

# OPTIMAL HEALTH UNIVERSITY™

Presented by Dr. Troy H. Peters

## Chiropractic Adjustments Benefit Joints in the Extremities

*Sure, you know that chiropractic alleviates dysfunction in the spine that may impede nervous system activity. And you know that chiropractic care wards off disability in the hips, back and neck as well. You are probably also aware that this drug-free approach to health averts headaches, jaw pain and fibromyalgia. But did you know that chiropractic offers effective correction for problems in the joints of the upper and lower limbs (extremities)?*



The Wrist

Dr. Peters addresses maladies affecting the ankles, knees, wrists, elbows and shoulders with a multifaceted approach. First, alignment in the extremities is influenced by spinal posture. Consequently, a misaligned spine may spark a chain reaction that throws limbs slightly out of balance, leading to uneven wear on joints.

Dr. Peters examines the spine for areas where movement is restricted or spinal bones (vertebrae) are slightly out of place. These dysfunctional segments are called vertebral subluxations. This condition is corrected with specialized, gentle maneuvers called chiropractic adjustments.

Next, chiropractic care targets the specific joint involved. This may include gentle adjustments to or manipulation of the joint. It may also involve physiotherapy techniques or exercises custom tailored to the patient's unique circumstances. In addition, ergonomic advice is a common component of an extremity care plan. And nutrition and stress reduction are often also integrated into this revolutionary approach to health.

How effective is chiropractic at alleviating problems with joints in the extremities? Following is a compilation of cutting-edge research on how chiropractic care benefits particular joints.

### Wonderful Wrists

A growing body of research indicates that chiropractic care is a winning solution for wrist pain due to carpal tunnel syndrome (CTS) and the lesser-known conditions that mimic it.

In one experiment, doctors at Northwestern College of Chiropractic in Bloomington, Minn., followed 96 individuals with CTS. The patients received either medical or chiropractic intervention. Medical treatment consisted of medication (ibuprofen) and nighttime wrist supports. Chiropractic care included adjustments to the wrist and spine, ultrasound therapy and nighttime wrist supports.

Findings showed that the drug-free chiropractic approach was as effective as medical treatment, without the potentially hazardous side effects of painkillers (*J Manipulative Physiol Ther* 1998;21:317-26).

Chiropractic care is also effective for the lesser-known disorders that are often misdiagnosed as CTS. One such condition is ulnar tunnel syndrome (UTS). One scientific case study tracked a 45-year-old woman with

UTS. Her symptoms resolved following four chiropractic visits during which she received wrist adjustments (*J Manipulative Physiol Ther* 2003;26:602-7).

### Excellent Elbows

Chiropractic adjustments alleviate common elbow problems, such as "tennis elbow" (lateral epicondylitis) and "golfer's elbow" (medial epicondylitis).

Research conducted at The University of Queensland in St. Lucia, Australia reveals that a specific type of adjustment to the elbow produces an immediate and dramatic drop in pain for patients with tennis elbow.

As part of the study, researchers tested pain-free grip strength in 24 patients before and after receiving manipulation to the elbow or a placebo procedure.

Findings showed "a significant and substantial increase in pain-free grip strength of 58 percent" during treatment but not during placebo and control (*Man Ther* 2003;6:205-12).

Another case study examined a woman with elbow pain triggered by repetitive work activities. A course of chiropractic adjustments to the elbow joint ended the woman's pain and increased motion in the joint (*J Manipulative Physiol Ther* 2000;23:619-22).



The Elbow

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And, in another analysis, 24 patients with long-term elbow pain received either a placebo treatment or manipulative therapy. Findings showed “a significant and substantial increase” in the pain-free grip strength of 58 percent during treatment — but not during placebo or nontreatment phases (*Manual Therapy* 2001;6:205-12).

Curiously, adjustments to the wrist may also keep elbow conditions at bay. One experiment enrolled 28 patients with tennis elbow. The subjects received either manipulation of the wrist or a standard physical therapy protocol (ultrasound, friction massage, muscle stretching and strengthening exercises).

After three weeks of intervention, the success rate among manipulation recipients was 62 percent, compared with 20 percent in the physical therapy group. After six weeks, the manipulation group reported significantly greater improvement in pain, compared with the physical therapy recipients (5.2 out of 11 vs. 3.2 out of 11, respectively). (*Phys Ther* 2003;83:608-16).

### **Savvy Shoulders**

The advantage of chiropractic care for rotator cuff injury of the shoulder is its natural, multifaceted approach. Instead of invasive surgery, chiropractors use gentle, safe maneuvers called chiropractic adjustments, combined with specific exercises and physiotherapy that prove effective in alleviating shoulder pain (*Chiropr Osteopat* 2005;16:20).

One report in the prestigious medical journal, *Annals of Internal Medicine*, looked at 150 patients with shoulder problems. All patients received standard medical care. Half of the patients also underwent manipulative therapy of the shoulder joint. After 12 weeks, 43 percent of the manipulative therapy group had recovered, compared with only 21 percent of controls. When researchers checked back with the patients after one year, the same difference in recovery rate persisted.

“Manipulative therapy for the shoul-

der girdle in addition to usual medical care accelerates recovery of shoulder symptoms,” conclude the study’s authors (*Ann Intern Med* 2004;141:432).

What’s more, research shows that chiropractic succeeds in ending a vicious cycle of surgery-relapse-surgery-relapse.

One case study looked at a professional hockey player with pain and instability in his left shoulder. The player had undergone two operations that failed to provide lasting results. In contrast, chiropractic care significantly improved the player’s condition (*J Manipulative Physiol Ther* 2001;24:425-30).

### **Keen Knees**

Knee pain is associated with a restriction in the joint connecting the two bones of the lower leg (tibia and fibula). This joint — the tibiofibular joint — is located at the outer base of the knee.

When the knee joint is out of alignment, the kneecap (patella) may be thrown slightly off track during walking and other activities requiring the knee to bend. One study demonstrated that chiropractic adjustments not only subdue knee pain, but they also help restore proper tracking to the kneecap (*J Manipulative Physiol Ther* 1990;13:539-49).

Another scientific report reviewed a case of knee pain that afflicted a patient for five years. According to the study, chiropractic adjustment of the tibiofibular joint “resulted in immediate and dramatic relief of symptoms.” (*J Manipulative Physiol Ther* 1992;15:382-7.)

A third study described a patient with a torn knee meniscus. Menisci are bundles of connective tissue that cushion the inner-knee joint. This tear was confirmed by magnetic resonance imaging (MRI). Although three separate medical physicians recommended surgery, the patient chose to try chiropractic intervention first: consisting of adjustments to the knee and homeopathic remedies. The result? A com-

plete resolution of pain and disability (*J Manipulative Physiol Ther* 1994;17:474-84).

### **Awesome Ankles**

Scientific evidence supports the use of chiropractic for ankle injuries.

For instance, chiropractic adjustments to the foot and ankle joints may stave off foot pain following plantar fasciotomy surgery.

The study enrolled 15 patients who had undergone foot surgery with poor results. Pain was significantly reduced following a course of chiropractic adjustments to the foot and ankle joints.

“These preliminary findings suggest that joint mobilization and manipulation are safe conservative procedures to use in the treatment of patients with lateral column foot pain in status post plantar fasciotomy.” (*J Manipulative Physiol Ther* 2006;29:398-402.)

In another study of 30 patients with sprained ankles, researchers found that chiropractic ankle adjustments were superior to ultrasound therapy. Adjustments significantly reduced pain and increased ankle range of motion and function (*J Manipulative Physiol Ther* 2001;24:17-24).

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