Frequently Asked Questions About Chiropractic

Q: What conditions do chiropractors treat?

A: Doctors of Chiropractic (DCs) care for patients of all ages, with a variety of health conditions. DCs are especially well known for their expertise in caring for patients with back pain, neck pain and headaches...particularly with their highly skilled manipulations or chiropractic adjustments. They also care for patients with a wide range of injuries and disorders of the musculoskeletal system, involving the muscles, ligaments and joints. These painful conditions often involve or impact the nervous system, which can cause referred pain and dysfunction distant to the region of injury. DCs also counsel patients on diet, nutrition, exercise, healthy habits, and occupational and lifestyle modification.

Q: How do I select a Doctor of Chiropractic?

A: One of the best ways to locate a Doctor of Chiropractic (DC) near you by using <u>Find a Doctor</u>. You can also select a DC is by getting a referral from a friend, family member, colleague, or another health care provider.

Q: Is chiropractic treatment safe?

A: Chiropractic is widely recognized as one of the safest drug-free, non-invasive therapies available for the treatment of neuromusculoskeletal complaints. Although chiropractic has an excellent safety record, no health treatment is completely free of potential adverse effects. The risks associated with chiropractic, however, are very small. Many patients feel immediate relief following chiropractic treatment, but some may experience mild soreness, stiffness or aching, just as they do after some forms of exercise. Current research shows that minor discomfort or soreness following spinal manipulation typically fades within 24 hours.

Neck pain and some types of headaches are treated through precise cervical manipulation. Cervical manipulation, often called a neck adjustment, works to improve joint mobility in the neck, restoring range of motion and reducing muscle spasm, which helps relieve pressure and tension. Neck manipulation, when performed by a skilled and well-educated professional such as a Doctor of Chiropractic, is a remarkably safe procedure.

Some reports have associated high-velocity upper neck manipulation with a certain rare kind of stroke, or vertebral artery dissection. However, evidence suggests that this type of arterial injury often takes place spontaneously in patients who have pre-existing arterial disease. These dissections have been associated with everyday activities such as turning the head while driving, swimming, or having a shampoo in a hair salon. Patients with this condition may experience neck pain and headache that leads them to seek professional care—often at the office of a Doctor of Chiropractic or family physician—but that care is not the cause of the injury. The best evidence indicates that the incidence of artery injuries associated with high-velocity upper neck manipulation is extremely rare—about one to three cases in 100,000 patients who get treated with a course of care. This is similar to the incidence of this type of stroke among the general population. If you are visiting your Doctor of Chiropractic with upper-neck pain or headache, be very specific about your symptoms. This will help your Doctor of Chiropractic offer the safest and most effective

treatment, even if it involves referral to another health care provider.

When discussing the risks of any health care procedure, it is important to look at that risk in comparison to other treatments available for the same condition. In this regard, the risks of serious complications from spinal manipulation for conditions such as neck pain and headache compare very favorably with even the most conservative care options. For example, the risks associated with some of the most common treatments for musculoskeletal pain—over-the-counter or prescription

nonsteroidal anti-inflammatory drugs (NSAIDS) and prescription painkillers—are significantly greater than those of chiropractic manipulation.

According to the American Journal of Gastroenterology, people taking NSAIDS are three times more likely than those who do not to develop serious adverse gastrointestinal problems such as hemorrhage (bleeding) and perforation. That risk rises to more than five times among people age 60 and older.

Moreover, the number of prescriptions for powerful drugs such as oxycodone and hydrocodone have tripled in the past 12 years. The <u>Centers for Disease Control and Prevention</u> (CDC) has reported that abuse of these commonly prescribed painkillers are among the leading causes of accidental death in the United States. Overdoses of opioid painkillers are responsible for some 15,000 deaths per year; that's more than the number of deaths from cocaine and heroin combined. Doctor of Chiropractic are well trained professionals who provide patients with safe, effective care for a variety of common conditions. Their extensive education has prepared them to identify patients who have special risk factors and to get those patients the most appropriate care, even if that requires referral to a medical specialist.

Q: Does chiropractic treatment require a referral from an MD?

A: A referral is usually not needed to see a Doctor of Chiropractic (DC); however, your health plan may have specific referral requirements. You may want to contact your employer's human resources department—or the insurance plan directly—to find out if there are any referral requirements. Most plans allow you to just call and schedule an appointment with a DC.

Q: Is chiropractic treatment appropriate for children?

A: Yes, children can benefit from chiropractic care. Children are very physically active and experience many types of falls and blows from activities of daily living as well as from participating in sports. Injuries such as these may cause many symptoms including back and neck pain, stiffness, soreness or discomfort. Chiropractic care is always adapted to the individual patient. It is a highly skilled treatment, and in the case of children, very gentle.

Q: Are chiropractors allowed to practice in hospitals or use medical outpatient facilities?

A: Chiropractors are being recognized to admit and treat patients in hospitals and to use outpatient clinical facilities (such as labs, x-rays, etc.) for their non-hospitalized patients. Hospital privileges were first granted in 1983.

Q: Do insurance plans cover chiropractic?

A: Yes. Chiropractic care is included in most health insurance plans, including major medical plans, workers' compensation, Medicare, some Medicaid plans, and Blue Cross Blue Shield plans for federal employees, among others. Chiropractic care is also available to active-duty members of the armed forces at more than 60 military bases and is available to veterans at more than 60 major veterans' medical facilities.

Q: What type of education and training do chiropractors have?

A: Doctors of Chiropractic are educated as primary-contact health care providers, with an emphasis on diagnosis and treatment of conditions related to the musculoskeletal system (the muscles, ligaments and joints of the spine and extremities) and the nerves that supply them. Educational requirements for Doctors of Chiropractic are among the most stringent of any of the health care professions. The typical applicant for chiropractic college has already acquired nearly four years of pre-medical undergraduate college education, including courses in biology, inorganic and organic chemistry, physics, psychology and related lab work. Once accepted into an <u>accredited chiropractic</u> <u>college</u>, the requirements become even more demanding — four to five academic years of professional study are the standard. Doctors of Chiropractic are educated in orthopedics, neurology, physiology, human anatomy, clinical diagnosis including laboratory procedures, diagnostic imaging, exercise, nutrition rehabilitation and more. Because chiropractic care includes highly skilled manipulation/adjusting techniques, a significant portion of time is spent in clinical technique training to master these important manipulative procedures. In total, the chiropractic college curriculum includes a minimum of 4,200 hours of classroom, laboratory and clinical experience. The course of study is approved by the <u>Council on Chiropractic Education</u>, an accrediting agency that is fully recognized by the U.S. Department of Education.

Q: How is a chiropractic adjustment performed?

A: Chiropractic adjustment or manipulation is a manual procedure that utilizes the highly refined skills developed during the Doctor of Chiropractic's intensive years of chiropractic education. The chiropractic physician typically uses his or her hands--or an instrument--to manipulate the joints of the body, particularly the spine, in order to restore or enhance joint function. This often helps resolve joint inflammation and reduces the patient's pain. Chiropractic manipulation is a highly controlled procedure that rarely causes discomfort. The chiropractor adapts the procedure to meet the specific needs of each patient. Patients often note positive changes in their symptoms immediately following treatment.

Q: Is chiropractic treatment ongoing?

A: The hands-on nature of the chiropractic treatment is essentially what requires patients to visit the chiropractor a number of times. To be treated by a chiropractor, a patient needs to be in his or her office. In contrast, a course of treatment from medical doctors often involves a pre-established plan that is conducted at home (i.e. taking a course of antibiotics once a day for a couple of weeks). A chiropractor may provide acute, chronic, and/or preventive care thus making a certain number of visits sometimes necessary. Your Doctor of Chiropractic should tell you the extent of treatment recommended and how long you can expect it to last.

Q: Why is there a popping sound when a joint is adjusted?

A: Adjustment (or manipulation) of a joint may result in the release of a gas bubble between the joints, which makes a popping sound. The same thing occurs when you "crack" your knuckles. The noise is caused by the change of pressure within the joint, which results in gas bubbles being released. There is usually minimal, if any, discomfort involved.