
Performance Chiropractic, LLC

State of the Art, With a Caring Touch

Dr. Daniel Shaye

Certified Chiropractic Sports Physician
Fellow, International Academy of Medical Acupuncture

Dr. Nat Shaye

Chiropractic Physician
Diplomate, International Academy of Medical Acupuncture

Natural approaches to arthritis management

By

Dr. Daniel A. Shaye
Chiropractic Physician
Fellow, International Academy of Medical Acupuncture

According to the arthritis foundation, 43 million Americans suffer from arthritis. Arthritis refers to joints ("arthr") and inflammation ("itis"). The most common form is the wear-and-tear form that we all get to some extent, known as osteoarthritis ("OA"). Less common, but still potentially devastating, are systemic forms including rheumatoid arthritis (RA), psoriatic arthritis, Lyme disease, and others. What are some natural approaches to arthritis prevention and management?

Lifestyle modification and exercise: Yoga, t'ai chi, and other forms of exercise empower the arthritis sufferer, unlike Western medicine which tends to disempower. The ends of bones are covered in smooth, shock-absorbing cartilage that keeps bone from rubbing on bone. The couch potato runs into the same problem as the exercise addict, but for different reasons. Joint cartilage doesn't have its own blood supply, it's more like a sponge. If you don't pump the cartilage with water and nutrients, it degrades. Try exercising in a social setting, or in nature, and you may find that this "medicine" is actually quite enjoyable!

Ice/heat: Many arthritis sufferers get relief from ice or heat packs. A word to the wise: If an area is inflamed, don't throw heat on the fire-try ice instead. Too many people take anti-inflammatory medications, and hit the hot tub. Don't fight yourself... and while you're at it, don't burn or frostbite yourself either. 10-20 minutes is plenty for icing or heating an area.

Nutritional therapies: Glucosamine and/or chondroitin supplements bring relief to many arthritis sufferers, especially those with knee pain. Omega-3 oil (such as in fish or flaxseed oil) is a natural anti-inflammatory. Good old-fashioned water is also important, as joint cartilage is mostly water. The best part: all of these have few if any negative side effects.

www.performancechiropractic.com

Performance Chiropractic, LLC
1307 Jamestown Road, Ste. 103
Williamsburg, Virginia 23185
(757)229-4161

Chiropractic: Though some people think of chiropractic for neck or back pain, chiropractors focus on the joints, muscles, and nerves of the entire body. Joints need motion to wipe synovial fluid (a very slick form of natural "joint oil") over joint surfaces. Chiropractors help stiff joint move normally, and this is probably why Medicare began approving chiropractic manipulation back in 1972. Like the Tin Man in The Wizard of Oz, having joints oiled up and moving feels wonderful.

Acupuncture: The Chinese have had 3,000 years, and over a billion people, with which to hone this ancient art. Is it any wonder that many people report relief? Acupuncture in this country is governed by OSHA and other safety regulations, and the science helps many people with arthritis pain. Some PPO's and HMO's cover it, but it's so effective that many people are willing to see a medical or chiropractic acupuncture practitioner regardless of coverage issues.

Massage: Though the effects may be short-lived, massage therapy can stimulate blood flow and provide a very relaxing experience. Since mind and body interact, massage may provide relief for many reasons.

Mind-body therapies: Prayer, guided imagery, and other mind-body therapies use the established fact that the mind can effect the body. In fact, the brain is where pain is processed and interpreted. Though treatment interventions like prayer may seem strange to some, medical literature has begun to take seriously the therapeutic potential of these treatment interventions.

Ultimately, the key is so simple, and so hard, and is embodied in the Oriental Yin-Yang symbol: Balance. Balance the body's structure, balance the building up and the breaking down, balance the mind, balance the diet, balance the present with the future, balance the work with play... this is the answer, and the ever-present challenge, for not only arthritis sufferers, but for all of us.

Dr. Daniel Shaye is a certified chiropractic rehabilitation doctor, certified chiropractic sports physician, and a Fellow of the International Academy of Medical Acupuncture. He practices in Williamsburg, with Performance Chiropractic. You may contact him at (757)229-4161; e-mail pchiro@performancechiropractic.com; or visit www.performancechiropractic.com

www.performancechiropractic.com

*Performance Chiropractic, LLC
1307 Jamestown Road, Ste. 103
Williamsburg, Virginia 23185
(757)229-4161*

Anti-Anti-Inflammatory Medications

by Dr. Daniel Shaye, Chiropractic Physician



If you read my column regularly, you know about anti-inflammatory medication abuse. “Anti” means “against,” so anti-inflammatory drugs fight inflammation (and thus pain)... and arguably, being against abuse of anti-inflammatory drugs would make me a

proponent of “anti-anti-inflammatory abuse.”

Aspirin was once considered a wonder drug... until we realized it causes ulcers. Then came steroids and their cousins, the Non-Steroidal Anti-Inflammatory Drugs (NSAIDs). NSAIDs include Celebrex, Daypro, Feldene, ibuprofen (Advil, Motrin, Nuprin), Lodine, Indocin, Naprosyn, Orudis, Relafen, Toradol, Voltaren, and others. Though NSAID abuse in arthritis patients causes an estimated 16,500 deaths every year,* healthy people suffer in other, less obvious ways. NSAIDs are the most commonly used anti-inflammatories, and acetaminophen (referred to in my article as Tylenol) fights pain through a different mechanism. A recent study* links both to high blood pressure (“hypertension”). The study of 80,020 women age 31-50 who took NSAIDS 22 or more days a month revealed an 86% increased risk of high blood pressure compared to those who avoided the drugs altogether! Tylenol “only” boosted the risk 50%. It bears noting that the NSAID risk did not include aspirin.

Another study took a different angle on NSAID risk. Cox-2 inhibitors, a class of drug that includes Celebrex, may weaken soft tissue. We’ve long known that cortisone injections can do this, but this year 2001 study* showed that rats who used these NSAIDS after injury had 32% lower ligament strength! If this study is extrapolated to the human runner (we are not that unlike rats when running on a treadmill!), consider that a sprain might take LONGER to heal if the athlete takes certain NSAIDS. Stated differently: The drugs may help you feel better, and may make re-injury more likely.

Pain is valuable: It’s the body’s way of warning you something’s wrong. Like pain, inflammation has its value. Inflammation is part of the normal healing process. Inflammation brings white blood cells into an area, clearing that area of damaged tissue. We take a risk when we interfere with nature. Is the benefit to your drug worth the risk to liver, kidney, and stomach? If you’re a runner, are the pills worth the risk to ligaments and other tissues? And is there a better way?

So, a summary:

1. Aspirin can damage the GI tract, especially the stomach
2. NSAIDs may cause high blood pressure
3. Like NSAIDs, Acetaminophen (Tylenol) may cause high blood pressure
4. Some NSAIDs may weaken ligaments
5. Ice never, ever destroyed a liver, kidney, or stomach; nor has it caused high blood pressure; nor is it known to weaken tissues.

NSAIDs don’t have some of the problems associated with aspirin... but they caused side effects. The newer NSAIDS didn’t cause the problems the older ones did... but they caused still more, different complications. Beware tomorrow’s wonder-drug, which won’t have the problems of yesterday’s magic bullet but will bring its own costs. “Let thy food be thy medicine” said Hippocrates. Add ice, some good sleep, and smart training, and you’ve got something. Drugs have their place, but be judicious with them.

Until next month... happy running!

-Dr. Daniel A. Shaye
Certified Chiropractic Sports Physician
Fellow, International Academy of Medical Acupuncture

* References available upon request

Do you have a question you’d like answered in this column? Mail your questions c/o Performance Chiropractic, 1307 Jamestown Road, Ste. 103, Williamsburg, VA 23185; or e-mail pchiro@performancechiropractic.com

NSAID

by Dr. Daniel Shaye, Chiropractic Physician



Q.: “After hard runs I take an anti-inflammatory. It makes sense to me to control inflammation before it gets bad enough to make me sore or cause injury. Is there anything wrong with this?”

A.: No... and yes.

Non-steroidal anti-inflammatory drugs (NSAIDs) are some of the most popular drugs on the market today. They come by many names including aspirin (sold under many brand names), Celebrex, Daypro, Feldene, ibuprofen (Advil, Motrin, Nuprin), Lodine, Indocin, Naprosyn, Orudis, Relafen, Toradol, Voltaren, and others. They are commonly used to control inflammation and pain. Tylenol (a brand name for acetaminophen) is another common pain-killer (“analgesic”), and like many others it is available to anyone with ten bucks and access to a grocery store or Quickie Mart.

Your reasoning, for the most part, is sound. When you sprain an ankle, the conventional wisdom is to control the swelling to avoid additional damage. One way to do this includes ice and compression. Since inflammation and pain are linked, the ice is used to control inflammation (in addition to other effects) to control pain. Since controlling inflammation with ice is fine for an ankle sprain, what is wrong with controlling post-workout soreness with a pill?

The answer I give my patients is as follows: Ice never destroyed a liver, kidney, or stomach. NSAIDs and acetaminophen have. The New England Journal of Medicine published a paper that indicated 8-10 percent of kidney failures in the United States are caused by acetaminophen. It also noted that 5,000 or more pills containing NSAIDs, taken over a lifetime, will raise your risk of kidney failure by about 9 times. Though 5,000 pills sounds like a lot, do the math: Take one pill every 4 days (most runners do a hard or long run every 4 days) for a little over 50 years (a typical running career) and you’ve got 5,000 pills... and 9 times the average risk of needing a dialysis machine. My question: If

taking 5,000 pills raises your risk by nine times, what damage does 1,000 pills do? As new and improved medications are released, do I want to risk their known benefits for an unknown risk-benefit ratio?

Don’t get me wrong, a single aspirin or other pain pill isn’t likely to destroy your liver or kidney. My point is this: anti-inflammatory and other pain-killing drugs may mask problems, and have risk. If you can use lower-risk methods to stay healthy, why not choose them? If you have injured something, why not find the cause and fix it, rather than using the band-aid approach?

One common use for NSAIDs is arthritis pain. This worries me as much as regular medication use for athletic aches and pain. Most arthritis is the wear-and-tear kind, and once you have it, it’s not going away. Are you going to take those pills forever? Better ideas, for arthritis sufferers, athletes, or both:

**Pain is a warning-
Listen to it.**

- Strengthen and stretch your supporting structures (the muscles, ligaments, and tendons). This protects you from injury, and from arthritis.
- Balance your structure (chiropractic, massage)
- Control inflammation and pain naturally (ice, acupuncture)
- Eat a healthy, balanced diet
- Stay hydrated (i.e. drink plenty of water, limit caffeine and alcohol)
- Listen to your body.

Pain is a warning- listen to it. Inflammation is a normal part of the healing process; though excessive inflammation is a problem, and for that I recommend ice. Better than treatment is training sensibly and limiting injury. Don’t run yourself into the ground unable to hear your body’s signals because you’re wearing the medical equivalent of earplugs.

Happy—and healthy—running!

-Dr. Daniel A. Shaye
Certified Chiropractic Sports Physician
Fellow, International Academy of Medical Acupuncture

Do you have a question you’d like answered? Mail your questions c/o Performance Chiropractic 1307 Jamestown Road, Ste. 103, Williamsburg, VA 23185; e-mail pchiro@performancechiropractic.com; or visit www.performancechiropractic.com

Celebrate Wellness!

Healthy Hips, Knees and Other Joints

Have you, a friend, or a family member had a joint replacement? How can you maximize the quantity and quality of your life, while minimizing the need for joint replacement, and re-replacement procedures? Here are some facts and tips, courtesy of the Virginia Chiropractic Association.

During 1979-2002, hip replacement rates for American seniors increased approximately 800%.ⁱ During that timeframe, the rate of knee replacement increased roughly 400%; and the largest increase was among those under age 50.ⁱⁱ According to the American Academy of Orthopedic Surgeons, Americans now receive approximately 193,000 total hip replacementsⁱⁱⁱ and 581,000 knee replacements^{iv} per year. Those 581,000 knee replacements are projected to balloon to 3.48 million by the year 2030.^v We are clearly facing an epidemic of arthritis and joint replacement.

One of the best approaches to health is prevention. Most joint surfaces are covered in hyaline, a very smooth cartilage that is mostly water. By maintaining proper hydration levels and functional joint strength around your major weight-bearing joints, you'll have taken some strong positive steps towards joint longevity. Who'd have thought that a simple glass of water could have such power to protect your body's frame?


The knee joints are, loosely speaking, hinge joints. They do rotate some, but not with the greater range of motion that you expect from a forearm where it rotates at the elbow. If the inside of the foot collapses too much (pronation) during walking, running, or standing, the knee will be stressed to turn or twist. The long-term consequence is stress and wear on the inside of the knee. Also, the muscles in the front of the thigh tend to pull on the knee in ways that are stressful to the knee -- especially if you have wide hips (a large "Q Angle," as your doctor will refer to it). No, you can't get a new body; but with the help of a professional, you can decrease damaging stresses and help your knees move (or "track") their best. This is where your chiropractic doctor comes in.

Just like alignment issues are important for your knees, they also affect the hips and back. Some people's hip bones are different from one side to the other, and some people have a short leg on one side. The muscles around the pelvis connect to the spine, the ribs, the hips, even the knees. Helping them all relate in a healthy way is one of the services a doctor of chiropractic can provide.

Hydration and maintaining joint strength and stability requires daily attention. Preventing premature joint wear is, in no small part, your job; but your partner in this process is your doctor of chiropractic. Alignment might refer to your auto tires wear; it also refers to how your foot relates to the ground, how your knees relate to your hips, how your hips relate to your spine... and the other way around. Every joint in the body affects other joints, just as a disturbance in the nervous system in one area (for example, the pain of an ankle sprain) can affect other areas (for example, back pain from limping around on the aforementioned ankle). We've all fallen as children, and many of us have had other mishaps, accidents, and traumas in life. Even though some or even all of the pain from an injury might fade, unless movement and related neurological patterns are normalized, the old and forgotten injuries of life may come to haunt us in the form of subtle misalignments... and the not-so-subtle result of pain, joint failure, and need for joint replacement. Doctors of chiropractic focus on the human frame and its neurological and structural balance, to help you get plenty of mileage out of your body.

Even if you've already had replacements in a knee, hips, the spine, shoulders, elbows, or other joints, chiropractic is still an important part of living well. Chiropractic doctors see artificial joints every day on x-rays, so you'll have plenty of company in our office. Some doctors of chiropractic have special training in sports and rehabilitation, and all doctors of chiropractic are trained in the function of the nervous system and every -- yes, every -- joint in the human body. Doctors of chiropractic can serve as the "body shop" when you have a serious injury, but they also shine in the area of rehabilitation and -- just like the auto shop -- functional alignment to keep your joints working to their full and optimal capacity. That's something you'll appreciate whether your goal is to attain peak performance, or to maximize the life of your real and already-replaced joints.

Doctors of chiropractic are trained to care for people of all ages, and they focus not just on avoiding pain but on helping you maximize your quality of life. If you haven't already done so, consider taking advantage of the full range of their skill and training. Your entire family will reap the rewards for many years, and many generations, to come.



Dr. Daniel Shaye
DC, CCSP, FIAMA
Practice of Chiropractic &
Acupuncture
1307 Jamestown Road, Ste 103
Williamsburg, VA 23185
Phone: **757.229.4161**
Fax: 757.564.0581
pchiro@pchiro.com
www.performancechiropractic.com

ⁱ CDC, the National Center for Health Statistics, as noted at cdc.gov/mmwr/preview/mmwrhtml/mn5407a6.htm.

ⁱⁱ *Journal of Bone & Joint Surgery*, Vol. 89-A, No. 12, December 2007

ⁱⁱⁱ American Academy of Orthopedic Surgeons, at <http://orthoinfo.aaos.org/topic.cfm?topic=A00377>

^{iv} American Academy of Orthopedic Surgeons, at <http://orthoinfo.aaos.org/topic.cfm?topic=A00389>