

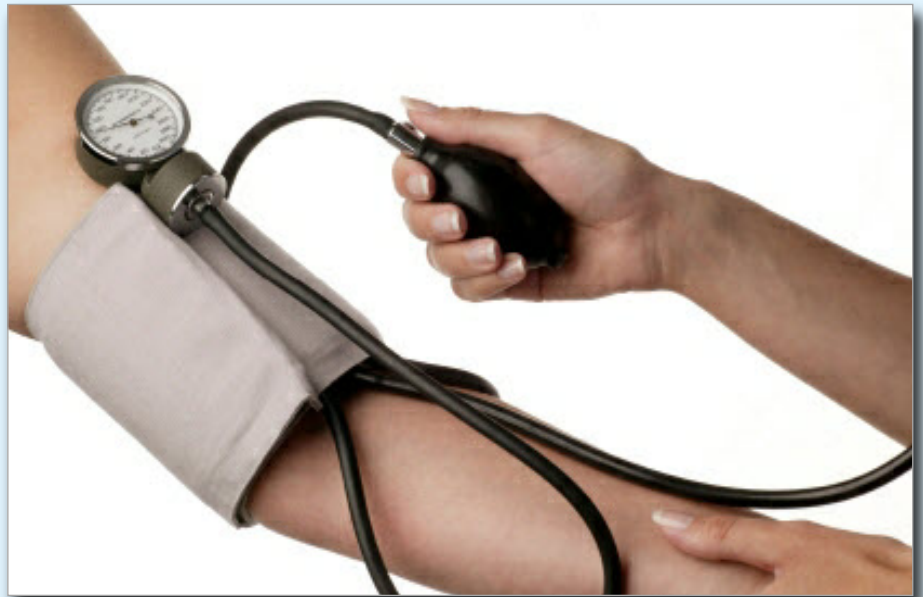
# Chiropractic For Hypertension It Works

*"The restoration of atlas alignment is associated with marked and sustained reductions of blood pressure similar to the use of drug combination therapy."*

One out of every three of your patients has hypertension. Many clinicians check blood pressure every office visit but surprisingly many do not. Traditional medicine is clearly dominating the hypertension field; however, their own journals admit not enough is being done to treat the condition. Hypertension is an industry in and of itself.

The 5-Minute Clinical Consult 2010 edition stated that direct annual medical expenses related to hypertension exceed \$185 billion per year, with most patients requiring multiple drugs. The reality is, by using current drug therapy, only 34% have their blood pressure adequately controlled.

I believe that a Wellness approach can produce not only much higher percentages than drugs but better results without negative side effects. Consider this double blind placebo controlled study: 50 drug naïve patients plus 24 patients washed out from medication,



all with stage one hypertension were randomized.

Some received a national upper cervical chiropractic adjustment called NUCCA, the others received a sham procedure or placebo. After 8 weeks the NUCCA group had a reduction in systolic blood pressure of -17 vs. the placebo group with a -3. Also, Diastolic blood pressure was reduced in the NUCCA group -10 vs. the placebo group with -2. No adverse side effects were recorded.

Authors concluded that "restoration of atlas alignment is associated with marked and sustained reductions of blood pressure similar to the use of two drug combination therapy."

Further attention should also be given to the upper thoracics (T1-T6) and lower thoracics (T11-T12) to optimize sympathetic / parasympathetic balance and kidney function, but this study is very dramatic and should document the value of chiropractic in the treatment of hypertension.

If 30% of adults in America have hypertension, what are the Wellness solutions we can offer? The 30% number includes those that have been diagnosed, who know and understand their condition and those who are undiagnosed. The undiagnosed represent the largest population.

Below I've included several strategies and testing options for hypertension. Also included are some very helpful clinical notes based on the work of Dr. Alex Vasquez. Dr. Vasquez, who holds three medical degrees in chiropractic, naturopathy and osteopathy, recently recorded two great webinars on hypertension.

Part 1 highlights the causes of hypertension and Part 2 some of the treatments. He has also written an excellent book, "Chiropractic Management of Chronic Hypertension," loaded with all the references to thoroughly train you on how to treat hypertension. Dr. Vasquez comes to this conclusion: "complimentary or alternative medicine particularly chiropractic should be the mainstream approach to hypertension and dominate this market."

Think of hypertension as a warning sign, a signal that should never be ignored. Hypertension is the result of a deeper but sometimes easily correctable condition. The body is giving feedback. Increased blood pressure is a sympathetic reaction signaling that something is wrong. It's our job to figure out what's causing the sympathetic overdrive.

I'm over simplifying, obviously, but finding the underlying factors is essential when dealing with blood pressure cases. Remember current medicine is not very successful either. So don't get discouraged. It may take time as both you and your patient link together the biochemical clues.

Traditionally the definition of hypertension is defined as elevated systolic over 140 or the di-

astolic pressure greater than 90. Surprisingly, 68% of all mortality occurred with systolic blood pressure between 120 and 140 and diastolic below 90. New guidelines suggest mortality increases starting at 115/75.

What would happen if today you started taking blood pressure on both arms for every single patient? And if one of the arms was over 115/75, your patient was rescheduled for a second blood pressure reading and a nutritional consultation to discuss lifestyle management and a modest nutritional program to reduce risk. Then every 30-60 days you repeated this procedure documenting changes or the lack thereof. And if there were no changes, you use that criterion to order further testing looking for heavy metals, insulin dysregulation, estrogen dominance, drug reactions, mineral deficiencies, etc. It would challenge you to become a better doctor, it would make the patient more accountable for their lifestyle, possibly add years to the patient's life and increase their quality of life.

In most cases, you will see changes. And of course, your office visits and ancillary services will increase. Remember, the treatments we offer have positive corollary side effects, whereas virtually all drugs carry negative side effects over a period of time. Patients need to be reminded of this regularly.

An alternative to drugs in the treatment of high blood pressure is a major paradigm shift for many. So communication is essential. If you are not routinely taking your patient's blood pressure, I encourage you to get started. I highly recommend Dr. Vasquez's book as it will give you great confidence and arm you with all the references you may need.

Thanks for reading this week's Tuesday Minute edition. I'll see you next Tuesday.