

The Wellness Express



Jump on the train to good health

Chiropractic Is Not Just for the Spine!

Presented by: Dr. Gohar Sheikh, DC

All your joints require movement to stay healthy and functional, not just the ones in your spine.

Proper movement of joints is directly dependent upon their alignment. As an alignment specialist, your chiropractor is concerned with the proper function of every joint in your body. Any time you feel pain, experience a restricted range of motion, or hear noises coming from your joints, you should talk to your chiropractor - an adjustment may be just what you need to restore joint health.

What Joints Outside the Spine Do Chiropractors Treat?

The Ankle

One of the most common injuries to the ankle is the inversion sprain. When your ankle is abruptly twisted, it causes inflammation in and around your ankle joint and some partial tearing of the ligaments that support it. This can result in altered biomechanics or misalignment of your bones in the foot and ankle. Faulty mechanics can actually be the cause of your ankle sprain.¹

Before considering adjustments for your ankle, your chiropractor will probably first recommend reducing the inflammation with ice, rest and elevation for about 72 hours. It's important for you to allow the initial stage of injury repair to run its course. This makes it possible for your chiropractor to perform a proper assessment of your ankle. Joint swelling can potentially mimic joint restriction, and your chiropractor wants to be careful about potential damage to the ligaments surrounding the ankle. However, being able to mobilize your joint as soon as possible is vital. If the joint remains immobile for too long, scar tissue can accumulate and muscles around the joint can quickly atrophy.

The Knee

Misalignment syndromes are often common in the knee. Think of the knee as a simple hinge joint, moving in a single plane. Any torque or twist of the lower leg places abnormal stress on the knee joint. Painful conditions of the knee resulting from misalignment include chondromalacia patella and patellofemoral syndrome.

If you experience knee pain, consult with your chiropractor. It's important to discover where the alignment issues originate.

Exercise of the Week

Pelvic Rotations – Figure 4

Difficulty: Easy

(Consult your chiropractor before starting this or any other exercise.)

Start: Lie down on back with legs bent to 90 degrees and feet on floor. Place arms out to side, palms up.

Exercise: Take one leg, and cross ankle over opposite knee. Then, let legs roll all the way to side so that foot rests on floor. Hold for 30-60 seconds, and then return to starting position. Switch sides, and repeat 2X per side.



Presented by:

Elign Chiro Health
www.elign.com | Tel: 604.293.2273
102 - 3823 Henning Drive, Burnaby, BC Canada, V5C 6P3

The lesser-known joint of your knee is called the proximal tibiofibular and is located on the outside part of your knee. The main bone creating this joint (the fibula) extends all the way down to the external part of your ankle, where it forms the lateral malleolus. Faulty positions of this bone can create problems in both your ankle and knee, especially when twisting injuries include this bone.² Chiropractic adjustments can be applied to reposition this bone at either joint, and can help alleviate pain caused by subluxations in these areas.

The Wrist

Like the ankle is to the lower extremities, the wrist is an important joint for the upper extremities.

Repetitive activities using the hands and arms can irritate the wrists. Gripping is the most common use of the hands. Nerves and muscles that contribute to the gripping action pass through an enclosed space called the carpal tunnel, located in the wrist. Any misalignment of the bones that make up the carpal tunnel, or irritation of the soft tissues that pass through it, can contribute to the painful symptoms of carpal tunnel syndrome.

Chiropractors are well equipped to deal with these issues and can recommend the best course of action. Sometimes a simple adjustment applied to the wrist can make the difference between pain and dysfunction or immediate relief.³ In some cases, you may need to ice, splint or perform specific exercises and stretches to improve the affected area.

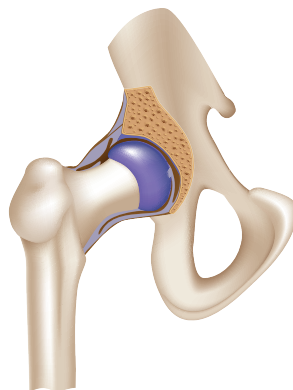
The Shoulder

Your shoulder is an extremely complicated joint. Not only does it require the greatest range of motion because of its functional needs, but it does so with the least amount of joint stability. While many other joints are afforded greater stability by the joints' structure itself, the shoulder requires a balance of strength and flexibility in the muscles that surround it. In addition, shoulder position is directly affected by poor posture, which can create problems in this area.

Chiropractors know that subluxations in the neck can easily irritate the sensitive nerves that pass through this area on the way to the shoulder. Restrictions in the upper spine can create a fixated curve here and force the head and shoulders to roll forward. This places excessive stress on the supporting tissues. Chiropractic adjustments can help with both these issues.



Remember, once any joint is returned to its proper function, whether by realigning it or improving mobility, it's still up to you to do the exercises and stretches that will help keep them that way!



Disclaimer: Information contained in this Wellness Express newsletter is for educational and general purposes only and is designed to assist you in making informed decisions about your health. Any information contained herein is not intended to substitute advice from your physician or other healthcare professional.

Copyright 2010 Mediadoc™

Quote of the Week

“Processed foods not only extend the shelf life, but they extend the waistline as well.”
- Karen Sessions



References and Sources:

1. Michaud TC: Aberrancy of the midtarsal locking mechanism as a causative factor in recurrent ankle sprains. *JMPT* 1989(Apr); 12(2): 135-144.
2. Duarte M. Proximal tibiofibular joint dysfunction. *Dynamic Chiropractic* 2010; 28(5).
3. Valente R, Gibson H. Chiropractic manipulation in carpal tunnel syndrome. *JMPT* 1994(May); 17(4): 246-249.



This newsletter is written and designed by Mediadoc™ exclusively for its chiropractic clients.

Writer/Editor: David Coyne

Writer: Dr. Christian Guenette, DC

Design: Elena Zhukova

Photos: Fred Goldstein