

52 Year old female with debilitating, progressive back pain

This pleasant, motivated lady presented to us with severe back pain, which limited her ability to walk. In fact, she was limited in most activities of daily living, and her quality of life was terrible and getting worse day by day. She was referred to us by one of her thoughtful friends. This is her story:

February 22, 2006

MY JOURNEY

On September 9 & 10 2006 I will participate in the incredible journey that is "The Weekend to End Breast Cancer", a 2 day 60 kilometre walk with all proceeds going directly to the Princess Margaret Hospital Foundation for breast cancer research and care. Each participant must commit to raising a minimum of \$2000.00; last year's walk raised \$16 million. 1 in 9 Canadian women will be diagnosed with breast cancer, 1 in 4 will probably not survive. My mother is a breast cancer survivor.

So what, you may ask, does this have to do with Dr. Jonathan Saunders? The answer is simple, everything.

I am an active person. I love the gym, my horse, my gardens, camping, canoeing, sailing, skiing, you name it. Until February 2005 I worked out at the gym 3 to 4 times a week, yes my back would bother me but I was very creative in finding ways around the pain. In February 2005, creativity no longer worked, I was in constant pain which was now pretty much preventing me from doing everything I enjoyed. Even driving the car had become an event, getting in and out "just so" to minimize the pain of moving.

I knew chiropractic treatment worked; I also knew all too well that not all Chiropractors are created equal. In the mid 90's I had an excellent chiropractor who decided to move to England. I subsequently went to two others, the results were mediocre at best, and yes, I did go to each for several months.

Robaxacet 8 and I had become constant companions; however I noticed a change in pain which now began to feel very much like a pinched nerve. And, you guessed it, the Robaxacet didn't do much good anymore. I couldn't bend, I couldn't twist, I could hardly even walk, if I stepped on an uneven surface jarring pain would shoot up my back, I stayed up later and later to avoid going to bed as when I tried to lay down my back would completely seize and I couldn't move away from the pain. It would often take me better than a half hour to slowly get in and out of bed, regardless of my efforts the seizing pain always came. I was not a happy person.

Dr. Jon was recommended to me by a friend. I didn't hold out much hope after my previous experiences but would have tried anything, so made an appointment in April 2005.

Dr. Jonathan Saunders was an impressive soul from the get go. Upon meeting him, his dedication to both his chosen profession and to exemplary care for his patients was readily apparent. His attention to detail in explaining my diagnoses, taking time to answer my questions and address my concerns was very reassuring. His genuine interest in his patients' overall health is clearly evidenced both in Dr. Jon's day to day demeanor and his little extras such as "My Special Appointments" (Thanks, Dr. Jon!).

Back to my back problem.

The diagnoses: PHASE 2 Subluxation Degeneration of the spine-and there was more. I now weighed 20 lbs. more on one side of me than the other from my body compensating for itself. And more-no gym, no exercise, not even walking in the forest! No physical activity whatsoever (not that I could have done any anyway, but hope springs eternal). Chiropractic treatment 3 times a week, then 2, then if I was lucky, 1.

And treatment began. And it wasn't easy. At the beginning, I could not get adjusted lying on either my back or my side because I simply could not get there. Lying down and getting up at adjustments was painful and time consuming. And Dr. Jon would always ask "would you like help?" and I would always reply "no, you won't always be there", and off he'd go to treat someone else while leaving me to my own devices.

Then the pain started to move. And this was a really good thing! My body was adjusting itself!!! My back slowed, and then stopped seizing when I went to bed. I didn't have to prop myself against furniture to stand after sitting. My car door stopped being a back aid and became a car door again. Life was definitely improving.

In September 2005 I went golfing and didn't need to be adjusted immediately after. In October 2005 I "unsuspended" my gym membership. My adjustments changed to twice a week from three times, then to once a week, and now once every two weeks.

Do I still have back pain? Yes - if I overdo it, or am not careful, or just twist the wrong way, I will always have to be careful...I'll start skiing again next winter but no moguls. I'm at the gym 3 times a week. I'll be training (cautiously) a new horse this year. Life is well and truly good.

LESS THAN A YEAR AGO, I COULD HARDLY WALK ACROSS THE PARKING LOT TO GET ADJUSTED.

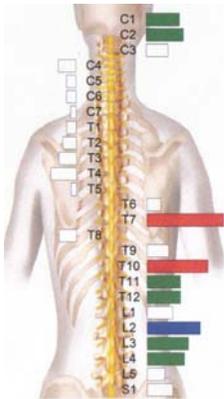
ON SEPTEMBER 9 & 10 MY STEPS WILL JOIN WITH THE STEPS OF THOUSANDS TO WALK 60 KILOMETRES ON THE INCREDIBLE JOURNEY THAT IS THE WEEKEND TO END BREAST CANCER. I am honored and grateful to walk for my Mom, my friends and people I will never even know. As I walk, I know I will often think of Dr. Jon and how my journey with him enabled me to hopefully make a positive difference in the lives of others by being able just to walk.

I HAVE MY LIFE BACK.

FOR THIS I WILL BE FOREVER GRATEFUL TO DR. JON.

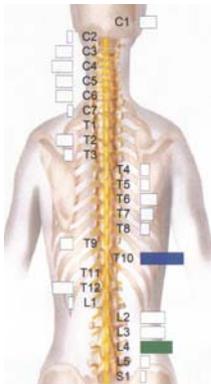
Thank you so very much.

-C.B.



1st Scan

This was the first scan we took – notice the various coloured bars, representing severe nerve interference in this patient. The patient presented with severe pain, decreased range of motion, and various other neurological disturbances.



Follow-up Scan

Her follow-up scan reveals only a slight amount of nerve interference remaining. We have no reason to believe that she will not make a full recovery. She is extremely satisfied with her recovery as you can tell by her testimonial, as we are.

Want Research?

Manga Report, (Canada) 1993.

Enhanced chiropractic coverage under OHIP (Ontario Health Insurance Plan) as a means for reducing health care costs, attaining better health outcomes and achieving equitable access to health services. Manga, P. *Report to the Ontario Ministry of Health*, 1998.

"On the evidence, particularly the most scientifically valid clinical studies, spinal manipulation applied by chiropractors is shown to be more effective than alternative treatments for low back pain."

See also Manga, Pran., et al. *Chiropractic Management of Low-Back Pain*. Pran Manga and Associates, Ontario, Canada, 1993

The New Zealand Commission Report, 1979. Royal Commission of Inquiry on Chiropractic in New Zealand.

This study has been referred to as "Probably the most comprehensive and detailed independent examination of chiropractic ever undertaken in any country..."

From the paper:

"The Commission has found it established beyond any reasonable degree of doubt that chiropractors have a more thorough training in spinal mechanics and spinal manual therapy than any other health professional. It would therefore be astonishing to contemplate that a chiropractor, in those areas of expertise, should be subject to the directions of a medical practitioner who is largely ignorant of those matters simply because he has had no training in them."

Low back pain of mechanical origin: randomized comparison of chiropractic and hospital outpatient treatment. Meade TW, Dyer S, Browne W et al. *British Medical Journal* 1990; 300:1431-7.

This paper compared chiropractic and hospital outpatient care for managing low back pain of mechanical origin. From the paper:

There is therefore, economic support for the use of chiropractic in low back pain, though the obvious clinical improvement in pain and disability attributable to chiropractic treatment is in itself, an adequate reason for considering the use of chiropractic.

"The benefit of chiropractic treatment became more evident throughout the follow-up period.

"Chiropractic was particularly effective in those with fairly intractable pain—that is, those with a history of severe pain."

Low back pain and the lumbar intervertebral disc: Clinical consideration for the doctor of chiropractic. Troyanovich SJ, Harrison DD, Harrison DE. *Journal of Manipulative and Physiological Therapeutics*, Feb. 1999; vol. 22, no. 2, pp96-104.

This review of the literature distills and synthesizes previously published research. The article lists various causes of low back pain, noting findings in patient histories, physical examinations, and diagnostic imaging that represent "red flags" indicating the need for referral to a specialist for surgical intervention.

After patients are screened for red flags, conservative treatment should be the first line of treatment for patients without absolute signs for surgical intervention.

The authors concluded:

Of the available conservative treatments, chiropractic management has been shown through multiple studies to be safe, clinically effective, cost-effective, and to provide a high degree of patient satisfaction. As a result, in patients for whom the surgical indications are not absolute, a *minimum* of 2 or 3 months of chiropractic management is indicated.