

# Langford Chiropractic Clinic Newsletter,

## March 2002

### A Child's First Spinal Exam

by Dr. Anne Langford

When is it time for a child's first spinal examination?

Should we wait until children complain of a backache before taking them to the chiropractor?

These are two questions which parents frequently ask of their chiropractor. Throughout most communities it is a well-accepted fact that children should have regular dental check-ups to identify problems at the earliest possible time. In this way, dentists attempt to identify early tooth decay and alignment problems of the teeth. They know that the earlier the problem is detected the easier it will be to fix.

Well what about the potential for children to develop spinal problems? Should children be examined at regular intervals during their growing years to identify spinal problems which may progress to become serious, permanent problems? Unfortunately, the generally accepted view in most communities is that one visits a chiropractor for backache or neck pain, and in the absence of these symptoms, it can be assumed that the spine is doing okay. When evaluating the spines of adult patients, chiropractors frequently encounter degenerative changes in discs and vertebral joint structures which have been ongoing for many years, without any evidence of symptoms. In many cases, it is only when spinal degeneration reaches an advanced stage that symptoms of pain and stiffness occur. If the spinal problem causing these symptoms could have been detected at an early age, and the problem had been corrected, then a lifetime of misery due to chronic back pain could have been avoided.

Many of the worst spinal problems, which chiropractors detect on x-ray, show evidence of having been present for many years and can be identified, by the degree of degeneration, as having started during childhood. For this reason, it is recommended that a child's first spinal evaluation should be early in life when the spine is growing and developing at the fastest rate. Orthopedists have identified that the time when the spine is most likely to develop problems, or for existing problems to worsen, is during periods of rapid growth.

Examination of growth patterns of a child's spine shows that the time of fastest spinal growth is during the first year of life, when the average length of the spine grows from 24 to 36 cm. This is a 50 percent increase in one year, a rate which is unmatched in any other phase of a child's growth and development. The next fastest growth rate occurs between the ages of one and five years when the spinal length increases from 36 to 51 cm, a 42 percent growth rate. Between the ages of 5 and 10, we see the slowest period of growth, 10 cm in five years, or a 20 percent growth rate.

The adolescent growth phase is most notable for its growth spurts, when a teenager may grow three to four inches in less than a year. The average total growth for the adolescent period is 20 cm in males and 15 cm in females, which represents a growth rate of 25 percent in females and 33 percent in males.

Now, taking all that into consideration, it can be seen that the period of fastest growth is the first year of life. The first year is also a period of considerable trauma when most children are learning to walk. This phase of a child's development is also the period when the secondary spinal curves are forming in the child's neck and low back. Because the first year of life is such an important one for spinal development, and because the potential for trauma is high, it is recommended that a child's first spinal evaluation be performed during this period. Beyond the first year, the child needs regular check-ups to ensure that the micro-trauma of a child's daily living, such as "rough-house" play and falls from bicycles, etc., are not causing spinal problems, problems which might otherwise go unnoticed simply because the child does not complain of symptoms.

Spinal growth and development continues right through and until the mid-30's when the development of the vertebrae in the lumbar spine is finally complete.

When we plant a tree in the garden, we stake and tie it to ensure that it grows straight during its early years. If we don't do this, and the tree is allowed to bend with the wind for 10 to 15 years then it is impossible to straighten.

Don't let your child's spine develop like an un staked tree. You don't wait until your children complain of a toothache before taking them to the dentist, so why wait until they complain of a backache before having their spines checked.

## **Osteoarthritis and the Knee**

**by Dr. Anne Langford**

Chronic knee pain is a problem that faces many adults and limits daily routines. Osteoarthritis (OA) is one of the most common causes of knee pain in the older adult. As people age the spongy material that protects the bones from rubbing together called the meniscus (which is made up of cartilage), is slowly lost. As cartilage decreases, the ability of the knee to function is lost leading to joint pain and stiffness, swelling and grinding or popping sensations.

Although OA is a common problem, there has not been a universal treatment. A medical doctor's choice is generally anti-inflammatory medication or a steroid injection into the knee joint. These injections help to decrease pain but destroy the tissues, including cartilage, thus worsening the problem in the long run. If injections fail, the last option is joint replacement. This involves replacing the bones of the knee joint with titanium and teflon. This treatment also helps reduce symptoms of pain, stiffness and swelling, but is costly and painful. Knee replacement is usually reserved for patients over 60 due to a seven to fifteen year life span of the replacement joint.

# Exercises For Pregnancy

by Katie Burns-Ryan, Intern

Congratulations on the upcoming birth of your child! Throughout the next nine months your body will go through many changes. Undoubtedly you will have many questions about those changes. This article is designed to help answer your questions concerned with exercise during pregnancy. The following are recommendations for three different forms of exercise.

1. Stationary cycling 25 minutes three times a week. This is considered one of the safest forms of exercise during pregnancy. Evidence of improved maternal fitness and improved cardiovascular function has been found. However, there has been no evidence that stationary cycling effects the mother's weight gain, weight loss, or the length of labor.
2. Walking 20 minutes three to five times a week. Walking is the least expensive form of exercise and can be done anywhere. Studies show that mothers have reduced physical complaints and improved sense of well being after walking. There has also been data gathered that the birth weight of the child is increased. This data is minimal at best and is still being studied.
3. Pelvic exercises 10 to 15 repetitions three times a day. Pelvic exercises are more commonly known as Kegel exercises. Pelvic muscles are often weakened during pregnancy and childbirth. These weakened muscles may lead to bladder control problems. To obtain maximum benefit from these exercises you must be sure to use the correct muscles. To identify these muscles try to stop urinating while on the toilet. If you can do this you are using the correct muscles. To begin exercising lie down, or sit, comfortably and try to relax your entire belly. When relaxed, squeeze the pelvic muscle and hold for about three seconds, then relax. Do this fifteen times, three times a day. This exercise will help you to have an easier childbirth experience.

# Irritable Bowel Syndrome

by Laura Dronen, D.C.

Irritable Bowel Syndrome (IBS) is a disorder that can affect anyone, although it is usually found in women. Symptoms of IBS include alternating diarrhea and/or constipation, excessive gas, abdominal bloating and pain, mucous in the stool and narrow stools; all or some of which have been present for at least three months. IBS can be triggered by a variety of situations, which may include allergies and food sensitivities, intestinal infections, stress/anxiety, toxicity, medication and subluxation.

What can you do to help get relief from IBS?

- Get your lower thoracic and lumbar spine adjusted to normalize the neurological input to the small and large intestine.
- Removal of known food allergies or food irritants is imperative. An elimination/challenge trial may be helpful in uncovering sensitivities. Talk to Drs. Langford, Karls, and Dronen before starting an elimination/challenge diet.

- Low-fat diets may relieve abdominal pain following meals. Patients with spasm and constipation often benefit from dietary fiber supplementation.
- Repair the gut with UltraInflamax or UltraClear Sustain and reestablish its normal environment with UltraFlora Plus
- Decrease sugar in your diet
- Practice stress reduction through massage.

## **Knowing Your Insurance Benefits**

by **Barb La Motte**

You may have heard in the last couple of weeks or months in the newspaper or on television that chiropractors are under scrutiny for insurance fraud. You may have even heard that charges have been brought and licenses revoked. While this is the case in a very few chiropractic offices, I am here to assure you that this is not happening at Langford Chiropractic. Most of these offices under investigation are using reports of automobile accidents from police and "runners" to get new patients into their offices. We at Langford Chiropractic have never nor will we ever use "runners" to get new patients into our office. We have never bought nor will we ever buy automobile accident reports from the police or anyone else. WE believe that the patients come first. We rely on referrals from current patients, other doctors, provider books, and advertising. If you have any questions regarding this information, please feel free to call me at (651) 699-8610.

The chiropractic approach to knee osteoarthritis is far less invasive. Chiropractic adjustment of the knee joint in conjunction with exercise and nutrition help the joint maintain cartilage as well as increase the function of the knee. An adjustment creates movement in the proper plane, increases range of motion, and improves joint nutrition, thus helping to reduce pain. Supplements such as Glucosamine Sulfate help keep the joint tissues healthy while exercises help increase the stability of the surrounding area. The majority of patients respond rapidly with chiropractic treatment and benefit from getting back into daily routines.

Dr Karls has an advanced degree in sports chiropractic and would be happy to evaluate your knee and inform you if it can be helped with chiropractic care.

## **Clinic News**

by **Deborah Goldstein**

In the last couple of months Langford Chiropractic Clinic has welcomed three new interns and one new doctor! In January we welcomed interns Katie Burns-Ryan, Kati Havel, and Laura Schwartz.

In January we were ecstatic to welcome Laura Dronen, D.C. as a new associate chiropractor! Some of you may remember Dr. Dronen from her internship with Dr. Karls from January to July of 2001. Dr. Dronen graduated from the University of Minnesota in 1996 with a B. S. in Kinesiology, and then completed her Doctor of Chiropractic degree from Northwestern Chiropractic College in Bloomington in July 2001. Dr. Dronen is originally from Fridley,

Minnesota. She enjoys running, playing soccer, and is working towards fluency in Spanish. Dr. Dronen looks forward to meeting all continued on page 2 of our current patients and she is very excited to begin her career with us at Langford Chiropractic.

Katie Burns-Ryan is in her tenth term at Northwestern College of Chiropractic and will be Dr. Karls' intern until April of 2002. Katie is from Caledonia, Minnesota and she enjoys golfing.

Kati Havel is in her eighth term at Northwestern and will be Dr. Karls' intern until August. She is from Rhinelander, Wisconsin, home of the Hodag! She is an active member of the Dave Matthews Band fan club.

Laura Schwartz is Dr. Langford's intern. She is currently in her eighth term at Northwestern, as well. She originates from Sheldon, Iowa, and is busy planning her August wedding.