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Notes for Discussion on Back Aches

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I would like to see more MY FAVORITE SUBJECT
10/27/98
① FIBROLYSIS - FIBROTHERAPY (FIBROMYALGIA)
② PERMANENT BACK STRENGTHENING EXERCISE
③ EASIER SCIENTIFIC OMT
DR. POMERY NUTRIENTS - MOVE 'EM AROUND
NO PLS YET

1st 1/2 Pose BACKACHES AS PROBLEMS JUST THINK
2nd 1/2 BEST, EASIEST PERMANENT CURES
"WHY I'M HERE" - TELL STORY

ACADEMY - MEMBERSHIP - NO YOUTH - NOT INTERESTED
DOUBLE BLIND MANURE^{EXAM} DIAG - TREAT. & REEXAM
FINDINGS DIAG ALL DIFFERENT - ALL SUBJECTIVE
"OST. AN ART NOT A SCIENCE". SHOULD BE SCIENCE
∴ LACK OF ENTHUSIASM FOR OMT. NO PROOFS
NO RESEARCH STUDENTS & FACULTY CONFUSED

READ 3 ARTICLES MAKE CASE FOR OBJECTIVITY + RESEARCH
ON OMT + X-RAYS OBJECTIVE 94% ADULTS ASYMMETRICAL
X-RAY ADVISEABILITY XRAY SHOW:
L L L L L L L L ET AL

BLACK BOARD / CAUSES ANOMALIES, UNEQUAL LEGS, TRAUMA BONE DEFORMITY FIBROSIS
CONGENITAL DEVELOPMENTAL COMPENSATORY - OCCUPATIONAL ET AL
CONCAVITIES HAVE FIBROSIS (QUOTE) REFERENCES
"BAD POSTURE" FROM ASYMMETRIES + FIBROSIS
CONVEXITIES MUST HAVE STRAINED^{LONGER} SKINNER LIGS + FASCIA

TRADITIONAL
"CAUSES OF BACK ACHES" "DOZENS" (BENE-DISC STRESS STRAIN)
"TREAT. OF BACK ACHES" "SCORES" (EXERCISE CHIRO, YOGI,
PH. SURG., P.T., STERILIZATION
ACUPUNCT MAGNETS
ET AL

PAINS NOT FROM BONE PATHOL NOR DISC (USUALLY) STRESS
NOR WEAK MUSCLES ET AL
PAINS FROM SOFT TISSUES MUSC, LIG, FASCIA TENDONS
SPASM + EDEMA FROM WEAK LIGS, AROUND
ASYMMETRICAL VERT & PELVIS - ~~DISC~~ + FIBROSIS!
IGNORING WEAK LIGS + ASSYMETRY FROM FIBROSIS
ASSURE PERPETUAL RECURRENCE OF STRAINING
"FUTURE MILD INJURIES. "MANIP ASPIRIN"
"MUSCLE SPASTIC TRYING TO DO WORK OF LIGAMENT."

REVIEW & DISCUSS X-RAYS + PATTERNS & REFERENCES
OR MAKE SUBJECTIVE PALPATORY - VISUAL PATTERNS
⊗ [DIAGRAM OF SLUG

OST. CONCEPT INVOLVES
REMEMBERING NO BLOOD TO
CELLS. ∴ NUTRIENTS MAY NOT
GET OUT OF CELLS OPTIMALLY
+ TAKE THINGS OUT
OF BODY - LESS PUTTING
STUFF IN.

2nd H.v. TREAT "SOLVING PROBLEM"

NEW ORLEANS 10/27/98
"SCIENT ASSOC"

MECHANICAL FACTORS

SCLERO AFTER MECHANICAL STRUCT-EFFIC. EFFORT
I.E. [BALANCE SYMMETRY - "NEUTRAL"]

→ 5 yr Cures (+) BACK NECK ACHES (+ "FIBROMYALGIAS")

PRETEND "STRAIGHTENING-BALANCING SPINE (SYMMETRY)

USUALLY WANT BUT: STOPS PROGR., STRAIGHTENS SOME.
STOP TROUBLES [FROM RESTRICTIONS - REAL CAUSE]

TULANE MED
SCHOOL RESEARCH
DR. TIMBERLAND

LIFTS SHOULDER - HIP - FEET CHK FOR ORTHOTICS (PROVATION - PLANS)
FIBROSIS "THRUOUT SOFT TISSUES IN BACKACHE & SHORTEN PULL"
FIBROLYSIS "DISSOLVE SCARS, [CRISIS] "COVERS" "FIBROSIS" "ADHESION"

RESEARCH (MANCHESTER RHEUM. DISEASE CENTER, STERLING RESEAR. CENTRE] GET ALL STRETCHING BREAKS RESOLVES

"NEGLECT TO LYSE FIBROSIS MAY BE GREATEST FORCE PERPETUATING BACKACHE"

"BEND OVER" - ANGIOPLASTY, URETHRAL + ESOPHAGEAL DILATIONS
FIBRES STRETCH BENT ABSORB. [EVEN CALCIUM ABSORBED]

I.E. STRETCHES PINPOINTED TO SHORT AREAS [CONCAVITIES]
TO LENGTHEN MUSCUL-FASC. NOT EXERCISE [SHORTENS]

LEAVES { (+) LATERAL COMPONENT ONLY AREA NEEDING FORCE [LATERALLY]
[FLEX & EXT. CORRECT SELVES ALL DAY LONG]
CORRECT LAT. COMP. & ALL REST SELF CORRECT
= "SELF ADJUST" & PAIN GOES [TEMPORARY REALIGN]
[TOWARDS SYMMETRY]

S.P. REHAB +
CONT. FORCES [TOWARD NEUTRAL BEFORE THRUST]

SLIDES WORKING & SLEEPING HABITS ~~ARE~~ AFFECT SYMMETRIES

DEMONSTRATE: L-TR. S.P. MOBIL. BOAT BUMPER

S.P. REHAB PAPERS [LATERALLY]

TABLE SUBJECT-BUMPER

[STOP-1ST 1/2]

A. AUGER

NEW OR LEANS
10/27/98
SCLERO

SCLERO [IN]TERS "PROLIFERATIVE SOLUTIONS"

ACTIONS PROLIFERATE FIBRIN-COLLAGEN VIA INHIBITORY ("ANY PLACE") & VIA GROWTH HORMONES IN INFLAMMATORY CASCADE & VIA GROWTH HORMONES
= FIBROTHERAPY "SCAR REMODELS TO LIGAMENT" = [IN LIG & TENDONS]
COLLAGEN STRONGEST SUBSTANCE POSSIBLE THAT NATURE HAS TO ALLOW MOTION [EVEN PRESENT]

* "MOVING FIBROSIS AROUND" i.e. FIBROLYSIS → FIBROTHERAPY [IN BONE]
~~LIGAMENTS~~ - LIGAMENTS CANT BE EXERCISED LIKE MUSCLE

NO BLOOD - WHITE; NO CONTRACT. ELEMENTS - J. NAMATH
LIGS SHOULD BE SHORT RAW HIDE - ARG LONG SKINNY - AUGER BANDS C. WARRNER ET AL

∴ WEAK BACKS ARENT WEAK MUSCLES
EXERCISE MUSCLE FEEL GOOD [LACID & EDEMA OUT]
BUT SHORTENS TISSUE YOU WANT TO LENGTHEN

"HYPERMOBILITY" CANT OFTEN ELICIT LENGTHEN
VERT LEANS ON "WEAK LIG TO HURT → MUSCLE SPASM!
TENDER VIA ASTHENIA - EDEMA

^{FASCIA} TENDONS, HURT = ACTIVE MOTION & EFFORT AGAINST RESISTANCE
LIGS, HURT = LONG PASSIVE STRETCHES
BOTH HURT TO PRESURE

BEST REASONS ~~TO EXPECT~~ TO EXPECT GOOD SCLERO RESULTS IN SUSPECT AREAS

- TENDERNESS [LIG. TEND. FASCIA], HYPERMOBILITY [EXTREMITIES]
- IF GNT GREAT BENEFIT BUT DOESNT HOLD. BACK SUPPORT HELPS
- IF MARCHINE OR STEROID RELIEVES PAIN
- IF SCLERO SHOT DUPLICATES PATIENTS COMPLAINT [BRIEFLY]
- IF BELT HELPS

INJECTIONS (LAIN DEXTR (50%) OR S.H. (50%) w/ 1:1 MARCHINE (NEEDLES → Dilution) ADRENALIN (COMBATS BLEEDING, SPYSCOPE & LOCALIZE SOLUTION UNDER)

Q.1.10 - HEALING STARTS [FIBRIN LAY DOWN 10D.]
ICE TO INJECT AREA 15 MINS
MADA JET - ETHYL CHLORIDE
NEEDLES 1/2 - 2" (25g) 3/2" (20g)

NO NSAIDS - SUPPORTS [BACK, ANKLE, KNEE, WRIST]

REACTIONS ON BACK, ICE, COKE, AROMATIC SPIRITS AMMONIA
AMYL NITRATE, ADRENALIN (P BP ↓)