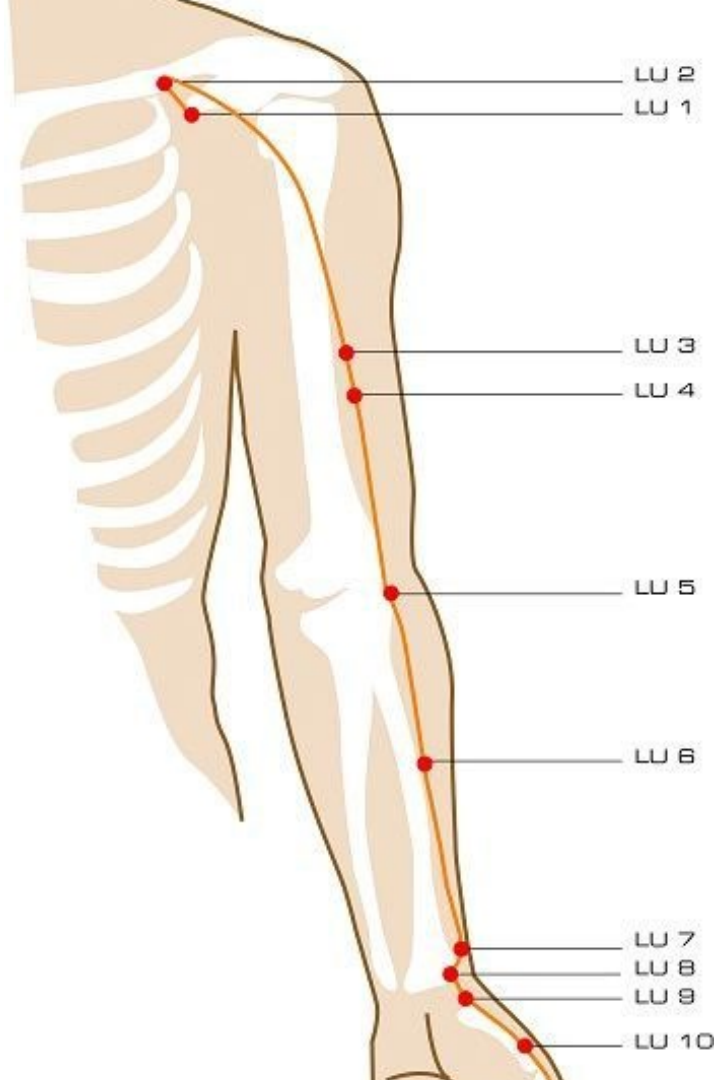


Catch Colds
easily



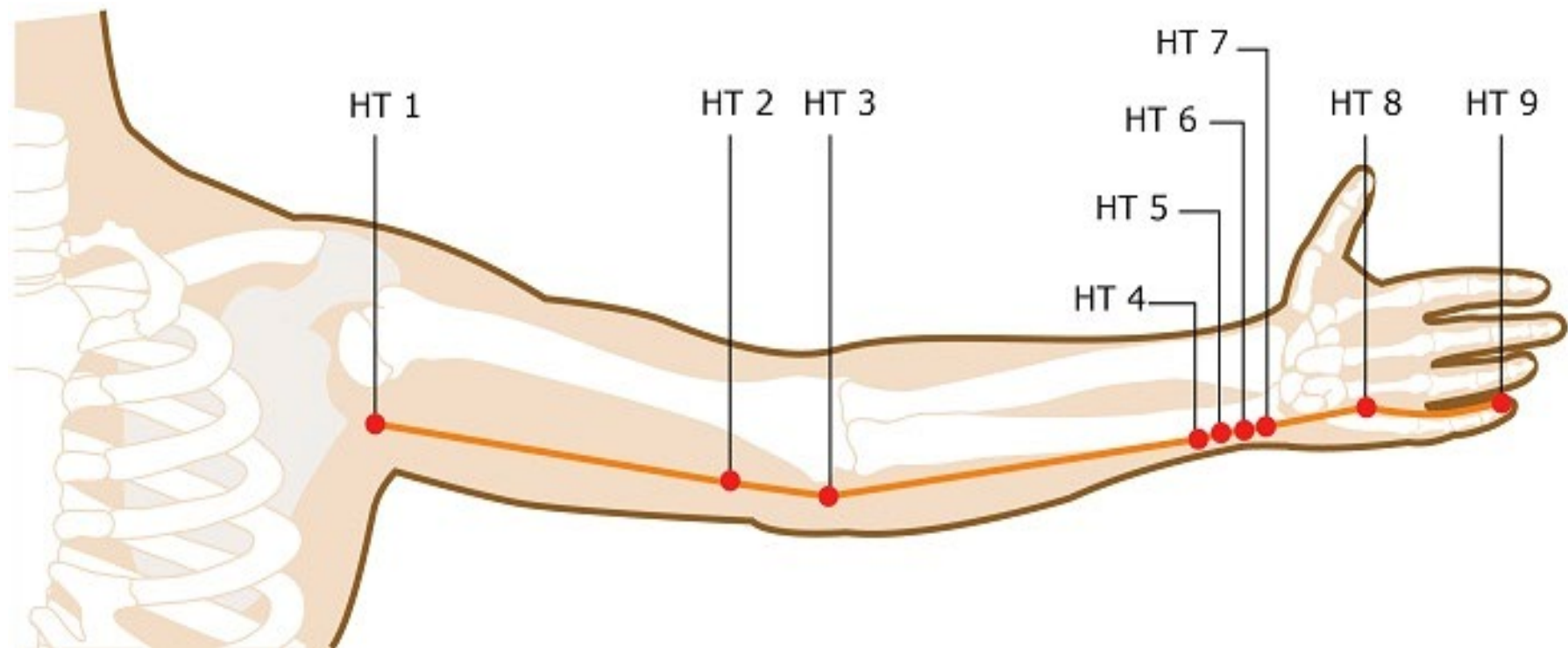
Environmental
Allergies





Heart

Signs	Explanations in TCM
More palpitations pronounced in the evening	Heart Blood Deficiency affects Heart Qi on account of that Blood is Yin.
Insomnia, poor memory, anxiety, dream disturbed sleep, easily startled	Heart governs Blood and insufficient Blood cannot nourish Brain, leading to Heart unable to properly housing the Shen.
Dull pale complexion, pale lips, dizziness	Due to Blood Deficiency



Other TCM conditions

Blood stagnation : chronic and acute pain

Blood deficiency: headaches, dizziness, and fatigue

Stomach heat: digestion issues

It may be beautiful, but does it work?

Clinical Analysis of 290 cases of chronic glomerular nephritis treated with traditional herbs

Observations of the efficacy of subcutaneous acupuncture treating 222 cases of bronchial asthma

Traditional Chinese medical treatment of angina pectoris-report of 112 cases

Getting back to Ms. B

....Worked on lower abdomen, stomach 29, spleen 6 to encourage flow in lower part of body (lower jiao), to address spleen qi deficiency, liver blood deficiency, liver points, liver 8 (build blood)

Acupuncture may ease troublesome menopausal symptoms BMJ www.bmj.com 2/19/2019 (the ACOM study)

Randomized 70 patients 5 weeks of standard western medical acupuncture or no acupuncture

Each session lasted 15 minutes, delivered by Danish family doctors from 9 different general practices trained in acupuncture, (on average practicing it for 14 years)

Each participant completed a validated Meno Score (MSQ) questionnaire, before session, then at 3, 6, 8, 11, and 26 weeks

11 graded scales for each of hot flushes, day and night; general sweating, sleep disturbances; emotional vulnerability, memory changes, skin and hair problems, abdominal sx, urinary and vaginal sx, and fatigue

Acupuncture may ease troublesome menopausal symptoms

www.bmj.com 2/19/2019 (the ACOM study)

At 6 weeks 80% of the women in the acupuncture group said they felt the sessions had helped them., less troubled by hot flushes, was apparent after 3 weeks

Decreased day and night sweats

Low drop out rate

?placebo effect

Nonetheless brief course of acupuncture is a realistic option for women who do not wish to use hormone therapy

Acupuncture for patients with premature ovarian insufficiency

A systematic review protocol

Li Huang PhD, Yu Chen, PhD... and Shaobin Wei, BS

- 10 databases searched from July 2019, PubMed, Embase, the Web of Science, the Cochrane Central Register of Controlled Trials, 4 Chinese Databases (China National Knowledge Infrastructure, Wanfang Digital Periodicals, Chinese Biomedical Literature Database...) 1 Korean medical database, 1 Japanese medical database
-
- Primary outcomes: resumption of menstruation, serum FSH levels (other secondary outcomes)

Ms. B Narrative

evidence for acupuncture:

Studies in acupuncture

lack of adequate sample size

lack of clinically meaningful endpoints

vague enrollment criteria

high drop out rates, inadequate follow up

what is the training of the acupuncturist?

few trials take into consideration the models of East Asian Medicine or whether they stratified for CM diagnosis

Difficult to blind the acupuncturist to real acupuncture versus sham acupuncture

Sham acupuncture likely has a physiological impact, which may not be a real control (or placebo)

Sham acupuncture may modulate pain and produce effects beyond what you would expect from a true control

N of 1 trial in acupuncture

Chronic Pain

Overall reporting descriptions of acupuncture for chronic pain in RCT's in English Journals Zhang N et al May 2021, Journal of Pain Research, Volume 14

74 trials

CONSORT guidelines

Ms. K

69 y/o woman

PMH

IBS longstanding

Anxiety, depression

Mouth Sores

Chronic left hip pain getting worse

Very active, hikes in the Sandias every weekend, has tried multiple conventional meds for IBS. Presented with concern for all of her health complaints, was not able to prioritize.

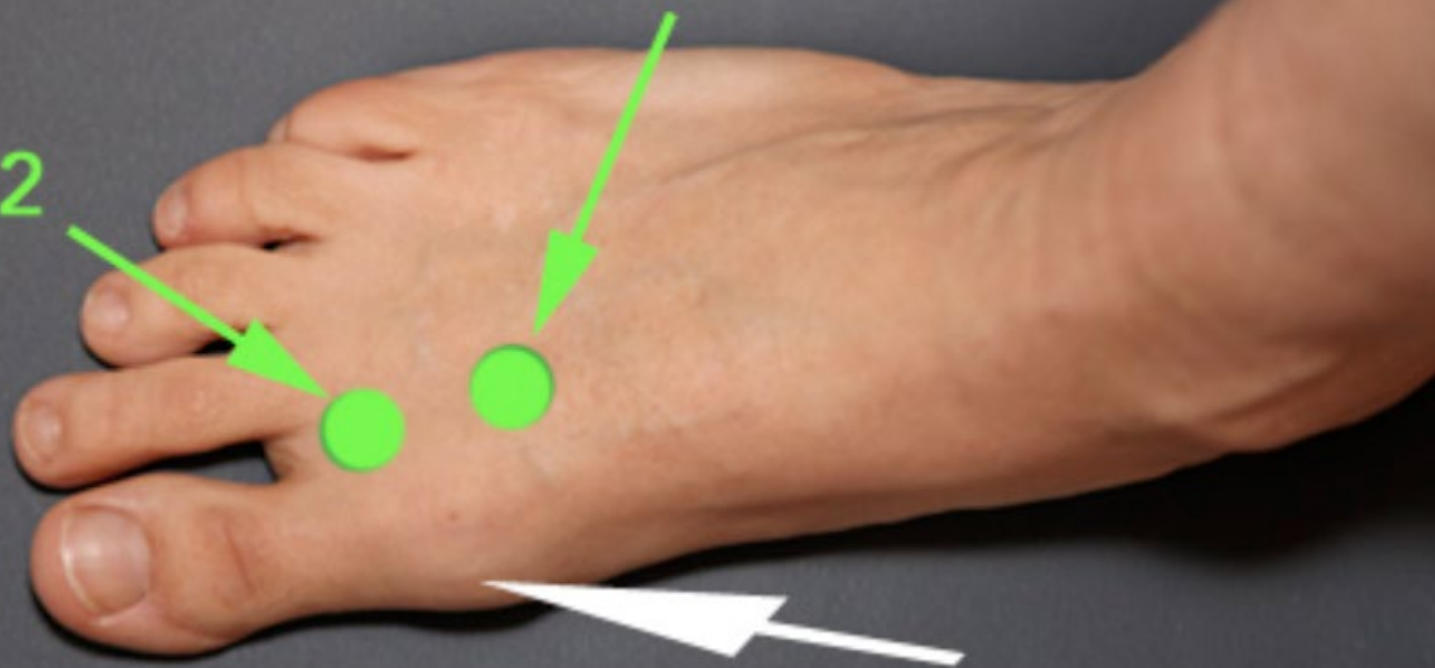
TCM Pattern?

Points used, Du 20, Rin 12, 15, 16,17,18 ST 25, LIVER POINTS

Liver 2 and Liver 3

LV 2

LV 3



LV 3 is behind the big toe joint,
LV2 is very close to the toes.

ST 36

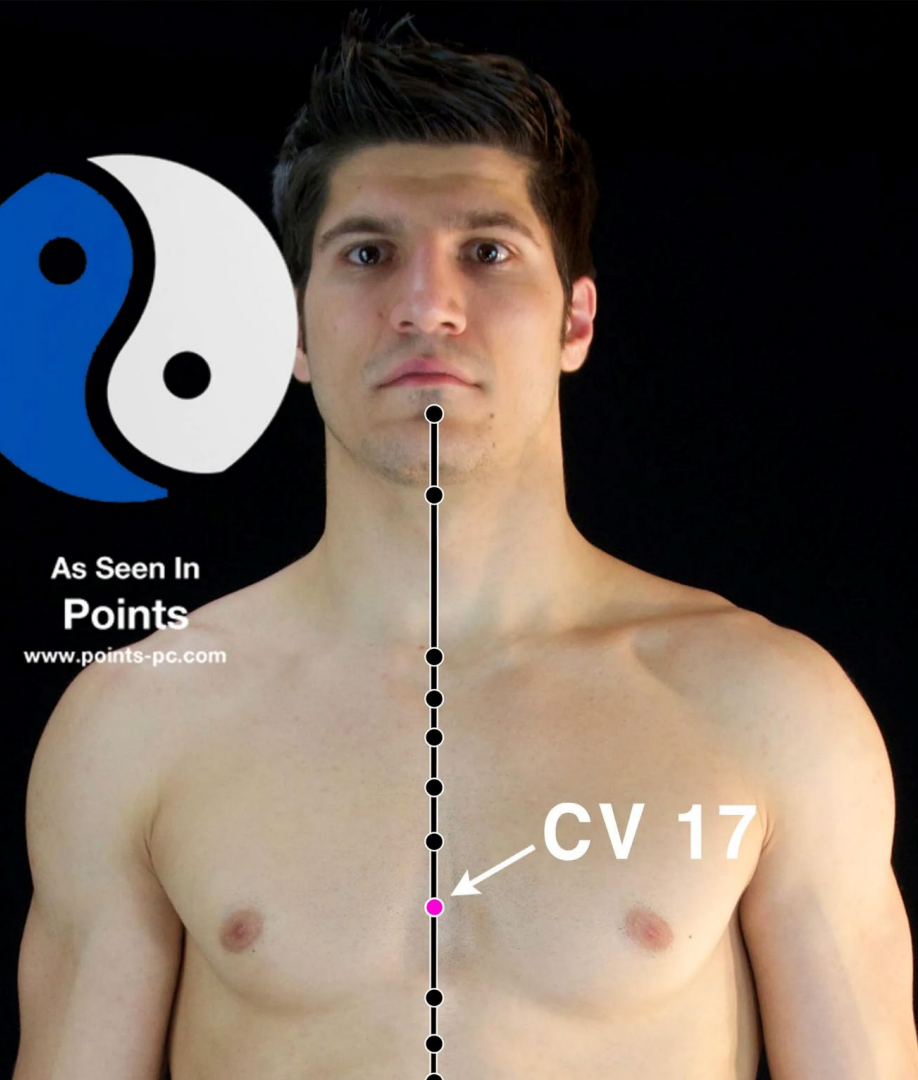


“Blob”





As Seen In
Points
www.points-pc.com



CV 17



GV20

HerbalShop.com

Efficacy of acupuncture in refractory irritable bowel syndrome: study protocol for a randomized controlled trial Jun Zhao, et al BMJ Open 2021; 11:

-170 eligible patients who meet the ROME 1V criteria for refractory IBS randomly allocated to receive acupuncture or sham acupuncture

-received 12 sessions of acupuncture over 4 weeks, and a 4 week follow up

-primary outcome IBS symptom severity score

Measured weekly defecation, stool properties, IBS quality of life score, self-rating depression score, self-rating anxiety score.

Outcome measures collected at baseline, 2, and 4 weeks of the intervention

Study done in China in Beijing and Sichuan, and outcomes reviewed through peer-reviewed publications

Ms. K Narrative

Summary

TCM and acupuncture can be helpful for a myriad of conditions; the most useful predictor of benefit is if a patient is open and interested

there are many opportunities to incorporate acupuncture alongside Western medicine, in ways that are collaborative and team building

the symbolic representation of harmony and balance in TCM may be a therapeutic framework in itself

N of 1 trials may be the most realistic for proving efficacy for acupuncture

OPTIMIZING HEALTH

Lauri Medina MD FACS ABOIM

Medical Director

*UNM Integrative Health and Medicine Clinic - Center for
Life*

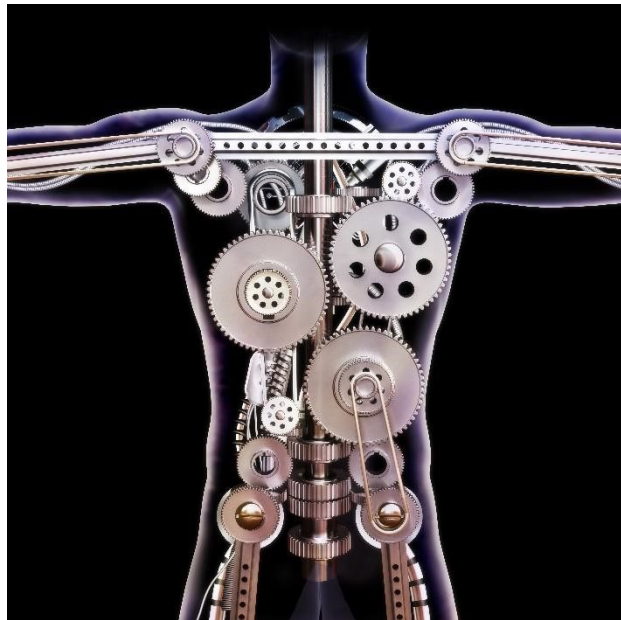




Integrative Medicine

- “the practice of medicine that reaffirms the importance of the relationship between practitioner and patient, focuses on the whole person, is informed by evidence, and makes use of all appropriate therapeutic approaches, healthcare professionals, and disciplines to achieve optimal health and healing.” ¹

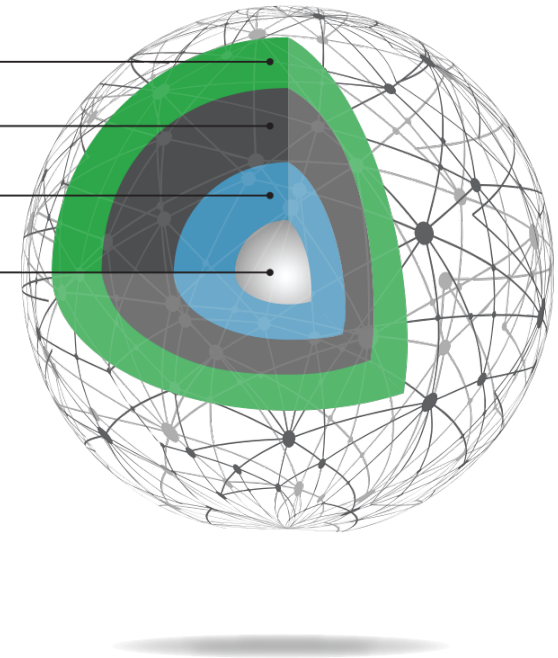
Outdated Health Model



Mechanical Mindset
Parts of People

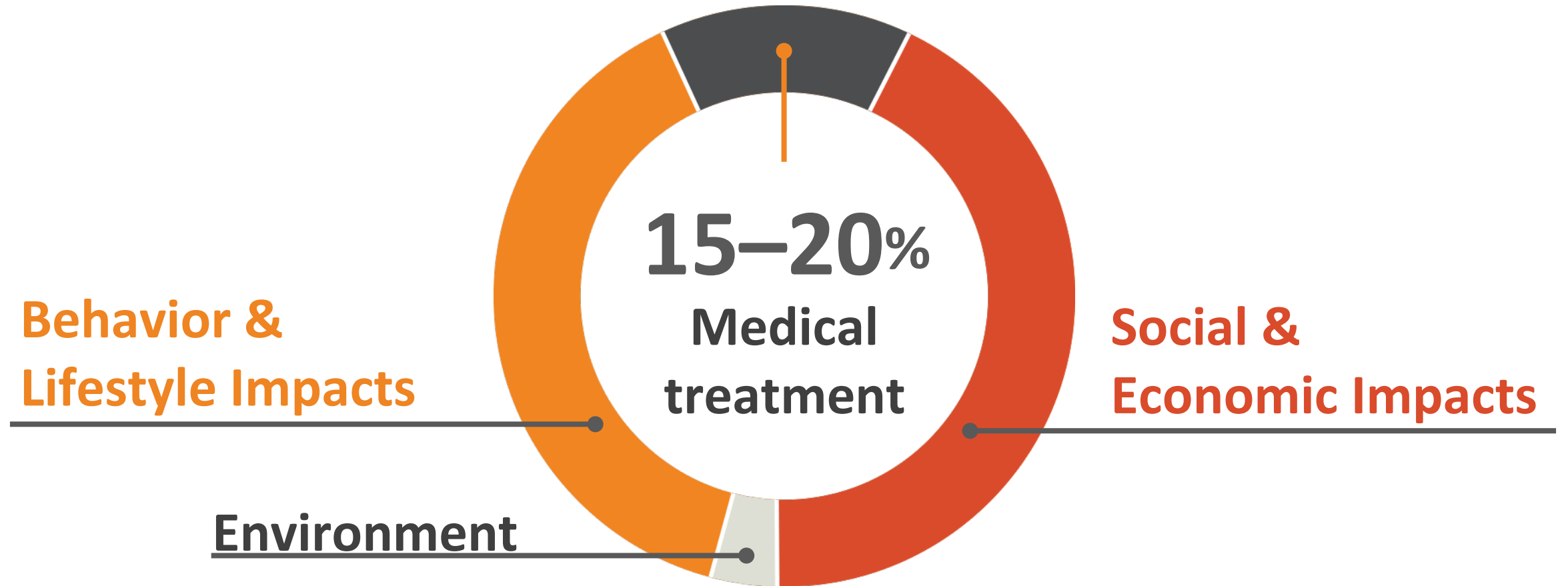
Future of Health

- BODY & EXTERNAL
- BEHAVIOR & LIFESTYLE
- SOCIAL & EMOTIONAL
- SPIRITUAL & MENTAL

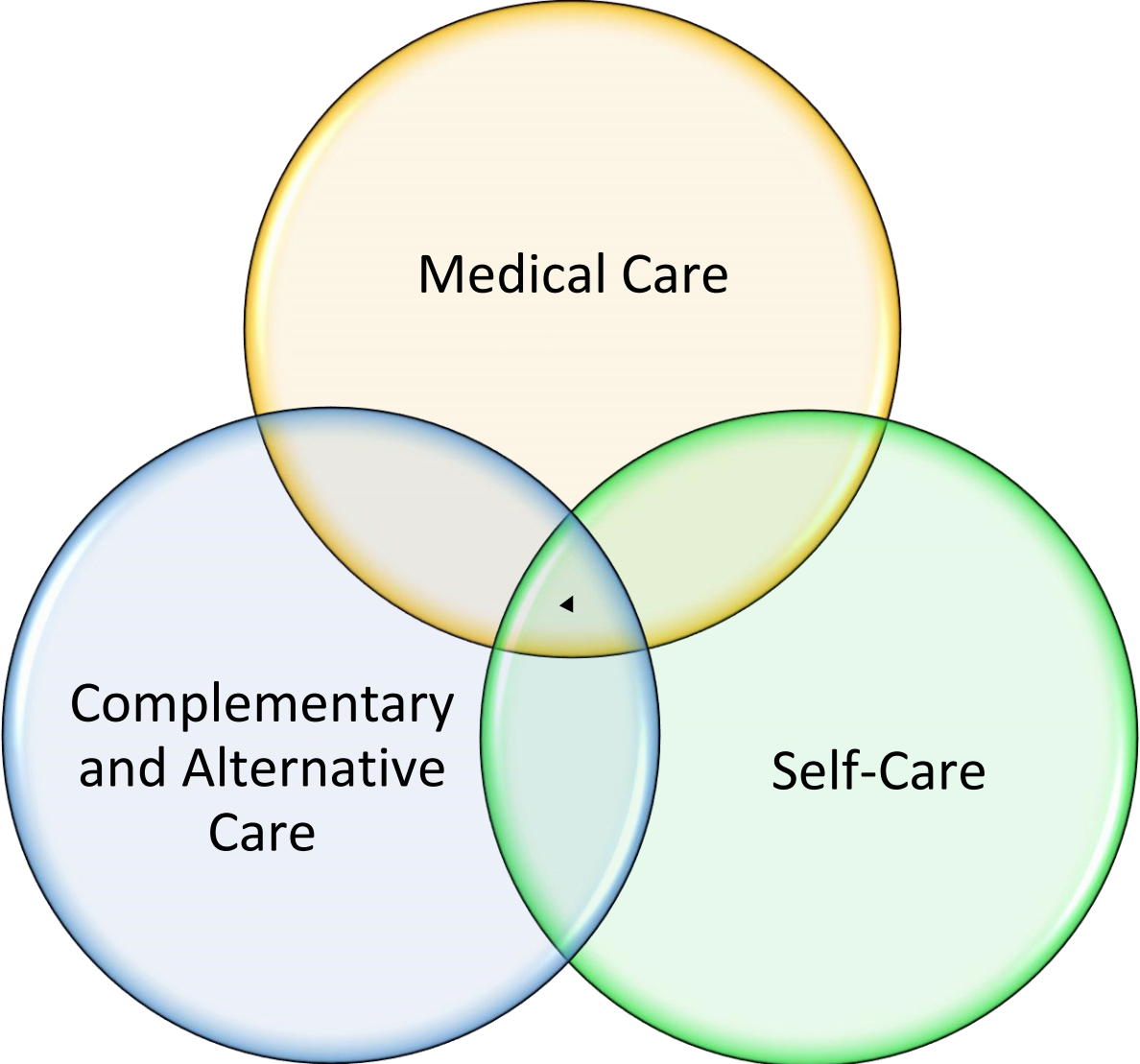


Ecological Mindset
Whole People and Communities

WHERE HEALTH REALLY COMES FROM



Source: McGinnis JM, Williams-Russo P, Knickman JR. The Case For More Active Policy Attention To Health Promotion. *Health Aff (Millwood)*. 2002 Mar-Apr;21(2):78-93. doi: 10.1377/hlthaff.21.2.78



WHAT MATTERS?

What's the matter?

HOPE

- HEALING
- ORIENTED
- PRACTICES
- ENVIRONMENTS



COMPLEMENTARY

Makes use of unconventional treatment modalities and approaches that are nonsurgical and nonpharmaceutical but with known efficacy

When combined with mainstream care, they can enhance effectiveness and reduce adverse symptoms.

ALTERNATIVE

Offered instead of mainstream care

Unproven

Disproven

針灸

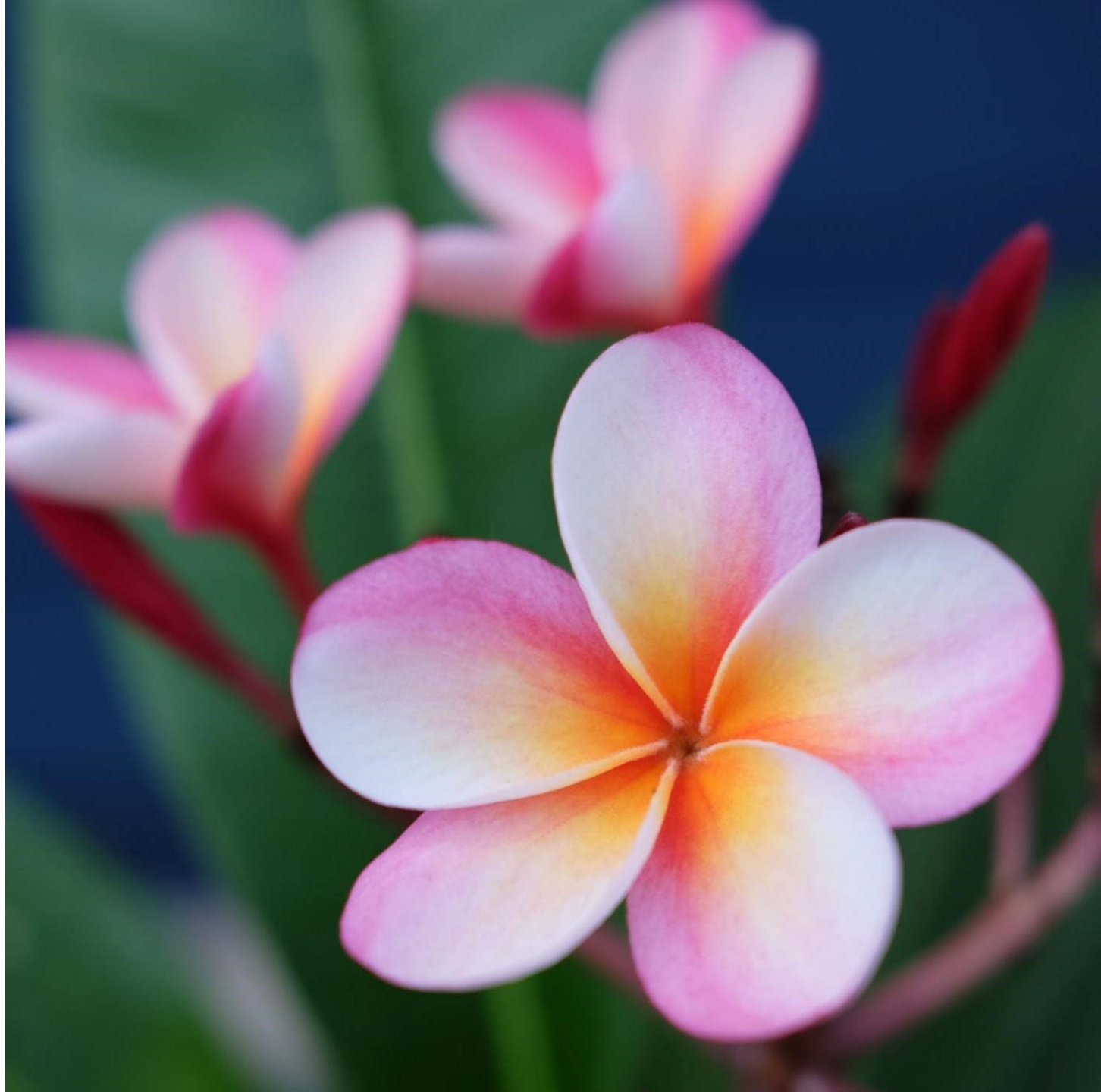
針灸



ACUPUNCTURE

ACUPUNCTURE

- Systemic reviews and meta-analyses have examined the effect of acupuncture on a variety of pain conditions. Most suggest that acupuncture is significantly better than both sham acupuncture and standard care for some but not all types of chronic pain. In some cases, the effect of acupuncture can last up to six to 12 months. *BMJ* 2017;357:j1284
- Acupuncture was significantly better than both sham acupuncture and usual care for chronic pain (neck and low back, knee osteoarthritis, headache, migraine) and was cost effective.
- Numerous studies show decreases in frequency, intensity, duration and increases in quality of life for individuals with chronic headache



Touch Therapies

MASSAGE

REFLEXOLOGY

HEALING TOUCH

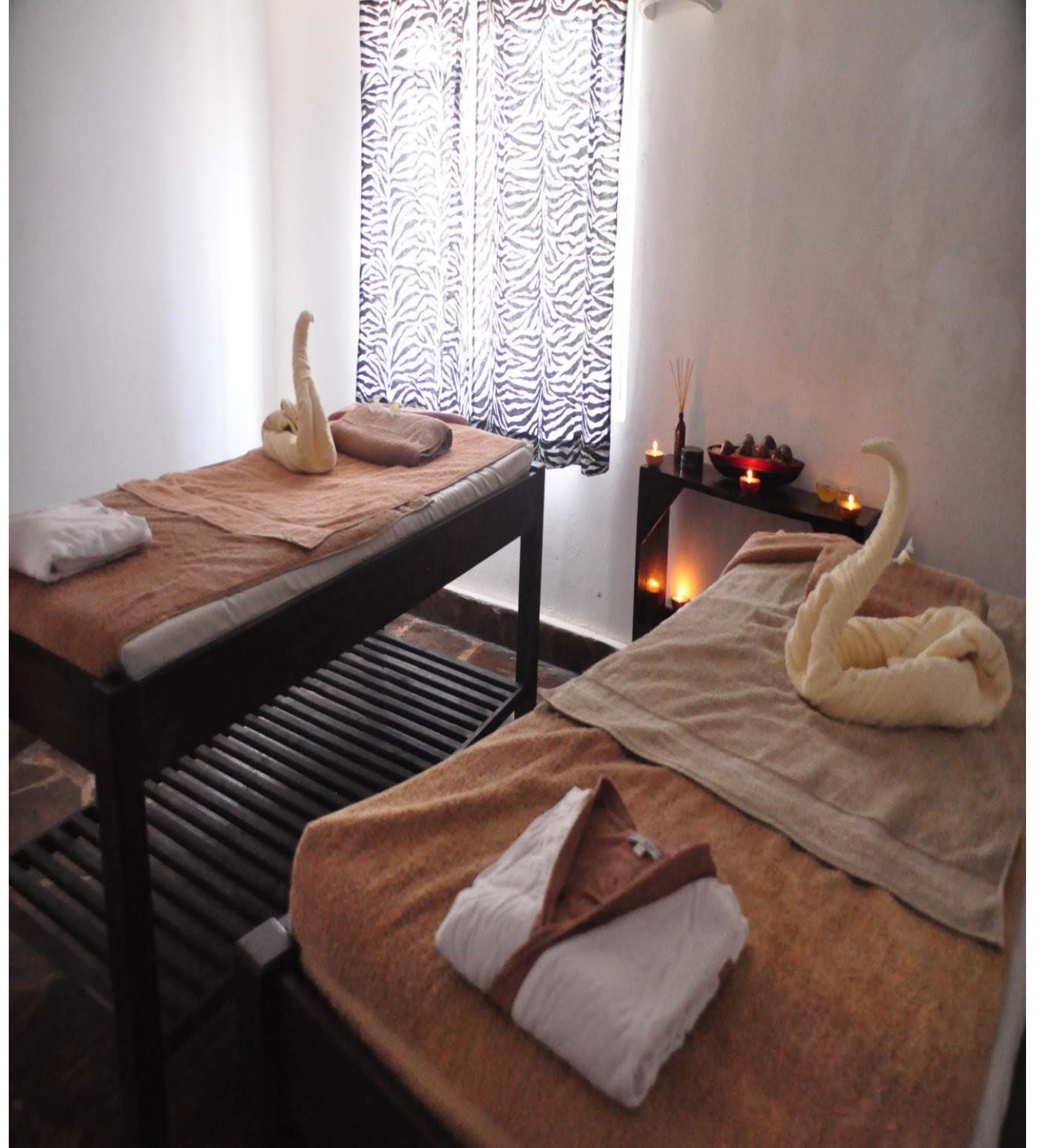
FELDENKRAIS

MASSAGE

Effective in low back pain, headache, anxiety and depression.



In a systematic review and meta-analysis results of 67 studies, massage therapy compared to sham, no treatment and active comparators demonstrated efficacy in decreasing self-reported pain . Compared to active comparators, massage therapy was also beneficial for treating anxiety and health-related quality of life. ([Pain Med.](#) 2016 Jul; 17(7): 1353–1375).



A serene spa-themed background image. On the left, four smooth, stacked stones are arranged vertically. To their right is a single white orchid flower. In the center, a large, rolled-up white towel is visible. At the bottom, a row of six lit tealight candles sits on a dark wooden surface, casting a warm glow. The overall lighting is soft and dim, creating a relaxing atmosphere.

PART OF MULTIMODALITY
THERAPY FOR PATIENTS
EXPERIENCING ANXIETY
OR PAIN 1C



MIND BODY PRACTICES

- The largest study so far investigating Mind Body Stress Reduction and Cognitive Behavioral Therapy resulted in significantly greater improvement in back pain and functional limitations at 26 and 52 weeks compared with usual care.

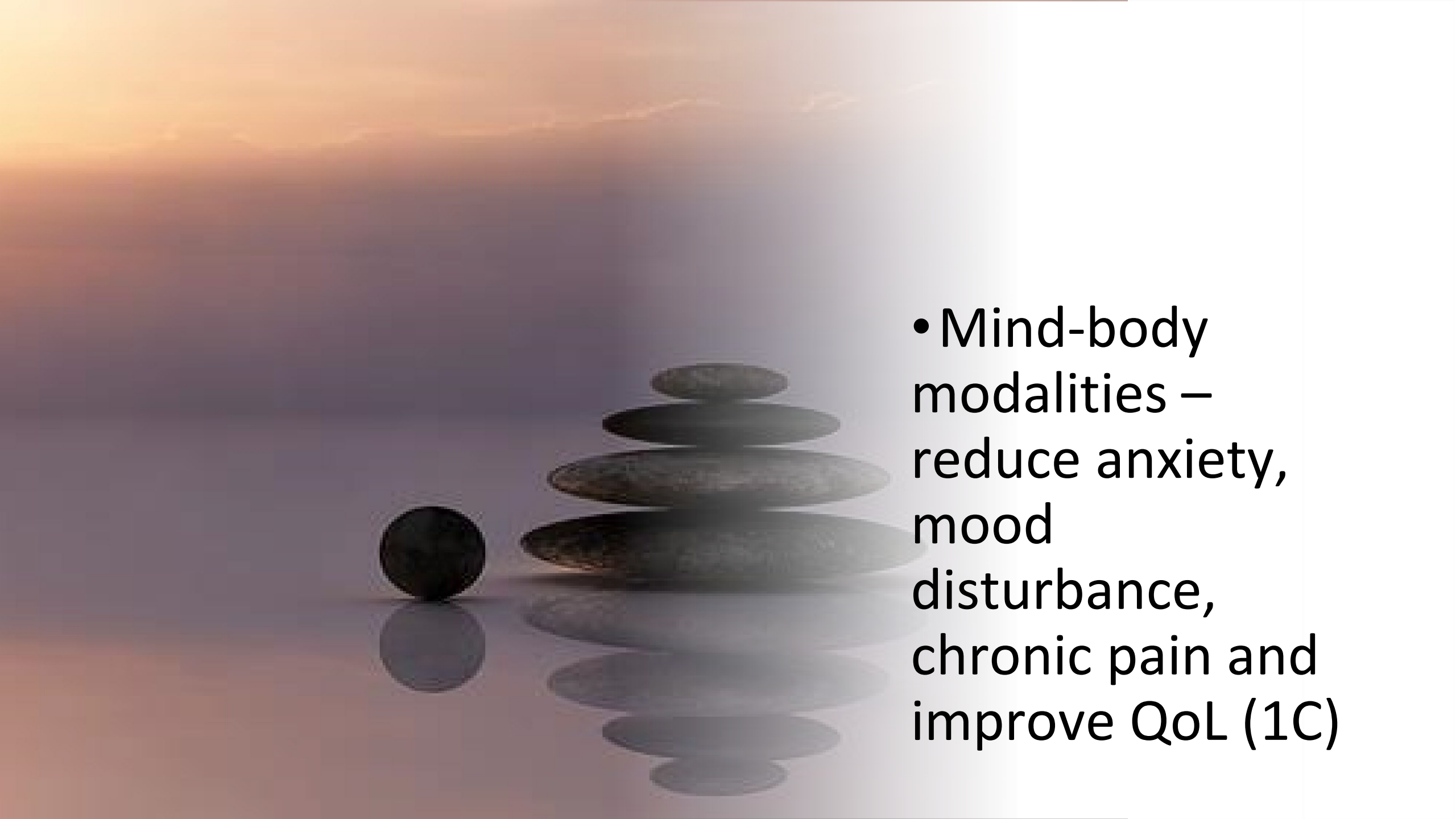
(JAMA2016;357:1240-9.)

- Randomized 342 patients to the MBSR program, time equivalent cognitive behavioral therapy (CBT), or usual care.
- Clinically meaningful improvement in disability and function was achieved in 60.5% with MBSR, 57.7% with CBT, and 44.1% with usual care
- These benefits were achieved even though only about 50% of patients attended at least six of the eight treatment sessions.

BMJ 2017;357:j1284

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- 
- A stack of five smooth, dark stones is arranged on a reflective surface. To the left of the stack is a single, dark, spherical stone. The background is a soft, hazy sunset or sunrise sky with warm orange and yellow tones. The stones and the sphere are reflected on the surface below them.
- Mind-body modalities – reduce anxiety, mood disturbance, chronic pain and improve QoL (1C)

Other MB practices

- Hypnosis
- Relaxation techniques
- Biofeedback
- Guided imagery
- Yoga
- Tai chi



Support groups,
CBT, CB
stressmanagement
to reduce anxiety,
mood disturbance,
chronic pain and
improve QoL (1A)



SUPPORT GROUPS AND SURVIVORSHIP

- One study showed that at 10 years women with metastatic breast cancer who participated in a support group lived twice as long as controls.¹¹
- Other studies have been mixed.
- Not controversial is that support groups improve
 - QoL
 - coping skill
 - immune function
 - outlook on life

A blue-tinted X-ray of a human upper body, showing the skull, neck, shoulder, and ribcage. The image is semi-transparent, allowing the underlying text to be visible.

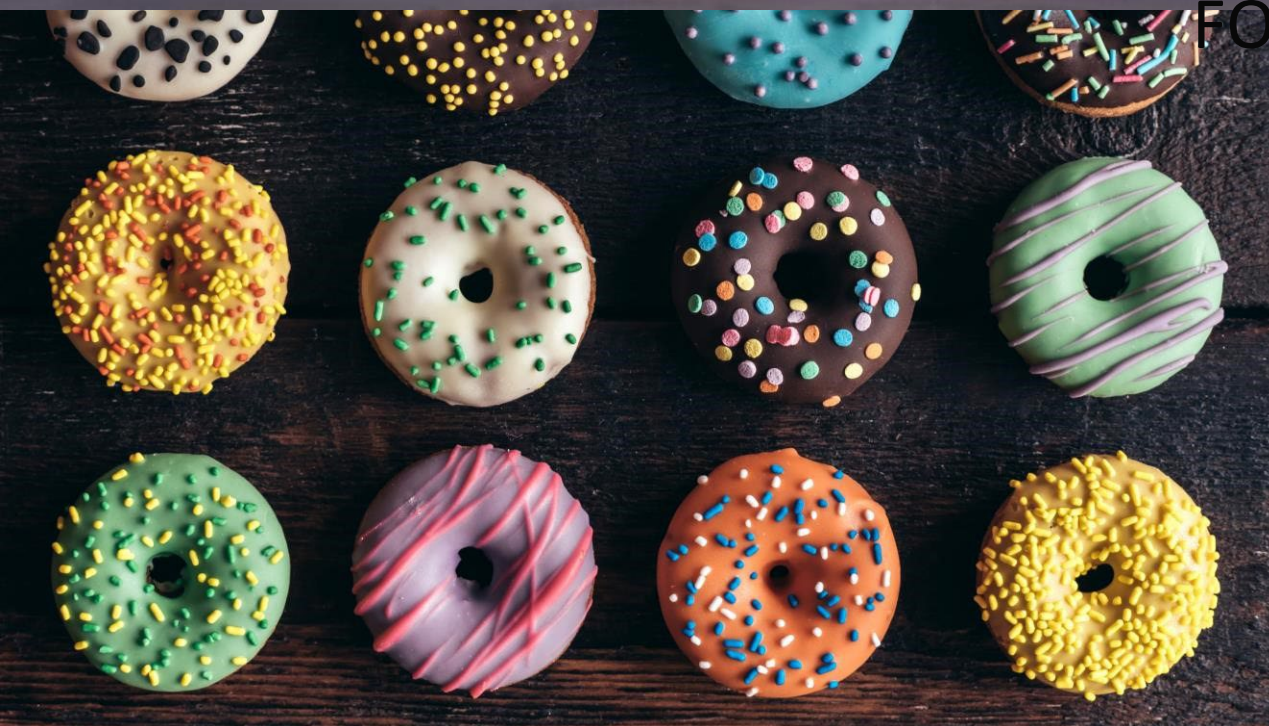
Chiropractic



- For patients with chronic low back pain, ACP recommends that physicians and patients initially select non-drug therapy with exercise, multidisciplinary rehabilitation, acupuncture, mindfulness-based stress reduction, tai chi, yoga, motor control exercise (MCE), progressive relaxation, electromyography biofeedback, low level laser therapy, operant therapy, cognitive behavioral therapy, or spinal manipulation.



FOOD



MEDITERRANEAN DIET

Population studies exist with regards to an actual link between MD regime and lower incidence of non-communicable diseases and mortality. ([Biomedicines](#). 2020 Jul; 8(7): 201).

In fibromyalgia and generalized chronic musculoskeletal pain, pain and functional deficit are alleviated by a plant-based low fat diet or a vegan diet, also positively affecting inflammatory biomarkers ([Nutrients](#). 2020 Sep; 12(9): 2510).



World Cancer Research Fund/American Institute for Cancer Research Report¹³

- Be as lean as possible
- Physical activity 30min/day
- Avoid sugary and processed foods
- Whole foods diet
- Limit red and processed meats
- Limit ETOH
- Limit processed salty foods

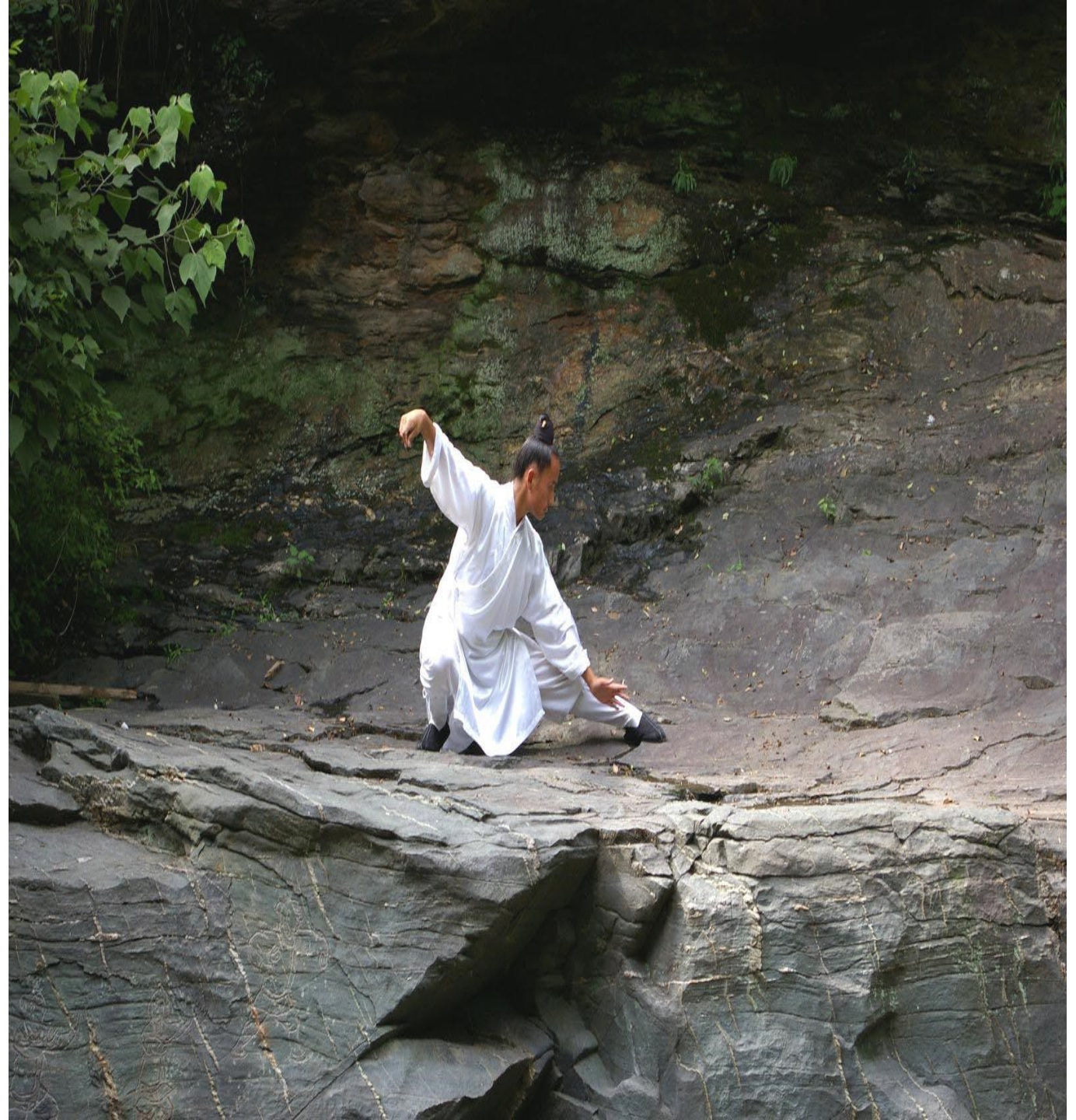




PHYSICAL ACTIVITY

EXERCISE

“Chronic pain patients may be more successful when they can self-select a lower exercise intensity than standard guidance suggests. Chronic pain patients vary greatly in their abilities and limitations, goals and lifestyle, and appear to have greater success from guidance that is tailored to their specific needs, hindering the development of strict guidelines specific to chronic pain; nevertheless, daily activity should be encouraged, even if the intensity is low and duration is short.” (Ambrose KR, Golightly YM. Physical exercise as non-pharmacological treatment of chronic pain: Why and when. *Best Pract Res Clin Rheumatol*. 2015;29(1):120-130. doi:10.1016/j.berh.2015.04.022).



A close-up photograph of a vast field of small, delicate flowers. The flowers are primarily light blue and white, with some showing darker blue centers. They are densely packed and fill the entire frame. The background is a soft, out-of-focus expanse of the same flowers, creating a sense of depth and a dreamy atmosphere. The lighting is bright and even, highlighting the textures of the petals and the green stems.

DrWayneJonas.com/HOPE




Lauri Medina MD FACS ABOIM

Medical Director

Center for Life UNMMG

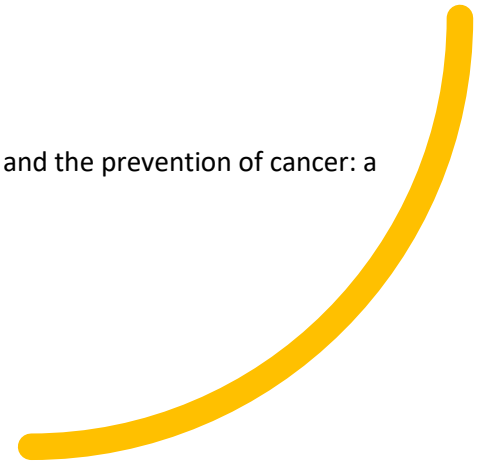
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Integrative Medicine

Using Evidence Based Complimentary and
Allopathic Modalities to Optimize Well-Being

Joshua Sinberg, D.C.

Introduction and Background

Basic Facts on Spinal Pain

- Low back pain has been the leading cause of years lived with disability since 1990 and remains a significant global public health concern
- Prevalence of low back pain is about 7.5% of the global population at any given point.
- Low back pain is not usually associated with a specific identifiable pathoanatomical cause. 85-95% of people presenting to primary care providers do not have an identifiable pathoanatomical origin for their pain
- Low back pain is the leading cause of global disability. Disability from LBP has increased in all age groups between 1990 and 2019. Age 50-54 was the largest group
- Factors associated with LBP and disability include: old age, poor general health, socioeconomic deprivation, income, occupational factors, psychological stressors

Basic Facts Continued

Source: International Association For the Study of Pain

University Washington School of Medicine Institute for Health Metrics

- 2016 data shows that low back and neck pain generated the highest expenditures at \$134.5 Billion. Diabetes \$112.1 B, Heart Disease \$89.3B
- Overall MSK disorders expenditure was estimated \$380B

American Chiropractic Association

- Leading cause of disability worldwide.
- One of leading causes of missed work. 50% of all working Americans admit to having back pain symptoms each year
- 264 million lost work days annually
- 80% of the population will experience back pain at some point in their lives

The Role of Chiropractic in NMSK Conditions

- Primary care / portal of entry for NMSK conditions of the spine, but not limited to the spine
- Chiropractic training is a 4 year doctorate program with intensive training in basic sciences, anatomy and physiology, neurology, physical examination, pathology, biomechanics, radiology, physical medicine and rehabilitation, diverse manipulation techniques of the spine and extremities, and soft tissue treatment techniques
- Rigorous National Board of Chiropractic Examiners certifications during training and upon completion
- Recognized in all 50 states and US Territories. Recognized with all commercial insurance carriers and Medicare.

The Role of Chiropractic in NMSK Conditions (continued)

- Increasing utilization of Chiropractic in the US Military
Source: **Chiropractic & Manual Therapies** “*Chiropractic Services in the Active Duty Military Setting: A Scoping Review*” July 2019
- 497 peer reviewed papers in this study were analyzed
- **American Chiropractic Association** (Jan 10, 2022) reports that under the National Defense Authorization Act, there is language in the legislation for expansion of chiropractic services for civilian members of the DoD under Tricare.
- **American College of Physicians** issued updated guidelines in 2017 for treating low back pain. Their recommendations include spinal manipulation, massage, acupuncture for both acute and sub-acute LBP. Chronic LBP included the same modalities but also non-drug therapy such as exercise, multidisciplinary rehab, stress reduction, tai-chi, yoga, low level laser therapy, CBT, and more. Drug therapies should be used as a last resort with NSAIDs first, tramadol and duloxetine as second resort, and opioids as an absolute last resort. Interestingly, steroids were not recommended.
- **Rand Corporation** has done extensive research and peer reviewed publication for decades on the role and effectiveness of chiropractic for neck and low back pain. Their website can easily be accessed for comprehensive literature searches
- **National Center for Complimentary and Integrative Health / NIH.** Comprehensive information and research on spinal manipulation for spinal pain issues. It is a recommended treatment by the researchers at the NIH

The Role of Chiropractic in NMSK Conditions (continued)

- **Consumer Reports**, May 2017. “New Thinking on How to Relieve Back Pain” Recent Research has turned some medical advice on its head: Hands-on methods are preferred over drugs or surgery”
- Their recommendations mirror those of the ACP. Yoga, Tai-Chi, Massage, Spinal Manipulation, PT, Acupuncture
- **Harvard Health Publishing / Harvard Medical School**. February 15, 2021. “Chiropractic care for Pain Relief: Spinal Manipulation Primary Therapy, but Treatment Options are Expanding”
- **Pubmed: 8954 citations for peer-reviewed literature regarding chiropractic manipulation**
- Chiropractic continues to find its way into the mainstream discussion and perhaps further with the treatment of many forms of spinal pain. It should be considered the primary choice for the conservative management of back pain along with other treatment options mentioned

Some Common Conditions that I treat

- Cervicogenic headache, Cervicogenic vertigo, myofascial / tension headache, TMJ disorder, Complex Regional Pain Syndrome (Type1), Cervicalgia from DDD & DJD, Cervical Radiculopathy, Thoracic Outlet Syndrome, Frozen Shoulder, Elbow pain from tendinitis, hand and wrist pain, myofascial pain syndromes
- Thoracic spine and rib pain. Myofascial pain, scapulo-thoracic pain
- Lumbar spine pain both acute and chronic, correction of functional leg length disorders, myofascial pain, sacroiliac joint dysfunction, lumbar radiculopathy and pseudo-radiculopathy
- Hip and Knee pain, plantar fasciitis, metatarsalgia, Hallux Limitus / Rigidus, Pes Planus / foot and ankle hyper pronation (corrective biomechanical foot orthotics)

My Clinical Approach to Care

- Detailed case history, review of medical records, review of imaging studies, chiropractic physical exam that includes posture, motion palpation, assessment of soft tissue and joint mobility, basic orthopedic and neurologic exam techniques, biomechanical assessment of foot alignment and for pelvic symmetry from the ground up
- Order necessary lab tests, imaging studies, and make specialist referrals when indicated, establish rapport with patients' other medical providers for optimal communication
- Determine if the patient's condition is indicated for CMT / CAM Therapies
- Devise treatment plan based on each patient's unique findings and clinical baselines. Clinical nutrition and diet is woven into most patient discussions

My Clinical Approach to Care

- Myofascial therapy and stretching techniques that include varied forms of soft tissue approaches for NMSK conditions
- Diverse manipulation techniques that range from gentle joint mobilization approaches to high velocity grade IV
- Mechanotherapy devices that help treat fibrosis of the soft tissues and spine
- Extremity manipulation
- Low Level Laser Therapy
- Segmental traction

Integrative Medicine and ID / DD

- Interesting topic to consider because of the incredible diversity of individuals, ages, degrees of involvement, tolerance of medical care
- Scarcity of research but certainly worth investigation and attempts by the staff at CFL to see how this population can benefit. Done on a case-by-case basis depending on the patient.
- What are the biggest needs ? What gaps in care are not being met ?
- What does the CoC team hear and see from these individuals, their care providers, families?
- What health goals would hopefully be accomplished with IM care at the CFL?

Chiropractic for Cerebral Palsy

- Extensive literature on joint mobilization / soft tissue mobilization to address joint and myofascial contractures. It may not be termed chiropractic, but we are trained and skilled at many forms of manual therapy on the spine and extremities. This is also true of myofascial therapy techniques
- Since CP has many different levels of involvement and complexity, and because it is an upper motor neuron disorder it is not curable. The goal is to help improve tissue function and QOL as much as possible
- More research is certainly indicated and warranted
- **Cerebralpalsy.org:**
- This organization has very detailed information with some of the research and descriptions of how CMT can benefit CP patients

“Although there is little in the way of formal studies on the effects of chiropractic care for use on persons with CP, there are reports in the chiropractic community that purport improvements for the following conditions: Arthritis, back pain, breathing, drooling (release of TMJ muscles, gait patterns, hypertonic musculature, joint pain or stiffness, muscle contractures, neck pain, pain and tension, scoliosis, seizures, sleep difficulties, and other MSK conditions”

Chiropractic for Cerebral Palsy

- <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC5106424/>
- https://chiro.org/Conditions/Cerebral_Palsy.shtml
- These hyperlinks direct to the available papers but there is need for more research.
- With respect to chiropractic manipulation there are thousands of studies for spinal manipulation but for not for specific diseases with comorbidities and disorders that fall under ID and DD. To provide noninvasive and non or even less pharmacologic pain relief to patients with NMSK pain has clinical merit. It is worth trying and worth investigating with the team at CFL. If IM treatments can help improve QOL, reduce stress, and reduce some of the burdens that these individuals and their families face, it is a net positive.

Additional Points to Consider

- The hope would be that by matching the right ID /DD patient with the right providers and with correctly selected modalities, there would be reductions in pain issues, a need for less medication, less emotional and psychological distress, improvements in diet and nutrition, and perhaps lower medical costs. There might also be ancillary benefits for family members tasked with caring for their loved ones
- The same goals for the ID/ DD population as with the general population. It is worth pursuing. Having a structured, integrated approach that the CFL can uniquely offer under one roof is far more ideal than trying to piecemeal these therapies across the greater ABQ environment at numerous offices

Chris M.

- Early in my career, I treated a young man severely impacted with Mixed Type CP who was 18 when his parents brought him to my office. He was confined to a wheelchair, and he was mostly able to use a hand control for the WC. He was mostly aphasic but could make facial expressions and utter a few monosyllabic words. He drooled quite a bit. He was either grade IV or a V on the GMFCS scale which put him as severely impacted as it can be.
- He had severe scoliosis and subsequent Harrington rod and pedicle screw surgery when he was 15 or 16 from T1 through his lumbar spine. He required 24/7/365 care by his parents, and he was as involved a patient as I have ever seen
- He had a great deal of agitation and became very vocal by grunting when he was in pain or was uncomfortable
- Many spastic adhesions throughout all 4 limbs and tremendous myofascial adhesions/ scar tissue throughout his entire posterior chain.

Chris M.

- Given the complexity of this young man's health, major spinal fusion, and mostly non-verbal means of communicating, one would not necessarily think that chiropractic care could help or would even be indicated.
- His parents were desperate to try anything that could help make him more comfortable, and perhaps them as well.
- We had to lift him from his wheelchair and get him positioned on my treatment table which was quite a process. His contractures and being wheelchair bound left him in near constant discomfort or pain. This was hard to quantify, and our communications were mostly through eye contact and by palpation of his body.
- I did a tremendous amount of myofascial therapy, instrument assisted percussion-based manipulation, stretching, and joint mobilization of all four limbs.
- He would let out groans of satisfaction and would smile and laugh whenever we worked together. It was obvious he greatly enjoyed the treatments and the stress relief for his parents cannot be overstated. We worked together twice weekly for 2.5 years and to this day it has been among the most memorable and meaningful patient experiences of my career.

Other Conditions

- AUTISM / ASD

[Journal of Clinical Chiropractic Pediatrics : Editorial \(jccponline.com\)](http://jccponline.com)

[A systematic review of the literature on the chiropractic care of patients with autism spectrum disorder - PubMed \(nih.gov\)](http://pubmed.ncbi.nlm.nih.gov/)

[Massage therapy for children with autism spectrum disorders: a systematic review - PubMed \(nih.gov\)](http://pubmed.ncbi.nlm.nih.gov/)

[The Efficacy and Safety of Acupuncture for the Treatment of Children with Autism Spectrum Disorder: A Systematic Review and Meta-Analysis - PubMed \(nih.gov\)](http://pubmed.ncbi.nlm.nih.gov/)

Takeaways: While there have been many studies done with CAM therapies, the conclusions are similar in that results are inconclusive, and that further research is warranted. There are countless non peer reviewed websites and different organizations that list anecdotal benefits to CAM therapies. Many practitioners in our field have treated individuals across the ID / DD spectrum of disorders and I can add my name to this also.

Many therapies may not have the level I, peer reviewed data for IM / CAM therapies in the ID / DD population but they suffer with many of the same problems as the general population. Maybe they suffer a bit differently and convey it differently, but it is worth exploration at the CFL. The team of providers from medical doctors, chiropractors, acupuncturists, and massage therapists, working together can provide more options.

Continued

- I speak from over 15 years of clinical experience of treating complex patients with many co-morbidities that IM and CAM therapies provide far better benefits when done in some combination than as stand-alone modalities.
- **It should also be stressed that we do not treat ASD or CP...or ID, but rather we treat the person with ASD or CP, or ID. We cannot cure these disorders, but we can help improve pain, improve QOL, help improve stress and distress, and hopefully find more non pharmacologic or noninvasive ways of helping these individuals.**
- I spoke with a patient of mine who is a psychotherapist that works extensively with ID and DD patients, and she plainly said “ They have problems just like the rest of us!”
- I think this was helpful to me as I attempted to put my presentation together for the CoC on a difficult at first topic, but in practicality, may not be as difficult as it would appear. We will not know unless we try!

Q & A

- How can I be of service to your group ?
- What questions do you have for me about Chiropractic?
- If you would like to contact me prior to my start date at the CFL, in early June, or perhaps sooner if my onboarding is completed, I can be reached at:

email: drjosh@bluelotussantafe.com

Phone: 505-986-9109

Thank you very much to Christine Wester, my soon to be new colleagues at the CFL, and to Dr. Medina for allowing me to be here today. I hope to see you soon.