

# Kids and Chiropractic

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## Subluxations, Children and Chiropractic



**B**y nature, babies are born very healthy. They have been living in a perfect environment with everything they need being provided. As children they usually do not have aches and pains and when they do, they are usually forgotten as quickly as they came. However, something more serious could be going on. It's called Spinal Subluxation Degeneration. It is a slow and relentless condition that results from spinal vertebral misalignment or malfunction and eventually erodes the structure and functioning of the spine. It usually begins in childhood and results in permanent damage as an adult. This structural damage is worsened by the scientific knowledge that this spinal malfunction results in nerve damage, even in children.

Your next questions are: "How does this happen?" and, "Could my child have this?" Most often this spinal trauma is caused from the birth process itself, especially if it was difficult. Tossing your child in the air or yanking the child by one arm can cause a severe whiplash which is usually associated with car accidents. Also, falling off a bicycle or the everyday bumps that happen to children could cause spinal subluxations. Generally, children quickly become accustomed to these problems and go on with their daily activities.

Signs you can look for are: Do your children get colds often? Do they get ear aches or sore throats often? Are they hyperactive? When they were babies did they have colic or cry a lot for no reason? Were they bed-wetters? When your child walks or stands, look at his/her posture. Is one shoulder or hip higher than the other? Do their clothes fit unevenly? Does one foot point out or in?

These are just some of the signs of spinal subluxation. If you suspect a problem or just want your baby or child checked, let your Chiropractor examine your child for spinal subluxations. Only a Doctor of Chiropractic is trained to detect early stages of spinal degeneration. Your doctor will give you a full explanation of the problem and what is necessary for correction.

A Doctor of Chiropractic can also assist you in optimizing your child's spinal health, such as, letting your child crawl as long as he/she wants. This helps them develop the proper spinal curves that lead to a stronger and healthier spine, thus fewer spinal problems when they are adults.

When you bring your child to the Chiropractor, have the things you noticed about your child, and when they happened written down so the doctor can give your child the best care possible.

## **Birth Misalignments**

It is hard to believe that one of the first misalignments experienced can occur during the birthing process. Even during what is thought to be a normal delivery, twisting, pulling and the use of forceps subjects the spine of a newborn to extreme pressure which often results in a baby's first misalignment.

New studies have shown that spinal degeneration and distortion in both adults and the elderly are probably present as early as infancy and are often due to the birth itself.

As the child grows and becomes more active, misalignments can result from normal play activities and falls.

It is just as important to have a child's spine examined to insure healthy development, as it is to have a child's teeth checked regularly.



## **Early diagnosis important in the treatment of scoliosis**

Scoliosis, a lateral or sideways curvature of the spine, plagues an estimated 4 to 5 million Americans. This spinal disorder, often confused as a disease, usually appears during the early teens. Approximately 10 percent of the adolescent population has some form of scoliosis. It is more prominent in girls and is not limited to adolescents. Scoliosis can also affect younger children as well as adults.

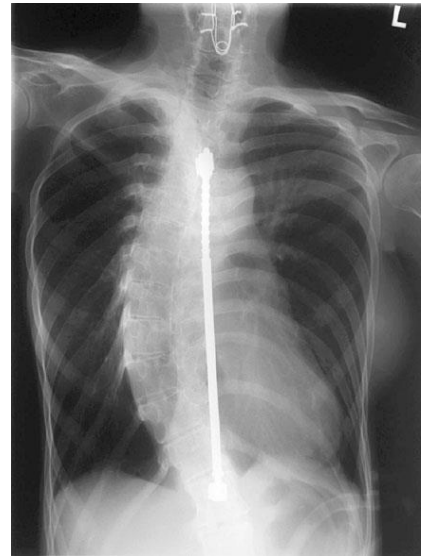
One of the most common signs of scoliosis is a prominent shoulder blade, often the right one. One shoulder may appear to be higher and the child may tend to "list" to one side. The hips may be uneven and one may seem to be higher than the other. The first sign of scoliosis is often that clothes will not fit properly. The hems of skirts or pants will appear to be uneven.

Scoliosis is often confused with poor posture, but it does not disappear as the child gets older. It has been known to strike in otherwise healthy children and often runs in the same family.

Delaying the treatment of scoliosis can lead to serious and even life threatening diseases of the heart and lungs. After the condition has progressed substantially, the correction becomes more difficult. More complex treatments, including surgery, may be necessary.

This is why regular checkups of both you and your children are a must. An untreated spinal curvature may advance quickly, especially during the period of rapid teenage growth.

When the curvature is discovered in time, there are chiropractic methods that usually correct the curvature or prevent its increase. Even as adults, chiropractic care can provide relief to scoliosis sufferers.



## **HAVE YOU HEARD? Children Need Chiropractic Too!**



### **Blocked Atlantal Nerve Syndrome in Babies and Infants**

This is the title of a most interesting paper by Gutmann which was published in German in *Manuelle Medizin* in 1987 and has now been reviewed in the September 1988 issue of *Journal of the Australian Chiropractors' Association*.

In the abstract to his paper Gutmann, a prominent specialist in manual medicine from Bad Sassendorf, West Germany, concludes:

- **Blocked nerve impulses at the atlas cause many clinical features from central motor impairment to lower resistance to infections – especially ear, nose and throat infections.**
- **Chiropractic and radiological examinations are “of decisive importance” for diagnosis of the syndrome.**
- **Chiropractic can often bring about successful results, because the therapy aims at the cause of the problem.**

Gutmann reports examination and adjustment of more than 1000 infants with the atlas blockage or subluxation. Three case reports are given. One describes a boy of 18 months with early relapsing tonsillitis, frequent enteritis, therapy resistive conjunctivitis, frequent colds and earache, and increasing sleeping problems (fear of lying down or sleeping, falling from exhaustion, screaming during the night). After the first specific adjustment of the atlas the child demanded to be put to bed and slept peacefully until morning. The conjunctivitis cleared completely, and previously disturbed appetite returned to normal.

From his and other German Medical studies Gutmann concludes that approximately 80% of all children are not in autonomic balance and that many have atlas blockage or subluxation. He has been “constantly amazed how, even with the lightest adjustment with the index finger, the clinical picture normalizes, sometimes gradually, but often immediately.”

His colleague Frymann, he reports, examined a random group of 1250 babies 5 days past partum. 211 suffered from vomiting, hyperactivity and sleeplessness. Manual examination revealed cervical strain in 95% of this group. Release of this strain by specific manipulation “frequently resulted in immediate quieting, cessation of crying, muscular relaxation and sleepiness.”

Gutmann's highly significant conclusions are:

- i) “Observations of motor development and manual control of the occipito-atlanto-axial joint complex should be obligatory after every difficult birth”; and
- ii) With any developmental impairment this joint complex “should be examined and, if required, specifically adjusted....*the success of adjustment overshadows every other type of treatment.*”

*'Blocked Atlantal Nerve Syndrome in Babies and Infants', Gutmann G. Manuelle Medizin (1987) 25:5-10. 'A Priceless Legacy – Lost, Strayed or Forfeited', Peters R and Chance M, J Australian Chiropractors Association (September 1988) 18(3):81-84*

# BED-WETTERS CURED BY CHIROPRACTIC!!!

Dear Abby

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## 15-year-old Bed-Wetter Cured By Visit To Chiropractor



Dear Abby:

After reading the letter from “Desperate Mom”, whose 20-year-old son still wets the bed, I was compelled to write.

Since her son has seen doctors and tried medications and they have had no positive results, maybe she should do what I did. I took my 15-year-old twin sons (both daily bed-wetters) to a chiropractor, and within a month, both boys were completely cured of their bed-wetting. Regular medical doctors could not help them.

As this chiropractor explained it to me, there is a certain part of the spinal column that regulated the bladder – I can’t explain it very well – but all I can say is it worked, which meant everything in the world to me and my boys. These kids couldn’t go to camp or sleep over at a friend’s house because of their terrible problem, and I was a slave to the washing machine, doing those bedsheets and blankets every day.

I don’t want to embarrass my boys or the medical doctors in my community, so if you use this letter in your column, just sign me...

**A True Believer in South  
Carolina**

**Dear True Believer:** I believe you. I have several hundred letters bearing the same message concerning chiropractors. I am well aware that some in the medical profession will criticize me for giving what sounds like a “commercial” for chiropractors – the “stepchildren” of the medical profession – but I would be less than honest if I did not publish your letter.



# HEALTH & WELLNESS

## Top 40 Research Report

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### **Conflict of Interest Taints Antibiotic Research**

Antibiotics may not be the best way to treat ear infections. This double-blind study from the University of Pittsburgh found that children treated with amoxicillin didn't recover any faster than children treated with a placebo, and were even more likely to have their infections recur.

These results contradict a 1987 analysis of the same data, which appeared in the *New England Journal of Medicine* and supported amoxicillin treatment. The *Journal of the American Medical Association* decided to publish this alternative report after reviewing evidence showing (1) that the authors of the original report omitted data that did not support amoxicillin, (2) that amoxicillin's manufacturer paid \$260, 000 in honoraria to the scientist responsive for the pro-amoxicillin report, and (3) that the manufacturer paid \$3.5 million in research grants to the research center where the study was performed.

E.I. Cantekin et al., "Antimicrobial therapy for otitis media with effusion ('secretory' otitis media)," *Journal of the American Medical Association* 266 (Dec. 18, 1991): 3309-17. See editorial comments on pages 3333-34 of the same issue.

### **Concern Grows Over Insertion of Tubes to Fight Ear Infection**

From the *New York Times*: The most common operation being performed on children today is the insertion of tubes into the ears to combat the effects of middle ear infection. There is now growing concern over its effectiveness and controversy about when it is appropriate with few good studies to support either side.

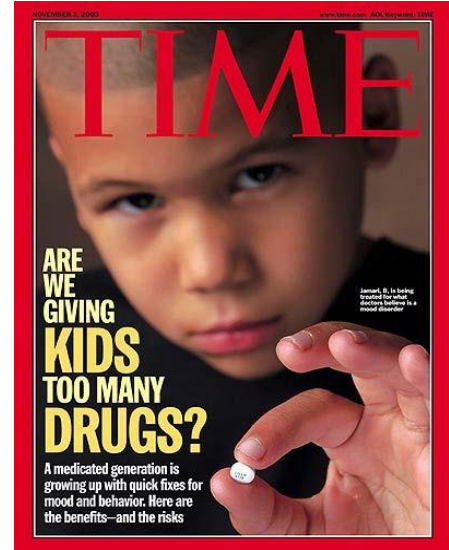
Dr. Jack L. Paradise, a pediatrician at the University of Pittsburgh School of Medicine states, "Far too many children are getting tubes – for every one child who needs and gets tubes, about 20 others who don't need them also get them. They nearly always cause permanent scars on the eardrum and could impair hearing decades later." Dr. Paradise also states the evidence is extremely weak that the persistent fluid in the ears can cause lasting handicaps. The studies are inconclusive, yet they have been accepted uncritically.

There is additional risk that the child will react adversely to anesthesia during the operation, but the tubes have additional hazards including changes in the eardrum that may impair its function. Abnormalities were found ranging from 32-67% of cases after tube surgery, with long-range effects not known or studies. There is no agreement as to when tubes should be used. Chiropractic should be a first in all these proposed cases.

# ATTENTION DEFICIT HYPERACTIVITY DISORDER

It seems as if every child is now being diagnosed as ADHD. The criteria used to make this diagnosis fits almost every child we've encountered in our practice. According to Peter Breggin, M.D. and his wife Ginger Rose Breggin in the book *The War on Children*, ADHD tends to be a middle class diagnosis. Let's take a look at the diagnosis criteria:

1. Often fidgets with hands or feet, squirms in seat
2. Has difficulty remaining seated when required
3. Is easily distracted
4. Often blurts out answers to questions before they have been completed
5. Has difficulty awaiting turn when playing games
6. Difficulty following instructions
7. Jumps from one thing to another
8. Often talks excessively
9. Interrupts others
10. Often loses things
11. Does not seem to listen
12. Has difficulty playing quietly



If you have at least 8 of these criteria you are a candidate to be diagnosed as ADHD. Personally, I am now concerned about myself and even the majority of my friends as we come close to fitting this pattern. Rather than use the term ADHD the Breggins call it DADD – Dad Attention Deficit Disorder. They feel that a lack of parental attention and a lack of discipline very often leads to the diagnosis of ADHD. Some neurologists are wondering if hyperactivity disorder is in the eye of the beholder. Years ago, Dr. Mendelsohn questioned whether we were taking below active children and comparing them to normal children and then calling the normal children hyperactive.

After examining several diagnosed ADHD children, we find an upper cervical subluxation that can lead to neurotransmitter involvement but certainly not to the point of drugging the child into a state of zombism. These drugs are Class II narcotics – the same class as cocaine. We see signs around schools that proclaim them as DRUG FREE ZONES, yet if we look inside the schools they are definitely not Drug Free.

I am going to recommend two books for you to give your patients: ***Talking Back To Prozac*** and ***The War on Children***. Both of these books are written by Peter Breggin, M.D. and Ginger Rose Breggin. These books will astound you with their insight into the Pharmaceutical industry and the FDA.

Webster, Larry, "Attention Deficit Hyperactivity Disorder". *International Chiropractic Pediatric Association*. (January 1996).



## **INFECTIOUS DISEASES NOW THIRD LEADING CAUSE OF DEATH**

The Center for Disease Control reported Tuesday, Jan. 16, 1996 that deaths from infectious diseases rose 58% between 1980 and 1992. This has now passed accidents and strokes as a leading cause of death. Researchers indicated growing resistance to antibiotics have played a key role in the turn of events. This increase had occurred despite predictions that infectious diseases would wane in the United States.

Two groups of researchers indicate that the spread of resistant microbes is being aided by the over reliance on antibiotics as a cure-all. Researchers further state that an educational program for doctors and patients is needed to reduce the demand and use of unnecessary antibiotics.

In a current issue of JAMA, researchers in Iceland say a two year effort to reduce antibiotic use in the nation's day care centers has reduced the number of resistant ear infections. Anthony Fauci in the same issue says "New guidelines on the use of antibiotics is needed." *Atlanta Constitution* – 1-17-96

## **ULTRASOUND USAGE CONNECTED TO SPEECH DEFECTS**

Researchers from a University of Calgary, Alberta study in 1993 & 1994 involving 72 children ages 2 to 8 who had undergone speech evaluation, found the children to have delayed speech patterns of unknown causes. Their conclusion: there was an association between prenatal ultrasonography exposure and these abnormal speech patterns. Physicians are being cautioned to tell their patients about the fetus sensitivity to noxious agents.



Webster, Larry, "Attention Deficit Hyperactivity Disorder". *International Chiropractic Pediatric Association*. (January 1996).



## **REVIEW OF ADHD STUDY OF 12 CASES**

The ICPA recently completed a pilot program of ADHD children. The criteria for acceptance into the program was as follows:

1. Children between the ages of 5-12. This age span was selected in an effort to rule out any maturity factors that could mislead us in the final analysis.
2. Must have a prior diagnosis of ADHD with verification
3. Parents must attend a health consultation prior to determine acceptance of children into the program and willingness of parents to cooperate in the program
4. Participant must follow schedule of care or be dismissed from the study

The study length was to be of one year's duration with all evaluation and care free. Emphasis was placed on the drug free aspect of the program and participants were to be re-evaluated every 60 days. We advertised in a local newspaper for participants with 19 children responding to the ad and placed under initial care. All 19 had a prior diagnosis of ADHD with all being prescribed Ritalin.

The clinical picture of all were very similar: poor grades in school, emotional outburst, low immune functions, lack of concentration in school, and overall emotional instability. Two also suffered from stuttering. Of these 19, only 8 completed our program. The others dropped out for a variety of reasons, such as traveling distance or inability to follow the visit schedule. The response factor accrued in approximately two months in almost all participants.

The visit schedule started at 3 times per week and reduced after 30 days. The next visit scheduled toward the end of the program averaged 1 time each week for 4 weeks. The area of the spine addressed was the upper cervical area. The results of the study was so encouraging that with the efforts of Dr. Jay Holder, we are expanding the program substantially in April to 75 children. These 75 children will be divided into groups of 25 in the following manner:

25 on medication and being adjusted; 25 under medical care and monitored only; 25 not on medication and under chiropractic care. This program will also be of 1 year in duration. Independent evaluation will be made on all participants with the evaluator not being aware of which group is under chiropractic care.

The expansion of the ADHD program is on of several studies that the ICPA intends to expand in the next two year. It is our goal to make our facility the number 1 research facility in the area of Chiropractic and Children.

## CASE HISTORY

Five week old female with premature closure of the sutures. Her pediatrician had recommended surgery for this condition and parents panicked (according to her statement).

Care was started in November 1994. We used the Webster Cranial Suture adjustment along with an occasional atlas adjustment (toggle).

After 2 months of care, the sutures had reverted back to normal growth (child was re-examined by her pediatrician). The pediatrician also stated “not only are the sutures now normal, but her motion skills are very impressive”. The mother stated “there is no longer a risk of surgery thanks to chiropractic”.



Webster, Larry, “Attention Deficit Hyperactivity Disorder”. *International Chiropractic Pediatric Association*. (January 1996).



## The Baby Adjuster's Newsletter™ **BABY TALK**



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### **Infantile colic and chiropractic care**

*"According to published studies infants with colic respond favorably with chiropractic adjustments"*

*By Jennifer Peet DC, Certified CBP*

Infantile colic can be as troublesome for the parents as the child experiencing the condition. This condition is characterized by a multitude of symptoms, the most evident of which being episodic fussiness that lasts for hours, even days, and does not respond to simple comforting methods. To make matters more complicated, it rarely responds to traditional health care. This leaves many parents troubled as the infant's episodes of crying and fussiness continue.

Symptoms often include uncontrollable crying during which the infant appears to be in pain and pulls his/her legs up. At times the child's abdomen will be hard. Occasionally, the passage of flatus will give relief. Attacks may last for hours.

In analyzing the colicky infant it is important to rule out central nervous system damage, extremity fractures, and abdominal problems such as a hernia or intussusception. Obviously, any of these conditions may cause the infant to cry uncontrollably and would require a medical referral. Even in the rare case that one of these conditions is present, it is in the best interest of the child to begin chiropractic care on the initial visit if vertebral subluxations are found so that the process of restoring normal nerve supply may begin.

Two chiropractic studies relating to infant colic are of particular interest. The first study, was done by a group of Danish chiropractors, revealed positive results when spinal adjustments were rendered. The second study involved a group of 316 infants with colic of which 94% reported successful resolution within the first two weeks of care.

Although chiropractic care does not treat the symptoms of colic, the author has found, after adjusting hundreds of babies, that most will respond within the first few weeks. Why does chiropractic work when other methods fail? It's simple really. Nerve supply is vital to proper function in every system of the body including the stomach, intestines and other abdominal organs. The sixth to ninth or tenth thoracic vertebrae house the gastric sympathetic preganglionic fibers. They reach the celiac plexus via the sympathetic trunk ganglia and the greater and lesser thoracic splanchnic nerves. Vertebral subluxations causing nerve interference in this area would adversely affect gastric function. The two vagus nerves also play a major role as they form the esophageal plexus around the lower esophagus which is reinforced by branches from

the thoracic section of the sympathetic trunks and from the greater and lesser thoracic splanchnic nerves.

Normal innervation of the intestines is also important. The preganglionic sympathetic fibers are located in the lowest four or five thoracic and upper two lumbar vertebrae. The parasympathetic nerve supply to the intestines is from the vagus and the splanchnic nerves. Vagus involvement in infant colic should not be overlooked due to the close proximity of the ventral roots of the 1<sup>st</sup> spinal nerve. Spinal adjustments that correct nerve interference in the upper cervical area have the likelihood of a positive effect on the functioning of the vagus nerve. Some children with colic respond with just cervical adjustments, others require a full spine approach to normalize the nervous system.

As the infant with colic responds to chiropractic care, the parents usually note that the child is sleeping for longer periods without fussing. The parents should be encouraged that vertebral subluxations take time to correct. Even after the child shows improvement, generally the problematic subluxations are not near correction. So that more serious health problems do not evolve the child should continue until the subluxations are resolved. This usually requires three to twelve months depending on the severity and longevity of the presenting vertebral subluxations.

The chiropractic approach is to correct spinal subluxations, with special attention to the cervical and thoracic spines. Regular adjustments should restore normal function of the nervous system, which will allow the infant's digestive tract to function in a healthy manner. Without developing abnormal gas with the resulting pains the infant is happier and healthier.



“In a study of 316 children a satisfactory result occurred within **2 weeks in 94% of the cases** receiving **chiropractic care**. 51% of these infants had prior, unsuccessful treatment, usually drug therapy (83%).”

*Klougarat N. Nilsson N. Jacobsen J. Infantile colic treated by chiropractors: a prospective study of 316 cases. Manipulative Physio The 1989; 12 (4): 281-8 / Medline ID: 89361049*

## HELP FOR ASTHMA, EMPHYSEMA & BRONCHITIS

### THE BREATH OF LIFE

Breathing is the process by which your body takes in “raw air” and makes it into “food” for cells, tissues and organs. Because raw air is often too cold, dry and dirty to use immediately, it must first be filtered, warmed, cleansed and humidified by “air conditioning” apparatus in your nose and nasal cavities before it enters your *trachea* or “windpipe”, bronchi and lungs. Your trachea is a tube in your throat surrounded by 15 to 20 stiff rings of cartilage so that it never closes (and suffocates you). If you place your fingers under your Adam’s apple or larynx you can feel the trachea and its rings.



### THE BRONCHI AND LUNGS

In your chest your trachea divides into two branches – the left and right bronchi. They enter the lungs, where they branch over and over to form what looks like an upside-down tree (the bronchial tree). The tiniest branches are called the bronchioles, and these actually touch the lungs. It is here where oxygen enters the blood and carbon dioxide and water vapor leave it, to be exhaled out your mouth and nose. Of course the bronchi and bronchioles must remain clear at all times and that is precisely what does not happen to asthmatics, those suffering from the condition known as bronchial asthma, when they suffer an “attack”.

### ASTHMATIC ATTACK

During an asthmatic attack the bronchioles become swollen, go into spasm and fill with mucous. Asthmatics feel as if they’re being strangled; they struggle to get air into their lungs and, once in, the air is trapped behind the mucous and then it’s nearly impossible to exhale!

Asthmatics struggle for every breath, literally gasping and wheezing for life. Attacks can last from several minutes to several hours and vary greatly in severity. In some patients the wheezing, gasping and struggling go on continuously to a greater or lesser degree. In long-time sufferers, “The chest becomes...a ‘barrel chest’ (permanently enlarges).” Attacks may be triggered by allergic reactions, but they may also be set off by emotional stress, physical exertion, or irritants like cigarette smoke.

Asthma was never a killing disease: “Medical folk-wisdom used to hold that ‘no child ever dies of asthma’, but since the 1960s there has been an “epidemic” of asthma deaths among young persons.” In 1985 there were about 300 deaths from asthma but since 1994 5000 Americans die from this condition each year with over fifteen million suffering from it. Asthma is now the leading chronic illness among children. Why?



Many scientists do not know. However, childhood vaccination is becoming implicated as a major cause for this increase.

### BRONCHITIS

In chronic bronchitis there is increased mucous secretion in the trachea and bronchial tubes which causes a mucous cough or “smoker’s cough” so called because cigarette smoking is the condition’s most important single cause. In a non-smoking adult bronchitis is very rare and is usually associated with an allergy (bronchitis is more common among the children of smokers than of non-smokers). The “smoker’s cough” stage of bronchitis is known as “simple chronic bronchitis.” This may develop into “chronic bronchitis” or “chronic obstructive bronchitis”

### EMPHYSEMA

Chronic emphysema is usually associated with long-term smoking: many bronchioles are blocked, and the lung itself is destroyed with its breathing surface reduced to less than one-quarter normal. With less lung the blood gets less oxygen, and this can cause high blood pressure, which can overload the right side of the heart and cause right heart failure. People with chronic emphysema can suffer for years from severe “air hunger” (*hypoxia*) and too much carbon dioxide in the blood (*hypercapnia*). These conditions cause lethargy, muscle weakness, impairment of mental function and, in severe cases, a slow death.

### THE STANDARD MEDICAL APPROACH

The standard medical approach offers no cure for asthma, bronchitis, or emphysema. Patients are told to avoid physical or emotional irritants and given temporary relief with drugs like cortisone and bronchodilator inhalers. These drugs may cause severe side effects including addiction. Sadly, heavy use of a common asthma drug (beta-agonists and theophylline) has been linked to a greater risk of dying from the disease. Desensitization shots, similar to these given for hay fever, have varying effectiveness with asthmatics.

For chronic bronchitis quitting smoking (or changing jobs) is the best, although not the most easily followed advice. For certain types of bronchitis, long-term antibiotic therapy may be prescribed.

Treatments for emphysema include removal of irritants, treatment of infection, bronchodilators, humidification of inhaled air, oxygen therapy, and surgery for tissue obstructions.

Many people with respiratory ailments feel condemned to a lifetime of taking drugs without ever being rid of their condition. Many others, however, are turning to the drugless healing of chiropractic.

## **THE CHIROPRACTIC APPROACH**

Chiropractic benefit for asthma and respiratory problems was first noticed in clinical histories. Typical of such reports is that of a 6-year-old boy who had asthma since age 3 and was using inhalers (Beclvert and Vertolin) up to three times a day who received chiropractic care: "Adjustments were delivered to the cervical, thoracic and lumbar areas. Significant progress. Could run during soccer games...slept more soundly. Hardly ever had bouts with mucous clogged nasal passages...inhalant use stopped.

In another case history a 34-month-old boy with asthma and enuresis (bed-wetting) had not responded to medical care. More than 20 emergency hospital visits had taken place for the asthma attacks during a 12-month history. Three chiropractic adjustments were administered over an 11-day period and the asthma symptoms and enuresis ceased for more than 8 weeks. The asthma and enuresis recurred following a minor fall from a stepladder but disappeared after adjustments. After a two year follow-up the mother reported no recurrence of the asthma or the enuresis.





## **Autism and Mercury**



**MOUNTING EVIDENCE** suggests that **Thimerosal**, a mercury-based preservative in children's vaccines, may be responsible for the exponential growth of autism, attention deficit disorder, speech delays, and other childhood neurological disorders now epidemic in the United States.

Robert Kennedy Jr., The Boston Globe, July 1<sup>st</sup>, 2005

“Low levels of mercury used in vaccines preserved with thimerosal can trigger irregularities in the immune system cells and is suspect as a cause of autism.”

Dr Issac Pessah, Center for Children's Environmental Health, University of California, Time Magazine, May 5, 2006

### **Links between autism and thimerosal**

Autism affects **500,000 to 1.5 million Americans** and has grown at an annual rate of 10 to 17 percent since the late 1980s. California found a 273 percent increase in autism between 1987 and 1998. Maryland reported a **513 percent increase in autism** between 1993 and 1998 and several dozen other states reported similar findings. Some scientists say the estimated number of cases of autism has increased 15-fold – 1,500 percent – since 1991, when the number of childhood **vaccinations doubled**. Whereas one in every 2,500 children was diagnosed with autism before 1991, **one in 166 children now have the disease**.

**This increase in reported autism cases eerily parallels the increase in the number and frequency of thimerosal-containing vaccinations administered to infants.** As of today, children are given as many as 21 immunizations in the first 15 months of life. After a number of scientists and concerned activists noticed the correlation, an investigation was launched to get to the heart of the matter.

Dawn Prate, Newstarget.com, September 22, 2005

### **The role of chiropractic in the care of a four-year-old boy diagnosed with Autism Spectrum Disorder (ASD)**

Joel Alcantara, DC (1) and Kim McCann-Swanson, DC, DACCP (2) Presented at Pangea: a Conference for the Wellness of Children

#### **Background:**

Autism is a complex, behaviorally defined disorder of the immature brain. Autism is not a disease but a syndrome with multiple non-genetic and genetic causes.

**Objective:** To describe the role of chiropractic care in the management of a patient with autistic spectrum disorder.

**Clinical features:** A four-year-old boy was diagnosed with autism at 23 months. His mother presented him for chiropractic evaluation and possible care with the hope that chiropractic care might help his frequent ear infections. The mother also reported that the child was very active but his speech and communication skills were a challenge.

**Intervention and Outcome:** The patient was cared for using the Webster toggle headpiece and Logan Basic technique to the cervical spine and sacrum. According to the patient's mother, her little boy's **speech and ability to communicate improved dramatically following adjustments.**

**Conclusion:** This case report **provides supporting evidence that patients with ASD may benefit from chiropractic care** characterized as Toggle Recoil and Logan Technique. This case report encourages further investigation into the role of chiropractic care in the integrative management of patients with autism.

### **Case Study - Autism.**

Rubinstein, HM, *Chiropractic Pediatrics* Vol. 1 No. 1, April 1994

This is the case study of a seven year old female diagnosed with autism. The child has a history of sexual and physical abuse. The little girl would slowly turn in circles in place while singing an incomprehensible song with a glazed stare and blank expression. Spinal examination revealed a right posterior and superior C1 with a frequency of about twice a week. **After ten months of care she was able to carry on conversations, carry out commands, dress and groom herself. Cognitive development progressed to where she was able to learn, read, and participate in public school.**

### **Case report: autism and chronic otitis media**

Warner SP and Warner TM. *Today's Chiropractic*. May/June 1999.

This is a case report of a 3 ½ year-old girl with autism. She was non-verbal, had compulsive disorders, daily rituals, head banging and violence. **After chiropractic, care began within one month her parents and teacher noticed a 30% improvement socially. After one year of care, an 80% improvement was noticed.** Head banging and other rituals diminished by 50% with less violent behavior. She had chronic serous otitis media and had been on antibiotics for one year. Within a **one-week period** after her first adjustment, **antibiotic use stopped** due to a **70% improvement** in her otitis media.



## First Mercury Poisoning/Vaccine Case Filed



The law firm of Waters & Kraus, LLP has filed the first known civil case alleging that the mercury based preservative thimerosal, used recently in more than 30 childhood vaccines, has caused mercury poisoning in many children.

The symptoms of mercury poisoning are, in many cases, identical to the symptoms of AUTISM.

An infant can receive 62.5 milligrams of mercury per visit. Children have been exposed to cumulative levels of mercury from the vaccines that exceed 100 times the threshold safety levels that have been established by the United States environmental Protection Agency.

California has reported a 273% increase in Autism in the last decade.

Counter Et Al vs. Abbott Laboratories Et Al, Case # GN 100866, 200th District Court-Travis County, Texas

## Vaccines and Immune Suppression

**Vaccines**, all vaccines, are **immune suppressing**; that is they depress our immune functions.

**Chemicals depress our immune system**; the virus present depresses immune function, and the foreign DNA/RNA from animal tissues depresses immunity.



[www.mercola.com](http://www.mercola.com)

## Three Girls Died, Others Hospitalized, After HPV Vaccine



**Gardasil**, Merck's new vaccine for human papillomavirus (HPV), **severe side effects** are being reported

**1,637 adverse reactions** have been reported by Judicial Watch, a public interest watchdog, including three girls who died shortly after receiving the immunization.

British Medical Journal, June 9, 2007; 334: 1182-1183

### **Dr. Mercola's Comment:**

"...some concerns that Gardasil may cause infertility"

"...Merck has manipulated the medical and political system to FORCE children to get this dangerous vaccine for their own bottom line profit. The potential promised reduction of cervical cancer is the bait they use."

"....Merck, the manufacturer of this vaccine, is the same company that made Vioxx that killed over 60,000 people."



British Medical Journal, June 9, 2007; 334: 1182-1183

## Flu Shots Are Virtually Worthless, says new British Medical Journal Analysis



Flu vaccines are **largely ineffective** in the populations for which they are most highly recommended, according to a new study published in the Oct, 28 issue of the British Medical Journal

“We’ve got an **exaggerated expectation** of what vaccines can actually do,” Dr. Tom Jefferson said. “I’m hoping American and European taxpayers will be alerted and start asking questions.”

United States health authorities currently recommend flu vaccine shots for most Americans – children 6 to 23 months; kids 23 months to 5 years old.

Jefferson notes that recommendations for flu vaccines have significantly increased in recent years – a move he says **may not be justified**

Consumer health advocate Mike Adams called flu vaccine shots “one of the **greatest medical cons** perpetrated on the populations of the world,” and questioned new U.S. policies pushing the vaccines on young children and expectant mothers.

Source: Jessica Fraser, Newstarget.com

"Flu vaccines "**not worth the bother**" Flu vaccines may be a massive **waste of time** and money, an expert warned today. There is **little medical evidence** that the vaccines have any kind of beneficial effect!

British Medical Journal

### Dangers of The Flu Shot

According to the CDC Web site, the actual **number of deaths from the flu** per year is about **257 not 36,000**.

What’s in a flu vaccination?

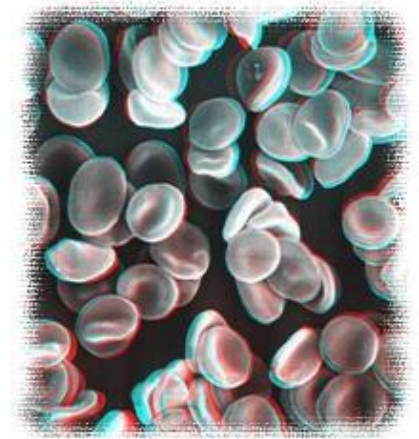
- **Mercury!!!** 2nd most dangerous substance on earth. **Destroys** the nervous system and immune system. Associated with Multiple Sclerosis, Central Nervous System Disorders, Autism and Alzheimer's Disease!
- Ethylene glycol (antifreeze) Exposure to ethylene glycol can damage the kidneys, heart, and nervous system.



- Phenol (disinfectant) Exposure to phenol can produce skin burns, liver damage, dark urine, irregular heart beat, and even death.
- Formaldehyde (known cancer causing agent)
- Neomycin and Streptomycin (antibiotics)
- Aluminum associated with Alzheimer's disease and seizures and also cancer producing in laboratory mice.

**Is this something you want to inject directly into your blood or your children's?**

Years ago the CDC policy was never give a flu shot to a pregnant woman or baby because of the **dangers and complications** it would cause! Now it is recommended for these 2 groups! How is it dangerous one year and now it is safe this year?



The flu vaccine contains only 3 strains of the flu virus! Even though there are many other stains that are out there. According to the CDC the flu vaccine in the elderly is about 30 to 40% effective!

**\$75,000 VACCINE OFFER**

THE FOLLOWING OFFER is made to U.S.-licensed medical doctors who routinely administer vaccinations and to pharmaceutical company CEOs worldwide:

Jock Doubleday, director of the California 501(c)3 nonprofit corporation Natural Woman, Natural Man, Inc., hereby offers \$75,000.00 to the first medical doctor or pharmaceutical company CEO who publicly drinks a mixture of standard vaccine additives ingredients in the same amount as a six-year-old child is recommended to receive under the year-2005 guidelines of the U.S. Centers for Disease Control and Prevention. To this day, no one has taken the challenge! What does that tell you?

To sum up all of this! The **flu is not a dangerous virus**, at most it kills 257 people per year who are immune compromised! Even if the vaccine worked they are **injecting dangerous chemicals and poisons into the body which will lead to some of the most devastating diseases in existence**, all because you don't want the FLU! **DOES THAT MAKE ANY SENSE TO YOU!**

If vaccinations were safe why doesn't a pediatrician or medical doctor come forward and take the challenge of drinking the mixture from these shots! Because they know the ingredients will cause cancer and other diseases in their body! Before your doctor gives you or your child a vaccine, ask them to drink the mixture first!

CDC Website: [www.cdc.org](http://www.cdc.org)

## **French Ministry of Health Bans Hepatitis B Vaccine on School Age Children**

The Ministry of Health announced a decision to **suspend** routine hepatitis B immunization of children in French schools.

The reason for this decision was apparently the **increased risk** of autoimmune diseases associated with the vaccine.

A study from the US government showed that when hepatitis B immunization was given starting after two months of life, it was associated with almost **doubling the risk of diabetes**.



**Long term safety studies are typically not performed on vaccines in order to have them approved for marketing.** “Without these studies, we **cannot be sure that the benefits of immunization exceed the risks** and thus we should not mandate the hepatitis B or other vaccines” John B. Classen, M.D.

## **Measles, Mumps, Rubella (MMR)**



Japan is virtually the only developed nation to turn its back on the vaccine (MMR). **Government health chiefs claim a 4 year experiment with it has had serious financial and human costs.**

The MMR was banned in Japan in 1993 after 1.8 million children had been given 2 types of MMR and a **record number developed non viral meningitis** and other adverse reactions were recorded.

Of 3,969 **medical compensation** claims related to vaccines in the last 30 years, **25%** have been made by those badly affected by the combined measles, mumps and rubella vaccines.

An analysis of vaccinations over a three month period showed one in every 900 children was experiencing problems.

Dr. Joseph Mercola, M.D. [www.mercola.com](http://www.mercola.com)

## Children & Drugs

A whopping 1 of every 17 times a medication is ordered to be given to a hospitalized child the child receives the **wrong drug or dose** according to a study in JAMA. (JAMA 2001;285 (16):2114-2140).

The Journal of the American Medical Association reported in February of 2000 that the use of certain psychotropic drugs, like antidepressants and stimulants, in 2 to 4 year olds doubled or even tripled between 1991 and 1995.



The United States consumes **90%** of the world's **Ritalin**. Production of Ritalin is up 700% since 1990 and nearly 5 million people in the U.S.-mostly children-are on Ritalin.

Between 1990 and 1996, the number of children in the U.S. using Ritalin grew by 250%.

**Up to 30% of cocaine addicts also take Ritalin: 1600 children die each year from allergic reactions to aspirin** (New Scientist, April 16, 1998).

## About Tylenol Risks



People who take Acetaminophen (Tylenol) every day for a year, increase their risk of kidney failure by **40%**

The link between liver damage and Acetaminophen was reported 3 decades ago.

**Children's Tylenol** now has a **warning** label due to the fact that **100 children die** per year due to **liver or kidney failure**.

Health Facts, April 1996 v 21, n 203 Associated Press, Jan 5, 1996



## **SIDS – Sudden Infant Death Syndrome & The Necessity of Chiropractic**



“In some infants when the head is brought into extension, the posterior arch of atlas inverts through the foramen magnum. This often caused mild to severe vertebral artery compression.

**10 of 17** infants studied demonstrated this atlas inversion. **All ten were SIDS deaths.**

Giles FH; Bina M; Sotri A; Infantile Atlanto-occipital Instability/ The Potential Danger of Extreme Extension. Am J Dis Child 19/9; 133 (1): 30-7 / Medline ID:79101175

### **A Possible Cause of SIDS**

Vertebral artery compression that cuts off blood flow to the brainstem has been suggested as an underlying cause of sudden infant death syndrome (SIDS). This study, published in the journal Pediatrics, involved postmortem examination of the vertebral arteries of 20 infants who died of SIDS or other causes.

In five of the cases the deceased infant's neck was extended; in nine cases it was rotated 90 degrees, and in six cases the head was held in the neutral position. Both macroscopic and microscopic evidence of vertebral artery compression was found in some of the extended or rotated necks of infants. No vertebral artery compression was detected in the necks held in the neutral position.

#### **According to the investigators:**

- This study provides direct evidence that both neck extension and rotation in infants can compress the vertebral arteries between the atlas and the occiput or at the C1 transverse foramen.
- Architectural anomalies in arteries at the base of the brain are risk factors threatening reduced vertebrobasilar flow that could cause acute brainstem ischemia and death.
- Because an infant tends to rotate or extend its head in the prone sleeping position to clear its nose from the bedding, vertebral artery compression caused by these head movements could explain why the prone position is a major risk factor for SIDS.

Because most infants die of SIDS between one and six months of age, the combination of risk factors seems to be greatest in that period. Before that, an infant probably lacks the strength and coordination to rotate or extend its neck enough to cause artery compression. After that, as the infant's neck anatomy develops, it has greater protection from the risks of SIDS. In those critical months, the dangers of the prone sleeping position are greatest.

Pamphlett R, Raisanen J, Kum-Jew S. Vertebral artery compression resulting from head movement: A possible cause of the sudden infant death syndrome. *Pediatrics*, Feb. 1999;103(2), pp460-63.

### **Vertebral Artery Compression Resulting From Head Movement: A Possible Cause of the Sudden Infant Death Syndrome**

From the \* Neuropathology Unit, Department of Pathology, University of Sydney, Sydney, and the † New South Wales Institute of Forensic Medicine, Glebe, Australia

**Objective.** Vertebral artery compression causing brainstem ischemia has been suggested to underlie the **sudden infant death syndrome**. Vertebral artery distortion from neck movements has been demonstrated by angiography in infants, but direct evidence for arterial compression is lacking. In an attempt to demonstrate vertebral artery compression from head movement, we examined at postmortem the vertebral arteries of infants after neck extension or rotation.

**Methods.** The C1-C7 spinal column, together with a 2-cm rim of skull base, was removed from 20 infants dying from sudden infant death syndrome or other causes. In 5 cases the neck was extended, in 9 cases it was rotated 90° to the right, and in 6 cases the neck was held in the neutral position. The neck was maintained in these positions during formalin fixation, and serial sections of selected blocks were examined microscopically.

**Results.** In 3 of 5 extended cases, bilateral vertebral artery compression was seen between the occipital bone and C1. In 3 of 9 rotated cases, the left vertebral artery was compressed adjacent to C1 before the artery entered the transverse foramen. No vertebral artery compression was seen in the necks held in the neutral position.

**Conclusions.** The vertebral arteries of some infants can be compressed by neck movement. This could induce lethal brainstem ischemia in infants with inadequate collateral **blood flow** or with poor compensatory arterial dilatation, and may underlie some cases of sudden infant death syndrome.

Pamphlett, R, Raisanen J & Kum-Jew, S. *Pediatrics* Vol. 103 No. 2 February 1999, pp. 460-468

## Bed Wetting

“This patient’s enuresis resolved with the use of adjustments. This happened in a manner that could not be attributed to time or placebo effect.”

Blomerth PR; Functional nocturnal enuresis. J Manipulative Physiol Ther 1994; 17 (5): 335-8  
Medline ID:95016316



## Hyperactivity



Results of 2 separate studies reveal that **hyperactivity**, and other behavioral conditions **respond well to chiropractic care** and even **exceed results** seen from medication.

*Walton EV. The effects of chiropractic treatment on students with learning and behavior impairments due to neurological dysfunction. Int. Rev Chiro 1975; 29:4-5. 24-6 Giesen JM; Center DB; Leach RA; An evaluation of chiropractic manipulation as a treatment of hyperactivity in children. J Manipulative Physiol Ther 1989; 12 (5): 353-63 / Medline ID: 90111454*

## Children

80% of children are not in autonomic balance and many have atlas subluxation

Manual examination revealed cervical strain in **95% of 1250 babies post partum.**

Adjustments resulted in **immediate** quieting, cessation of crying, muscular relaxation, sleepiness



This is **validation for adjustment** of children from **day 1**. This should be obligatory.

Guttman, G. and Frymann, Blocked Atlantal Nerve Syndrome In Babies & Infants, Manuelle Medizin 1987; 25

## .....On Subluxation

1. If subluxations are not corrected early “when they are caused shortly after birth,” the subluxation will be difficult or impossible to correct later.
2. Subluxations can **reduce nerve impulses by 60%**.

Chung Ha Suh, Ph. D. University of Colorado



## .....On Subluxation At Birth

“Research indicates that the major cause of spinal subluxation in infants is childbirth and its widespread incidence during infancy. In our mind, stressing the need for correction from birth so that irreversible subluxation degeneration changes do not occur.”

Abraham Towbin, M.D. Neuropathologist Harvard Medical School



## Early Years

**65% of neural development occurs within the 1st year of life.**

If you do not properly receive info from the environment...

- Your development is impaired
- Your reality is distorted and diminished
- You grow up with a distorted view of yourself and your world.

Seitl, J.A. I Move Therefore I Am. Psychology Today, 1993; 26

## Children

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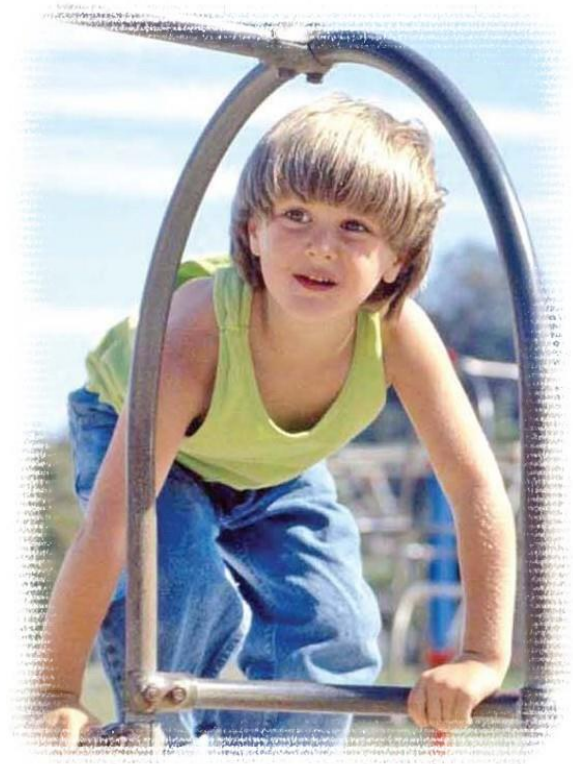


Guttman, G. and Frymann. Blocked Atlantal Nerve Syndrome In Babies & Infants. Manuelle Medizin 1987; 25

## Kids and Chiropractic

Kids and what? **Chiropractic!** Most babies are born healthy. They have been living in a safe environment during the gestation period and have been provided essentially with everything they need.

**However, spinal injury or vertebrae misalignment can occur during childbirth and throughout childhood and adolescence. The spine can malfunction and erode over time just from day to day activities. Babies who are tossed in the air for example can be injured and suffer a Subluxation or misalignment in their spine. A simple activity such as learning how to walk, run, or ride a bicycle can cause many falls and bumps to a child. Therefore: more subluxations.**



So how can Chiropractic help? First we must understand the benefits of Chiropractic adjustments by understanding what the spine provides for us. The spine and nerves are the link between the brain and every organ in the body. Subluxations or a pinching of nerves can cause disruption between organs and the brain; thus causing problems such as asthma and respiratory distress, ear infections, headaches, colic, and digestive concerns just to mention a few.

A few simple observations can be made to reveal your own child's posture. Have your child stand facing you, do the ears, shoulders and hips appear uneven? From the side are any of the following four points out of alignment? (ears, shoulders, hips, ankles should be in a straight vertical line). Holding a natural stance: does your child's head appear to lean too far forward? If you answer yes to any of the above observations, postural deviation may be present and should be professionally evaluated by a Chiropractor.

Early detection and treatment are vital and can help children maintain a healthy spine and good health for their entire lifetime. Regular posture examinations are as important as regular dental, and eye checkups. Optimal health means a healthy spine. Schedule your spinal examination today as part of your family's wellness program.

Janet Goodman P.R.C.A.