

Langford Chiropractic Clinic Newsletter,

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Scoliosis and the Child's Spine

by Dr. Anne Langford

Scoliosis is defined as an abnormal curvature of the spine greater than ten degrees in the sideways or coronal plane. Since scoliosis is a physical finding and does not represent a diagnosis, its cause should be investigated in all cases and its classification established prior to the commencement of any treatment program.

Scoliosis Screening

Scoliosis can be readily detected during a thorough physical examination and many cases of scoliosis are found during routine spinal screenings. Scoliosis screening is such an effective process for locating previously unidentified cases of scoliosis that screenings are becoming a common occurrence in schools. Many school screenings are now carried out by local chiropractors.

Examination of a patient for scoliosis requires undressing and careful examination of the entire spine. A scoliosis which is evident with the patient in the standing position, but which disappears when the patient sits, is most commonly classified as functional scoliosis. A scoliosis which is evident in the standing position and persists with the patient in the forward bending position is most likely a structural scoliosis. The forward bending test is performed by having the patient flex forward at the waist to 90 degrees with the hands clasped together in front. With the patient in this forward bent position, alignment of the ribs and spinous processes should be evaluated. If a distortion is detected, such as a unilateral rib hump, prominent scapular or obvious deviation of the spine to one side, then x-ray films should be obtained.

X-Ray Evaluation

Any patient who has the signs of apparent scoliosis should have their spine x-rayed to determine the extent of the scoliosis. Scoliosis is evaluated using the following criteria: the angle of the scoliosis, the side to which the curve deviates, the upper and lower vertebrae, which part of the curve, and the apex vertebra, i.e. the vertebra which is furthest from the spinal midline. Evaluation of any spinal curvature detected on an x-ray film should be made to determine the extent of the curvature.

Functional Scoliosis

The patient with suspected functional scoliosis should be evaluated for leg length inequality or pelvic distortion. A scoliosis which disappears when the patient bends forward at the waist is classified as a functional scoliosis. Frequently, these scolioses can be corrected by spinal pelvic adjusting.

Congenital Scoliosis

Congenital scoliosis is associated with failure of appropriate formation of the spine during embryological development. It may be due to specific vertebral anomalies, such as hemivertebrae, or to failure of proper segmentation of the vertebral structures. Congenital scoliosis frequently presents concurrently with other developmental anomalies such as genitourinary anomalies, cardiac anomalies and spinal cord tethering. The goal of any management program is to prevent the progression of the scoliosis. Classically, bracing has been the method of choice to prevent further progression of the curve. Initially, watching and evaluating the curve, especially small ones, may be appropriate. Also curves may be nonprogressive but this can only be determined by evaluation over a period of 6 to 12 months.

Idiopathic Scoliosis

The most common form of scoliosis is idiopathic scoliosis, which means scoliosis of unknown origin. Idiopathic scoliosis has no associated back pain; therefore, any young patient who presents with scoliosis accompanied by associated back pain should be evaluated carefully for an alternative cause for their complaint.

Idiopathic scoliosis is the most common classification of scoliosis and is a classification which is reserved for those scolioses which cannot be classified into any other category. Idiopathic scoliosis may therefore be considered to be a diagnosis of exclusion. It is more common in females and tends to progress more rapidly during an adolescent growth spurt. Scoliotic curvatures which are less than 25 degrees can be safely treated in a chiropractor's office, without referral for orthopedic opinion. Once the curvature reaches or exceeds 25 degrees, the patient should be referred for a second opinion.

Neuromuscular Scoliosis

Scoliosis associated with neuromuscular disorders, e.g. cerebral palsy, tend to be progressive and usually require bracing to minimize deterioration.

Back Pain

by **Dr. Heather Karls**

Did you know that back pain is the second most common reason for doctor visits and the number one reason people see neurosurgeons and orthopedists? The cost of low back pain in the US (work loss, disability payments, health care costs) exceeds 50 billion dollars.

The most important component contributing to back pain is joint dysfunction. This is the aberrant or improper movement of one or more of the joints of the spine. Many things can cause this dysfunction. It can be due to repetitive forces acting on the vertebrae, such as sitting at a desk all day long, or lifting and loading trucks. It can also be caused by acute trauma such as a car accident or falling off of a ladder. Often times our office is consulted when the pain is almost unbearable. The best time to call our office is before the pain comes on. This can be done through regular check-ups and "wellness care". Many patients are able to stay pain free this way. Unfortunately we also see people who have waited a while -- maybe they took some pain medication and the pain is not going away or is getting worse. These are often people who have

avoided movement and were prescribed bed rest. This will actually harm you by increasing the severity and duration of the back pain.

So, what should you do then? First, call us. Get adjusted. Follow the recommendations that Dr. Langford and I give you. As you know, it is easy to follow instructions when you are in pain and harder to do the heat-ice routine and neutral position exercises when you are feeling better. But that is when our recommendations are most important. Our goal is to keep you feeling your best. If you have any questions on what you can do to prevent future back problems, please call us. On another note, now is the time to buy zinc lozenges—before you get sick.

Knowing Your Insurance Benefits

by Barb La Motte

Would you know what to do if you were injured at work? You are entitled to workers' compensation benefits if you are injured as a result of performing your normal work duties or duties specifically authorized by your employer, either at your normal work location, or at a location where you are authorized to be by your employer. Example: your employer requires you to go to the post office and you are involved in an auto accident. There are of course exceptions to this description. If you have an injury under the above conditions, you must report the injury to your employer. Under Minnesota Statute 176.141, an employee is supposed to provide his employer with notice of the injury within 14 days after the the injury occurs. After you notify your employer of an injury, they should provide you with a first report of injury form to fill out. If they don't provide this form make them find one. Also, make sure to get a copy of the report so you have proof of when you filed your claim in case anything happens.

When you call to make your first appointment, make sure to let us know that you have a new injury, even if your injury is in the same area as a previous condition. We need to document the new injury and you need to fill out new forms. You should give your employer one week in which to file your injury with your employer's workers' compensation carrier. If this is done correctly, you will be given a claim number, the name of an adjuster, and a claim address for your injury which you need to give to us so that we can file your claims. If you do not receive a claim number within two weeks of your injury, you must follow up with your employer.

Make sure that your injury was filed with the work comp carrier. If it was and your employer doesn't know what to do for you next, ask your employer for their workers' compensation carrier's name, address and phone number. By federal law this information must be posted somewhere in your workplace -- if it isn't ask your employer. If there is ever anything about your case that causes a problem either with payment or denial, it is always best to hire an attorney. Attorneys know the law and are the best at helping you decide what to do next.

Tip of the Month:

Always write down names and numbers of the people you speak to about your case and get copies of all information that you fill out regarding your case.

Depression: Exercise better than Medication

by Dr. Heather Karls

Scientists from Duke University Medical Center recently compared an exercise regimen to a popular drug (Zoloft) for treatment of depression. This study was a follow-up to a previous four-month study that found little difference between the two types of treatment. The objective in the latter study was to determine long-term outcomes. The patients were checked 10 months after the beginning of the first study. The researchers found that among the exercise only group, only eight percent experienced a return of symptoms. In the medication only group, the percentage was 38. In the group that exercised and took the medication, the relapse rate was 31 percent.

The researchers have no explanation for why exercise produced better results, or why those on the combination exercise and medication regimen did so poorly. The exercise employed was a brisk 30- minute workout plus a warm up and cool-down period three times per week.

This research was found in the journal of Psychosomatic Medicine, October 2000.

Sydney

by Larry Foss, CMT

As many of you know, my name is Larry Foss and I am one of the massage therapists here at Langford Chiropractic. I am also a massage therapist for the U.S. Olympic Cycling team and I am finally back at the clinic following the 2000 Olympic Games in Sydney, Australia.

My trip for the Olympics started in August with training camp at the Olympic Training Center in Colorado Springs, Colorado and then we were sent to San Diego, California. In San Diego, we received our Olympic clothing and briefing about the Olympic Games. The following day we flew to Sydney for our final preparations for the competitions. Before the games began, my days consisted of morning workouts, that I attended, and then afternoon massages of the athletes. The electricity in Sydney was one of the most incredible things I have experienced in my life. The athletes village had 10,000 athletes from all over the world. It was a small city with everything you could imagine: discos, restaurants, hair salons, arcades. Riding the bus in the village was very funny because there were so many languages being spoken that it made your head spin. At the competition one of our athletes won a gold medal in the Match Sprint event, which is where two cyclists compete in a 300 yard sprint race around a circular track for placement. The celebration afterwards was incredible, with great food and champagne, and I actually got to hold an Olympic Medal in my hands. That is something I will remember for the rest of my life.

Now with the Olympics over, I plan on spending more time at home and at the clinic. I have enjoyed the experience and wouldn't trade it for anything. After spending two years on the road, I am now ready to stay put for awhile and look forward to seeing old clients and welcome new ones.

Interns' Corner

by Lori Pottebaum

Hello again. Over the past seven months I have had the pleasure of meeting most of you. Thank you all for giving me the opportunity to learn and grow during my internship.

As of yet, I have not decided where I will be doing my T10 internship I do know that I will be somewhere in the Twin Cities area because this is where I ultimately want to practice after graduation in April. There are still so many decisions to be made. YIKES!!

In case I don't see you before the holidays, I wish you all a very happy and healthy holiday season.

by Sarah Dingman

I have been at Langford Chiropractic for two months now. I have gained a wealth of knowledge in the field of chiropractic, especially in pediatrics and women's' health. The staff has been very helpful and a lot of fun. I have learned a lot from the patients as well.

I am from Haslett, Michigan (near Lansing) and plan to either go back there or stay here for my T10 internship