

# OPTIMAL HEALTH UNIVERSITY™

Presented by Dr. Michael Corey

## Adolescents and Back Pain

*Do you think teens are immune to low-back pain? Think again. Currently, record numbers of adolescents suffer from neck, midback and low-back pain. And if the pain itself isn't challenging enough, symptoms dramatically affect physical and emotional well-being.*

*For some adolescents, back pain is intermittent, but for others, it's a chronic problem. Dr. Corey is concerned about the number of adolescents suffering from all types of back pain — and has gathered research about this growing problem to share with patients.*



### Beyond “Growing Pains”

Many parents discard adolescent back pain as part of “growing pains” that will disappear as kids mature. But adolescent back pain isn't child's play; chronic pain often persists into adulthood.

Research illustrates a direct correlation between adolescent back pain and continued adult-onset back pain (*Curr Opin Pediatr* 2008;20:37-45). Other studies report that 50 percent of youngsters with low-back pain (LBP) will suffer lifetime occurrences (*J Manipulative Physiol Ther* 2003;26:1-8).

### Effect on Quality of Life

Chronic pain — at any age — dramatically affects quality of life. For teens, simple daily activities, such as concentrating during class and completing homework, prove difficult.

Remaining emotionally positive and upbeat — which is especially challenging during teenage years — is exponentially more demanding when coupled with unrelenting pain. Worse yet, nagging neck pain is “significantly associated” with psychological conditions and conduct problems (*Appl Ergon* 2007;38:797-804).

### Painkiller Perils

Encouraging kids to pop a painkiller for back and neck pain is a treacherous strategy. Perpetual use of over-the-counter painkillers is linked to a host of gastrointestinal problems.

But that's not all: Teaching kids to mask pain with drugs may also have a life-lasting psychological impact. Relying on painkillers sends the message that “masking” rather than solving an unremitting problem is OK. The implication that drugs are a simple, “one shot” solution is highly perilous.

### Send Clear Messages About Health and Medication

Doctors of chiropractic, such as Dr. Corey, know that both over-the-counter and prescription painkillers are temporary, “patch-up” fixes, rife with potential side effects. Dr. Corey and other chiropractors encourage

parents to send a clear and consistent message to their kids: All medications have side effects, and natural solutions should always be investigated first.

### Address Underlying Problems

Why not teach your teenager to solve his or her back pain at its source and prevent future occurrences?

Neck, midback and LBP are often triggered by a common — and preventable — condition called **vertebral subluxations**. Hallmark symptoms include dysfunctional areas of the spine, marked by decreased mobility and pain. Doctors of chiropractic, such as Dr. Corey, correct these areas with **chiropractic adjustments**, specialized maneuvers proven to restore motion and alignment.

### Teenagers and Chiropractic

The good news is that chiropractic care for adolescents works wonders to stop pain throughout the spine.

In one study — performed in Ontario, Canada — researchers analyzed care outcomes of 54 LBP chiropractic patients, who were an average age of 13 years. Patients attended 15 different chiropractic clinics, based on home location, during the six-week course.



**Dr. Michael Corey, WellnessStop Chiropractic & Natural Health Center**  
2552 Walnut Avenue, Suite 145, Tustin, CA 92780 [www.DrMichaelCorey.com](http://www.DrMichaelCorey.com)  
(714) 730-5833

Of the 31 male and 23 female subjects, 61 percent suffered from acute pain, with 47 percent attributed to a traumatic event (most commonly sports-related); 24 percent reported pain lasting more than three months. Almost 90 percent had uncomplicated mechanical LBP.

All patients received chiropractic manipulation with excellent results: In two different measurement scales, 87 percent and 62 percent enjoyed “important” improvement. Patients with chronic LBP were more likely to need additional chiropractic care, beyond the average number of visits.

The authors concluded that “patients responded favorably to chiropractic management, and there were no reported complications. Future investigations should establish the natural history and compare chiropractic management with other forms of treatment to gain knowledge about the effectiveness of chiropractic in managing pediatric LBP.” (*J Manipulative Physiol Ther* 2003;26:1-8.)

### **The Headaches/Back Pain Connection**

If your teenager complains of headaches, watch out: Back pain may be right around the corner. In a year-long evaluation, scientists followed 1,113 preteens and adolescents who were initially pain-free at the study’s onset.

Scholars investigated factors with known links to back pain.

At the end of the year, 21.5 percent reported new episodes of pain. What were the chief risk factors associated with new pain that was not caused by a trauma? Headaches and day-time sleepiness (*BMC Musculoskelet Disord* 2007;8:46).

Fortunately, doctors of chiropractic work to solve headaches at their source. Often headaches are caused by misalignments in the cervical (neck) region. If you teenager suffers from headaches, make an appointment with the doctor today, before the problem spreads.

### **Chiropractic Lifestyle**

In addition to chiropractic care, the doctor recommends that adolescents follow the *chiropractic lifestyle* to boost overall well-being. The chiropractic lifestyle involves chiropractic adjustments, stress reduction, daily exercise and a healthy diet — all of which slash the risk of common adolescent disorders, including back pain.

Following are examples of lifestyle changes that could have a dramatic effect on adolescent back pain.

#### *Exercise More*

Exercise battles key issues during adolescence, such as moodiness, the blues and weight gain, but that’s not all: Physical activity decreases the risk of adolescent back pain and poor posture.

In a large-scale study of more than 3,500 children in three age brackets (7, 11 and 15), approximately 40 percent were diagnosed with poor posture. As the children got closer to adolescence, risks for poor posture skyrocketed. Subjects with poor posture also tended to endure neck pain, LBP and headaches.

On average, participants spent *only* four hours each week engaging in physical activities, but a whopping 14 hours weekly watching television and playing computer games. The 20 percent of youths who reported no sports activities had a “significantly higher” probability of poor posture than active children.

The most frequently detected problems were protruding scapulae (50 percent of all children), increased “sway back” (32 percent) and rounded upper back (31 percent) (*J Sch Health* 2007;77:131-7).

#### *Carry Backpacks Properly*

Does your teen complain of back pain more often during the school year than during the summer? Encourage him or her to limit the weight in backpacks and use both shoulder straps.

According to researchers in Denmark, the primary cause of adolescent LBP during the school year is carrying a heavy backpack on one shoulder.

The analysis included 546 14- to 17-year-old teens. The scientists measured subjects’ sitting positions, LBP, backpack height, weight and school furniture. More than half of the adolescents experienced LBP during the prior three months, and 24.2 percent reported reduced function or seeking care due to the LBP.

Of all factors, LBP was only associated with carrying a school bag on one shoulder instead of two. LBP was not linked to the type or dimension of the adolescent’s desk or chair.

The researchers concluded that “the present study does not support the hypothesis of different types of school furniture being a causative or preventing factor for LBP. Carrying the school bag in an asymmetric manner may play a role.” (*Spine* 2007;32:E713-7.)

### **We’re Here to Help**

If your teenager suffers from pain or any health issue, contact us right away for a checkup. It’s far better to halt the problem at its source and steer clear of a lifetime pattern of neck, midback and LBP and headaches. Teaching your teenager how to tackle and solve the problem may be *just as* important as eliminating the pain!



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