



WHO'S GOT YOUR BACK?

How to survive the strain

BY JJ JORGENSEN

Back problems are a potential threat to every man's active lifestyle – I should know. A decade ago, my spinal trouble began with a slip and fall on icy stairs – and nobody sold tickets. I landed on a curb, knocking out two lower disks. The injury didn't floor me right away. It took almost a month (and a few heavy boxes) before the herniated disks took their toll, leaving me partially paralyzed.

No legs to walk on, and pain I wouldn't wish on a terrorist (OK, maybe I would). My life changed. Surgery was required to remove the herniated material. Without it, there's a good chance I wouldn't be walking right now.

Rest assured I've done more than a little research on the subject of back pain. So I feel I'm qualified to offer some answers to typical back pain questions. When I hurt my

back, what should I do? When should I see a doctor? Do I need an X-ray or an MRI? Do I need surgery? What is the most common back problem? Which part of the back is most susceptible to pain and strain – upper or lower?

The answer to the last two questions is a matter of easy biology. Lower back strains are the most common, since our weight is centered there, and spinal injuries occur most frequently while participating in contact sports like football, says Dr. John R. Mangiardi, chief of neurosurgery at New York's Lenox Hill Hospital. Hence, spear-tackling has been banned for a reason in pro football (and no matter how good it feels to get that Super Bowl ring, it's downright illegal to clothesline an opposing player).

Impact activities like jogging and basketball are also considered unhealthy for the spine. Mangiardi points out that after a certain age, we should seriously consider shooting hoops without running up and down the court. Our spines lose some structural

integrity with the passing of time, and you can do some serious damage if you're over 40 and running full court – even more so if you're violently checked or tripped up.

In the weight room, body form and human mechanics can be key to sculpting yourself into the Adonis you always knew you were. Outside the weight room, that stuff is equally important: You may remember to use proper form at the gym, but then you go home and move furniture, or lift something heavy at work. And that's when the trouble starts.

TREATMENT AND RECOVERY

When back strains occur, medical professionals agree that rest and restricted movement are the most helpful. You can apply ice to the effected area immediately, followed by moist heat. If you're still uncomfortable, try Tylenol or Ibuprofen.

If the ache won't subside, seek help. Contact your primary care physician. They know you best, and they're a trusted resource for specialists – >

>>> CRACK OR QUACK?

TEN YEARS AGO, HAD YOU SLIPPED the word "chiropractor" into a conversation with an orthopedist or neurologist, you'd have seen some eyes roll. Medical doctors were the first to quip that chiropractors are quacks – or pseudo-healers too lazy, unskilled, stupid or all-of-the-above to earn a legitimate medical degree. But over the last decade, that derision has been reduced to little more than stereotype. The question remains: Does the medical world owe chiropractors an apology for years of torment, or have we turned a blind eye (and misaligned

spine) to their dubious qualifications? Yes ... and no.

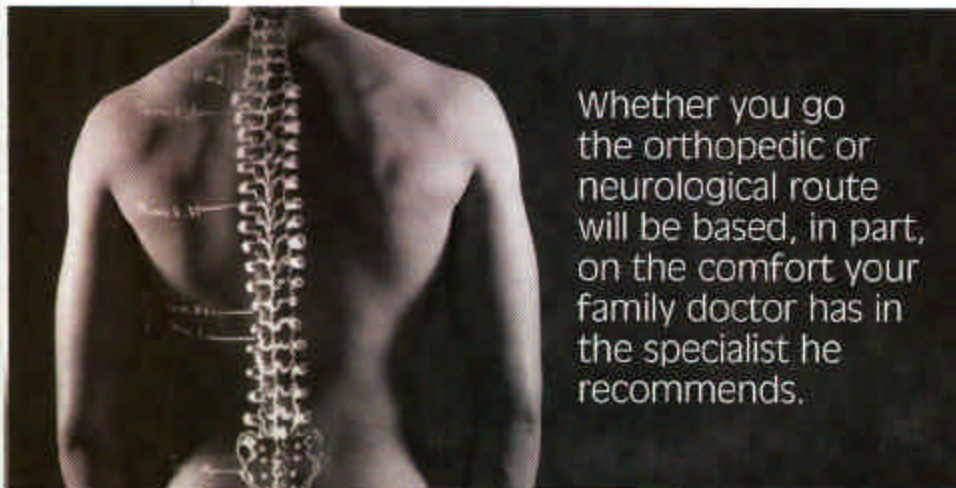
It wasn't until recently that chiropractors got any props from the American Medical Association, this after a long legal battle that eventually won the American Chiropractic Association a place alongside its M.D. cousins. Today the AMA states, "It is ethical for a physician to associate professionally with chiropractors provided that the physician believes that such association is in the best interests of his or her patient."

California governor and fitness nut Arnold Schwarzenegger enjoys a long-standing association

with the international Chiropractors Association, and chiropractors are even allowed the chick magnet title "Dr." before their surname. (Yes!)

According to the ICA, chiropractors are "specialists in neuromusculoskeletal conditions [and] trained to restore the misaligned vertebrae to their proper position in the spinal column." It's a focused discipline, and chiropractic students spend more time studying spinal anatomy, neurology and radiology in their four years at chiropractic college than medical students.

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neurological, orthopedic, etc. Neurologists focus on the nervous system, while orthopedists treat the musculoskeletal tissue. Both perform some of the same treatments, and there are more orthopedic specialists out there than neurologists. Whether you go the orthopedic or neurological route will be based, in part, on the comfort your family doctor has in the specialist he recommends.

If advised, X-rays are always helpful in identifying a fractured or dislocated bone. MRI (magnetic resonance imaging) testing is a modern marvel; it allows clear and definitive images of specific parts of your anatomy, right down to the tiny details of an injured disk. As a reassurance to technophobes, I've had eight MRIs since 1994, and there are no ill effects (an MRI is necessary if

surgery is required). Here's some reasonable advice: If you lose feeling or sensation, or the pain is too great, surgery is a good idea.

Ten years after my surgery, there are times when the weather changes, or it becomes cold and damp for an extended period, that I feel some pain and discomfort in my lower back and down my right leg (the latter can happen when a herniated disk presses on the nerve roots that become the sciatic nerve). But I've lived with this discomfort for a long time, and it is doable.

I once read a book that espouses the art of distracting the mind from discomfort; I practice that philosophy daily. I'm also looking into working out in water, where resistance is maximized but impact on the body is nonexistent. Mangiardi highly recommends it.

But obviously prevention is the best cure. Scratch pride and ask for help, because you might be asking for some real help later if you don't. Be good to yourself. **ME**

>>> CRACK OR QUACK?

Furthermore – or less, as the case may be – chiropractors charge half as much as orthopedists, and often patients recover in half the time. Estimates say that chiropractors see 11 to 17 percent of the U.S. population – though the amount of money spent on chiropractic care represents less than 1 percent of total healthcare costs.

Studies have shown that chiropractic care has helped relieve patients with headaches, whiplash, glaucoma, drug addiction, Crohn's Disease and back pain associated with pregnancy. It's also been shown to improve the quality of

life among cancer and AIDS/HIV patients, among other benefits.

At the same time, there's a reason why the chiropractic field has been an object of ridicule for eons. For one thing, chiropractors aren't permitted to prescribe medication to patients, a demerit the ICA splns to say, "The use of medication can interfere with the body's healing mechanisms, produce side effects, create a dependence and lead to drug-caused disease or complications."

Instead, chiropractors prescribe herbal medicine that, while effective in some cases, may interfere with FDA-regulated

medications. Patients will enjoy the fruits of acupuncture and massage therapy, both recommended by chiropractors.

It's also a bit of a misnomer to say chiropractors are less expensive than orthopedists. On a per-visit basis, that's true. But chiropractor patients must make office visits three times a week – so it adds up in more ways than one. Given the time and expense, patients expect a quick recovery, which isn't always the case. And if you dare stop treatment, your ailments will return.

The decision is yours.

– Blair R. Fischer