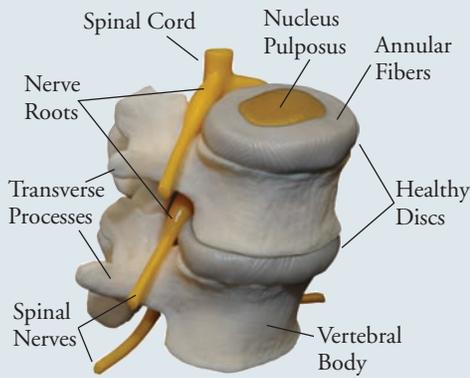


WHAT'S WRONG?

3 STAGES OF LUMBAR DEGENERATION

TEXTBOOK NORMAL



Bones

- Normal Height
- Normal Shape
- Smooth
- Rough
- Spurs
- Arthritic
- Fusion
- Misshapen

Nerves

- Normal
- Irritated
- Compressed
- Deteriorated
- Atrophied

Discs

- Normal
- Micro-Tears
- Macro-Tears
- Bulging
- Herniated
- Protruded
- Extruded
- Prolapsed
- Desiccated

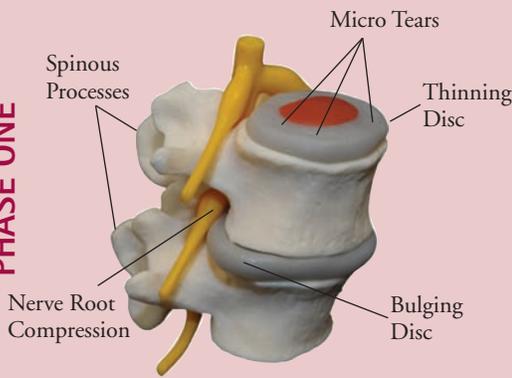
Motion

- Normal
- Decreased Mobility
- Hyper-Mobility
- Restricted
- None/Immobile

Physiology — Normal curves with equal disc spacing. No visible signs of degeneration.

Prognosis — *Good to excellent.* Regular chiropractic checkups are recommended for early detection and prevention of spinal decay.

PHASE ONE



Bones

- Normal Height
- Normal Shape
- Smooth
- Rough
- Spurs
- Arthritic
- Fusion
- Misshapen

Nerves

- Normal
- Irritated
- Compressed
- Deteriorated
- Atrophied

Discs

- Normal
- Micro-Tears
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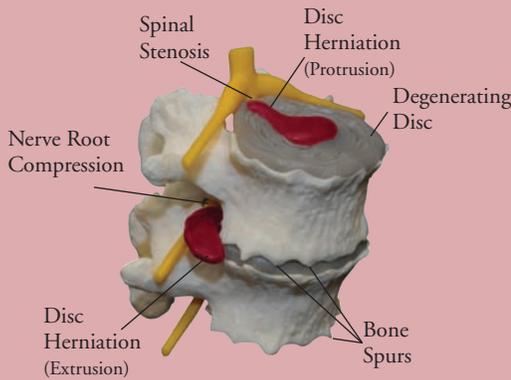
Motion

- Normal
- Decreased Mobility
- Hyper-Mobility
- Restricted
- None/Immobile

Physiology — Misalignment and malfunction with soft tissue damage and nerve irritation.

Prognosis — *Fair to good.* Return to near normal may be expected with appropriate chiropractic care.

PHASE TWO



Bones

- Normal Height
- Normal Shape
- Smooth
- Rough
- Spurs
- Arthritic
- Fusion
- Misshapen

Nerves

- Normal
- Irritated
- Compressed
- Deteriorated
- Atrophied

Discs

- Normal
- Micro-Tears
- Macro-Tears
- Bulging
- Herniated
- Protruded
- Extruded
- Prolapsed
- Desiccated

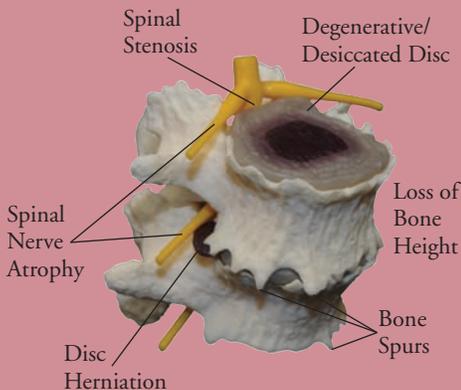
Motion

- Normal
- Decreased Mobility
- Hyper-Mobility
- Restricted
- None/Immobile

Physiology — Disc narrowing, calcium deposition, bone spurs and nerve irritation or compromise.

Prognosis — *Fair.* Slowing or stopping may be expected with appropriate chiropractic care.

PHASE THREE



Bones

- Normal Height
- Normal Shape
- Smooth
- Rough
- Spurs
- Arthritic
- Fusion
- Misshapen

Nerves

- Normal
- Irritated
- Compressed
- Deteriorated
- Atrophied

Discs

- Normal
- Micro-Tears
- Macro-Tears
- Bulging
- Herniated
- Protruded
- Extruded
- Prolapsed
- Desiccated

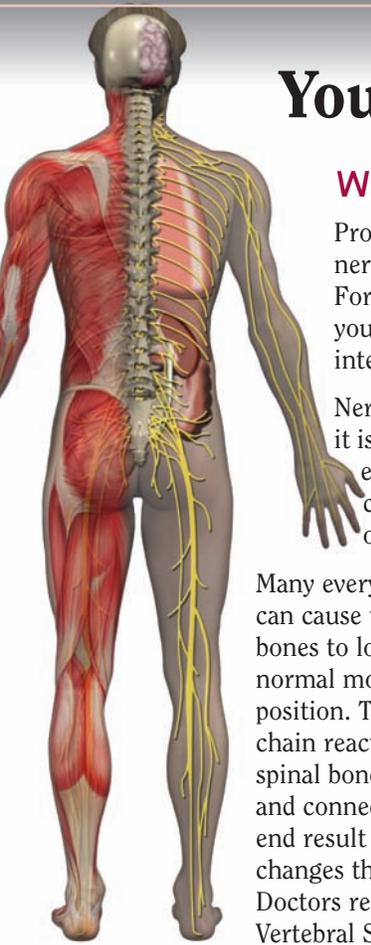
Motion

- Normal
- Decreased Mobility
- Hyper-Mobility
- Restricted
- None/Immobile

Physiology — Joint immobilization, bone fusion, nerve atrophy and scar tissue.

Prognosis — *Fair to poor.* Slowing or a decreased rate of progression may be expected with appropriate chiropractic care.

Your Nervous System Controls Everything!

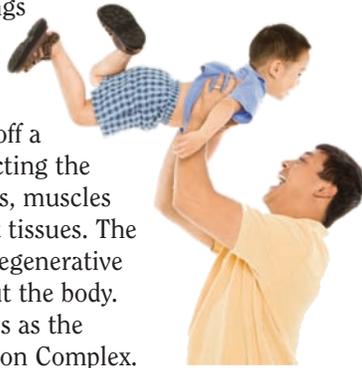


What's Wrong?

Proper function, controlled by your nervous system, is the key to health. Fortunately, the proper function of your nervous system is the primary interest of your chiropractic doctor.

Nerve tissue is so important, most of it is protected by bone. The brain is encased by the skull, and the spinal cord is covered by 24 moving bones of the spinal column.

Many everyday things can cause these bones to lose their normal motion or position. This sets off a chain reaction affecting the spinal bones, nerves, muscles and connective soft tissues. The end result can be degenerative changes throughout the body. Doctors refer to this as the Vertebral Subluxation Complex.



How you feel is a poor judge of your health.

As dominos fall in a chain reaction, problems that are left uncorrected can cause other parts of your body to not work as well as intended. If some of your nerves get scraped, rubbed or pinched, the messages they send don't get through clearly. This can create symptoms in other areas of your body. However, judging your health only by how you feel can be dangerous. Because your body is so adaptive, by the time many symptoms warn you of a problem, it can be well advanced.

Chiropractic seeks to find the cause of your problems and help correct subluxations that may be interfering with your nervous system. This is done through chiropractic adjustments. Adjustments help bones and the surrounding soft tissues to return to their proper motion and position, relieving symptoms.

Recovery takes time.

The first thing most new patients want is to feel better. So, in the beginning, visits are usually frequent. Your chiropractic adjustments may be combined with other procedures to help relieve your symptoms. Just like braces for your teeth, retraining bones to maintain their proper position takes time. Depending upon your age, condition, and lifestyle, repeated visits over weeks or months may be needed to reduce your symptoms.



Follow your doctor's recommendations.

You may be urged to supplement your care with dietary changes, exercises, or other self-care procedures. Without complete healing, discontinuing care now can set the stage for a relapse. The chiropractic approach to better health is to help release as much of your body's inborn healing ability as possible.



What does it all mean?

Disc: Layers of fibrocartilage between adjacent vertebrae that help cushion and allow for normal motion between spinal bones.

Nucleus pulposus: A semifluid mass of fine white and elastic fibers that are softer and make up the middle of the disc. As the disc goes through degenerative changes, this consistency changes and becomes less elastic and loses its softer appearance and function. This is also the primary material that herniates or extrudes when it leaks through the tougher fibers of the disc.

Bulging disc: A disc is considered bulging when 50% or greater of the circumference or outer edge of the disc extends beyond the edge of the vertebral body above or below it.

Herniated disc: A disc is herniated when the nucleus pulposus in the middle of the disc or, the annulus fibrosus or outer fibers of the disc extend beyond the circumference of the vertebral body it is attached to above or below. This can be further classified as a protrusion, where the herniated material is still contained by the outer fibers of the disc but is sticking out, an extrusion where it is like a bubble on a tire or balloon, or a prolapse where it extends beyond the edge and creates a secondary piece that is still attached. This can extend into the spinal canal or out onto the nerve root causing dysfunction or symptoms of ill health.

Desiccated disc: This is another name for a degenerative disc where the softer fibers of the middle and the tougher outer rings of the disc have worn down and become rough, irregular and thin, losing the ability to cushion and allow for proper motion between spinal bones.

Micro-tears: Small cracks or splits in the outer rings or annular fibers of the disc which is a beginning stage of degeneration. The disc begins to lose some of its fluid content through these small cracks and the disc begins to lose height and function as a result. These weak spots become more susceptible to stress and can become larger and more dysfunctional becoming a Macro-tear and can lead to bigger and more complicated problems like herniation and desiccation.

Nerve root compression: Pressure on the spinal nerve root where it leaves the spinal cord and exits the intervertebral foramen or opening on the side of the spinal bones, where it is either compressed by disc material, fat, blood or swelling. This can cause numbness, weakness and loss of strength in the muscles or other body parts associated with the nerve supply at that level.

Vertebral body: The large and circular primary weight bearing portion of the spinal bones that sit in front of the spinal canal and spinal cord.