The Decompression Solution

By Eric Kaplan, DC, FIAMA, Perry Bard, DC, and Jason Kaplan, DC

here do patients go when the pain won't go away? Do they choose drugs, surgery, epidurals, or nonsurgical spinal decompression (NSSD)? With our country facing an opioid epidemic and prevalent failed back surgery syndrome, why isn't chiropractic and NSSD the first choice?

Let's look at the facts. Tiger Woods, the winner of more than a hundred professional golf events worldwide, had a conventional microdiscectomy in 2014 and another in 2015. Both failed, leading to a third procedure in October 2015. Eight months later at a press conference, Woods was downcast. He did not know when or if he would be able to play again. "I have no answer for that. Neither does my surgeon or my physio," he said. "There is no timetable. There's really nothing I can look forward to, nothing I can build toward."

After a fourth surgery again a failure, he eventually had a fifth back operation, which was a lumbar fusion. All this was compounded by a terrible car accident that severely damaged his leg. Although he is playing golf again, he is careful and cautious. I had the honor of talking to Tiger, President Trump, and Jack Nicklaus on one occasion. Two of the greatest to play the game along with the 45 President and we spoke of prevention.

During my discussion, I told Tiger Woods that he had the most defined paravertebral muscles I had ever seen. Woods said, "Exercise and rehabilitation are an important part of my life."

I stated, "It shows. Is there anything you don't do?"
"No more jogging," he replied.

He was a true gentleman — a class act. However, he is not the only celebrity who's experienced failed back surgery syndrome.

Steve Kerr, the famous coach of the Golden State Warriors, had a conventional microdiscectomy in the summer of 2015 to relieve sciatic pain. Unfortunately, it culminated in a dural tear and a cerebrospinal fluid (CSF)



leak, leaving him to suffer excruciating headaches and fatigue. His problems were so bad he had to take a leave of absence.

Even after a second surgery to fix the leak, Kerr was stuck at home for more than half of the Warriors' season. CSF leaks are not pretty and can cause all kinds of problems because the leaks change the pressure in the "balloon," so the brain and spinal cord are no longer cushioned quite the same way. Messing with the brain and spinal cord can literally mess you up. Common problems are headaches, which may change in severity when you change your body position (because you're changing the pressure within the "balloon"), nausea, vomiting, neck or shoulder pain and stiffness, and balance problems. Such leaks can affect your senses, impairing your hearing and sense of smell or making you extra-sensitive to light and sound. You can have strange tastes in your mouth or ringing in your ears. CSF can make its way into your nose, ears, sinuses, or other parts of your body. The symptoms can be debilitating and prevent you from coaching effectively.

The 51-year-old, who had been suffering from the effects and complications of a CSF leak, offered some very blunt advice for others dealing with similar back issues.

"I can tell you if you are listening out there — if you have back problems, stay away from surgery," he said. "I can say that from the bottom of my heart. Rehab, rehab, rehab."

Healthcare is a trillion-dollar industry, and back pain is pivotal in these costs. Not only are more people seeking treatment for back pain, but the price of treatment per person also is rising. In a Journal of the American Medical Association study, researchers at the University of Washington and Oregon Health & Science University compared national data from 3,179 adult patients who reported spine problems in 1997 to 3,187 who reported

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them in 2005. The study found that inflation-adjusted annual medical costs increased from \$4,695 per person to \$6,096. Imagine the cost today.

Health economists from Johns Hopkins University writing in The Journal of Pain reported the annual cost of chronic pain is as high as \$635 billion a year, which is more than the yearly costs for cancer, heart disease, and diabetes.

A Pub Med article stated, "In 2008, according to the Medical Expenditure Panel Survey (MEPS), about 100 million adults in the United States were affected by chronic pain, including joint

pain or arthritis. Pain is costly to the nation because it requires medical treatment and complicates treatment for other ailments. Also, pain lowers worker productivity. Using the 2008 MEPS, we estimated 1) the portion of total U.S. healthcare costs attributable to pain; and 2) the annual costs of pain associated with lower worker productivity. We found that the total costs ranged from \$560 to \$635 billion in 2010 dollars. The additional healthcare costs due to pain ranged from \$261 to \$300

billion. This represents an increase in annual per-person healthcare costs ranging from \$261 to \$300 compared to a base of about \$4,250 for persons without pain. The value of lost productivity due to pain ranged from \$299 to \$335 billion. We found that the annual cost of pain was greater than the annual costs of heart disease (\$309 billion), cancer (\$243 billion), and diabetes (\$188 billion). Our estimates are conservative because they do

> not include costs associated with pain for nursing home residents, children, military personnel, and persons who are incarcerated."

> Decompression is here to stay, and research studies show its effectiveness as an

alternative to surgery. However, insurance companies still want us to use \$9090, which is an unspecified code. They still say decompression is investigational. How can they ignore study after study by doctors from Harvard, Stanford, Mayo Clinic, and even the prestigious Johns Hopkins University?

Results

..."We are at war with

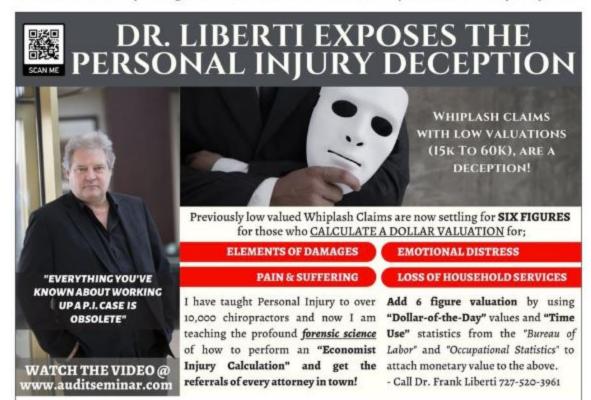
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At a mean follow-up of 37.3 months after primary discec-



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tomy, 75 patients (68%) experienced minimal to no back pain; 26 (23%) had moderate back pain requiring conservative treatment only; and 10 (9%) suffered severe back pain that required a subsequent fusion surgery at the site of the primary discectomy. The mean cost per patient for conservative treatment alone was \$4,696. The mean cost per patient for operative treatment was \$42,554. The estimated cost of treatment for mechanical back pain associated with postoperative same-level degeneration or instability was \$493,383 per 100 cases of first-time, single-level lumbar discectomy (\$4,934 per primary discectomy).

In a research study by Binod Prasad Shaw, MD, of Albert Einstein Medical College, and Michele K. Shaufele of Emory University, they stated that "in recognition of the extreme burden and impact that musculoskeletal disorders have on society, the United Nations, and the World Health Organization (WHO) have designated 2000-2010 as the bone and joint decade." They reported that 10 million Americans are currently disabled due to back pain.

So we know the costs are staggering, but where do we go from here? We are at war with back pain, an epidemic sweeping the nation that harbors more visits than McDonald's. Is there a better, cheaper way?

The answer is a resounding "yes." With NSSD, studies show its efficacy, and doctors from Disc Centers of America throughout the United States are showing that it can be affordable. While so many chiropractors are leaving their basic philosophies and moving toward medical integration and stem cell injections, they may be missing the best thing that ever happened to our profession, which is nonsurgical spinal decompression.

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Well, the cat was out of the bag; insurance carriers knew back pain was big business. Now with a potential new government administration thinking of socializing medicine, let's show the world how chiropractic and NSSD are the logical, affordable choice.

This technique and paradigm have changed the way the world looks to back pain. The treatment of choice is nonsurgical spinal decompression. Clinical studies have shown decompression therapy to be extremely effective in treating back pain.

Decompression therapy should be considered before the patient undergoes a surgical procedure, which permanently alters the anatomy and function of the affected lumbar spine segment. As a profession, we must take our place in the healthcare paradigm.

Once again, my partner and best friend, Dr. Perry Bard, my son Dr. Jason Kaplan along with a host of MDs, DCs, and myself, will be doing the National Certification Class on Nonsurgical Spinal Decompression. This year's class will be our 10th anniversary at Jupiter Florida on November 5-6th, come join us.



ners, Dr. Eric Kaplan and Dr. Perry Bard have developed Disc Centers of America, Concierge Coaches, and the first national certification program for nonsurgical spinal decompression a 12 CEU credit

During 32

years as bu-

siness part-

Dr. Jason Kaplan is a Parker University graduate practicing in Wellington, Florida with his wife, Dr. Stephanie Kaplan. Jason also is an Instructor for Disc Centers of America and teaches technique for the National Certification Program at Life University. To learn more, call 888-990-9660 visit thechiroevent.com or decompressioncertified.org.

For references please go to page 51.

Pain Relief at the Speed of Light!

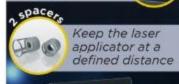
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