

Illuminate

Chiropractic News

2010 VOL 1

THE WEIRD AND WONDERFUL WORLD OF NEUROSCIENCE

- By Heidi Haavik Taylor



He summarised a series of research papers that his group had conducted over the past few years. They have been investigating the importance of the brain's self-awareness and its impact on motor control and autonomic function.

Our internal body image is continuously modified (i.e. brain plasticity) by sensory input and is known to be very different in people with a variety of symptoms. For example, people with chronic arm pain often report their painful arm feels bigger than their non-painful arm.

Moseley discussed an experiment where they found that when subjects looked at their painful arm through a viewer that made their arm appear smaller than it really was their arm was less sore to move and swelling of the arm reduced¹.

In another study, they disrupted their subject's sense of ownership of their arm (using a prosthetic arm and synchronously stroking the real arm and the prosthetic arm, while the subject could only see the prosthetic arm)².

The fascinating thing was that this resulted in the subject's actual arm becoming cooler and it also changed the way the subjects' brains responded to tactile input from the real arm².

This research seems to suggest that if your internal body image is disrupted (for example, due to altered afferent input from a subluxated spinal segment) then this alone can alter muscle function, sensory processing and even autonomic control.

Neuroscientists are, therefore, now looking at ways to alter the brain's body image to help people recover from a variety of conditions. For us, this can potentially explain why we see changes in sensory processing, motor

function and autonomic function in our patients when we adjust them.

Normalising spinal segmental movement (following an adjustment) most likely leads to more appropriate signals being sent from our spines to our brains and, from our own research, we have shown that this does change the way our brain perceives signals from the hand³⁻⁵ and changes the way the brain controls hand muscles^{6, 7}.

At least, this is what I explained to a patient of mine not long ago. He is one of my long standing patients, a pianist, who used to complain about his arms feeling strange. He would describe them as feeling like Popeye-arms, i.e. much larger and heavier than they really were. After being adjusted for some time this sensory disturbance disappeared and to use his own words: "my fingers now cooperate better with me when I play the piano".

Having just attended the Australian Neuroscience Symposium in Sydney a week ago, I am still buzzing with excitement. I was particularly pleased to see that neural plasticity and the importance of the brain's internal 'body schema' or 'body image' are currently very hot topics.

It was exciting because that is exactly what I believe is altered when we are subluxated and is an important component of the mechanism that explains the functional improvement we see when we adjust our patients.

The way the brain interprets signals from the world around us has an incredible impact on how it controls our bodies and how we feel. I was, therefore, particularly fascinated by the presentation by Lorimer Moseley, from the Prince of Wales Medical Research Institute in Sydney, entitled *Intriguing relationships between body image, motor output, pain and autonomic control*.

Important Dates

Dynamic Growth Experiences 2010

Melbourne - 29 May

Perth - 19 June

New Zealand - 31 July

North Queensland - 8 August

Brisbane - 21 August

Sydney - 11 September

Adelaide - 16 October

Visit the Foundation's website at www.spinalresearch.com.au for our event dates and further information.

EDITORIAL



I am thrilled to be the Editor of *Illuminate* and thank our previous Editor, Lisa Shelton, for setting such an outstanding standard.

We have an information packed issue which you will find yourself referring to again and again, and sharing with those in your chiropractic world.

Dr Heidi Haavik Taylor presented at our AGM and Dr David Cahill gives a great synopsis of her presentation and research. Dr Haavik Taylor gives an insight into the world of Neuroscience Symposiums and the pertinence to everyday practice and Dr Kelly Holt discusses research on chiropractic care and balance. Dr Jeanne Ohm looks at some of the research supporting chiropractic care for children and there is a revolutionary article by Dr David Cahill on Mechanotransduction. Mechano what ? Read the article - it is riveting.

Highlights are included from Parker Las Vegas (along with exciting award news) and from DG Congress, along with what to expect from the upcoming DG Experiences.

All this and more! Enjoy this issue. Our mission is to fund research and disseminate knowledge that furthers the understanding, development and effectiveness of chiropractic care. We fulfil both these aims with your assistance, thank you.

As Editor, I love receiving interesting bits of research, so please forward me anything you are reading that furthers the understanding, development and effectiveness of chiropractic care.

Rosemary Keating

(continued)

THE WEIRD AND WONDERFUL WORLD OF NEUROSCIENCE

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In this issue...

THE WEIRD AND WONDERFUL WORLD OF NEUROSCIENCE.....	1,2
EDITORIAL	2
A MATCH MADE IN HEAVEN	3,4
A PILOT STUDY	5
CHIROPRACTIC FOR INFANTS: A LOOK AT THE EVIDENCE	7
WORLD LEADER IN CHIROPRACTIC RESEARCH PRESENTS AT AGM	8
INTERVIEW WITH INTERNATIONAL CHIROPRACTOR OF THE YEAR	9
AUSTRALIAN SPINAL RESEARCH FOUNDATION FUNDS AMAZING NEW RESEARCH	11
RESEARCH FUNDING ACKNOWLEDGED	12
FOUNDATION AWARDS LIFE MEMBERSHIPS	13
AGM REVIEW	14
DYNAMIC GROWTH KEEPS GROWING	15
REFLECTIONS ON DG 2010	15

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A MATCH MADE IN HEAVEN - by David Cahill

MECHANOTRANSDUCTION OR THE ART OF CHIROPRACTIC AND HIGH LEVEL RESEARCH: A MATCH MADE IN HEAVEN.

Every now and then, moments occur in lives that shift our consciousness forever. Often this change in consciousness encourages creativity, which is surely one of our most powerful intellectual capacities as human beings, as we remain open to new possibilities and new perspectives. Hopefully, published research occasionally makes you sit up, take notice and take stock of your approach, your methods, even your paradigm.

Openness to new possibilities and perspectives, and free thought surrounding all that we do in practice, helps us to stay fresh. I've heard Dr John Demartini talk on three different states in which we can practice. The first of these is intellectual. Here, we are consciously using all our powers of observation, our skills and our experience to arrive at what adjustment to make and, indeed, govern our behaviour during each clinical encounter. The degree to which we use our intellect, especially over decades in practice, can vary greatly as does our impact.

Beyond the intellectual is the **intuitive**. In this state, in addition to our intellectual skills, we utilise skills from our subconscious level. We may pick up on more subtle cues as to what is driving the person seeking our care and how best we can effect change in them. To acknowledge this state is to acknowledge that there is more to our world than what we can detect through our five senses. Once we have acknowledged this, then we can develop our intuitive capabilities simply by paying more and more attention to them.

The third level of practice, according to John, is the **inspired** level. In an inspired state, some would say we tap into a super-conscious level. In this state, we are expecting the miraculous and the seemingly somewhat magical connection is made between chiropractors and their people, which facilitates extraordinary transformation. Some may call this a healing consciousness.

To outline all the ingredients for these states of being is beyond the scope of my communication here. One important ingredient though, is our degree of **presence**.

"Walking, breathing, eating or taking out the garbage deserve as much

attention as a triple somersault" advised the old man. "That may be true", argued the gymnast, "but when I do a triple somersault, my life is on the line". "Yes", came the reply, "but in every moment, the quality of your life is on the line" ¹.

At the time of writing this I am shortly to go to a funeral. At such a time, I am reminded of the sadness which can be associated with reaching the end of one's life, especially if it comes with a realisation of dreams and aspirations unfulfilled.

A funeral brings home the realisation that even if we don't feel that our life is on the line right now, the **quality** of our life and the direction it is taking certainly may be.

The quality of our practice, our relationships, our decisions and our adjustments is always on the line and determined very much by our degree



of **presence** in every moment. It seems there is no limit to the depth that we can dive into the present and the deeper we dive, the more we really live.

Our paradigms from which we view the world are built up over our lifetime. They serve us well in many ways. Yet being truly present means being open to looking at things from different perspectives. If we are unwilling to do this, our paradigms can be limiting and even enslave us to a way of thinking and being.

A health care profession that is locked into a paradigm to the degree that new possibilities are quashed must, over time, become stagnant and outdated. Many have leveled this accusation at chiropractic in the past.

Within the literature, there are always some brave researchers breaking new ground, pushing the frontiers and questioning the pervading paradigm. One of these in the medical field is Dr Donald E Ingber.

Dr Ingber is from the Departments of Surgery and Pathology, Children's Hospital and Harvard Medical School in Boston. He is no lightweight in the medical world. For some years, he has been writing on what he calls the mechanical basis of disease. He has published a review of this work in the *Annals of Medicine* ². It makes for outstanding reading. You can access the article here: <http://web1.tch.harvard.edu/research/ingber/PDF/2003/Ingber.AnnMed03.pdf>.

Basically, he presents research that demonstrates the role mechanical forces play in biological control. 'Mechanotransduction' is the term coined to describe the "molecular mechanisms by which cells sense mechanical forces and convert them into changes in intracellular biochemistry and gene expression" ³. This has got to be intriguing to any thinking chiropractor!

Dr Dan Murphy mentioned this article in his address to the CAA National Conference in October last year. Some of the highlights from it are as follows:

- Mechanical forces are critical regulators of cellular biochemistry and gene expression as well as tissue development.
- There is an undeniable physical basis of disease.
- Mechanical forces are equally potent as chemical ones.
- Tissues are composed of groups of living cells held together by an extracellular matrix (ECM).
- Mechanical loads anywhere in the body can affect many tissues and cells because of this physical connection.
- Forces that are applied to the entire organism are distributed to the individual cells via their adhesions to the ECM support scaffolds that link cells and tissues throughout the body.
- The surface membrane of cells is mechanically attached to all of the cell's organelles, to its nucleus and its chromosomes, and to its synaptic vesicles, by a filamentous cytoskeleton. This is

(continued)

A MATCH MADE IN HEAVEN

known as a tensegranous matrix and it transfers tensional forces throughout the cell.

- All cells contain 'stress-sensitive' ion channels that either increase or decrease ion influx when their membranes are mechanically stressed.
- The shape of the cell dictates its behaviour.

Ingber goes on to say that local mechanical changes in tissue structure may explain why diseases such as cancer often present focally and, further, that most of the clinical problems that bring a patient to the doctor's office result from changes in tissue structure and mechanics.

Of course this is not revolutionary to chiropractors. It's akin to what we have been talking about for many years, perhaps with new light into the mechanisms of our care. It does seem revolutionary for the medical profession. Ingber is basically calling on his own profession to look up from its extreme focus on the chemical nature of disease and incorporate this

knowledge of the physical.

Yet what's changing as a result of this research in medical clinics around the world? This research stream has been going on for the last 30 years, yet the chemical basis of disease remains the medical focus practically to the exclusion of any other.

Their paradigm is quite clearly entrenched: both in the education and thinking of the practitioners and also in the vested interests maintaining the pharmaceutical-dominated approach.

Even Ingber himself, even though he is obviously capable of seeing outside the square, projects his focus towards the implications for particular diseases. It is much more natural for us as chiropractors to see the broader implications of altered mechanotransduction as we are used to thinking in those terms.

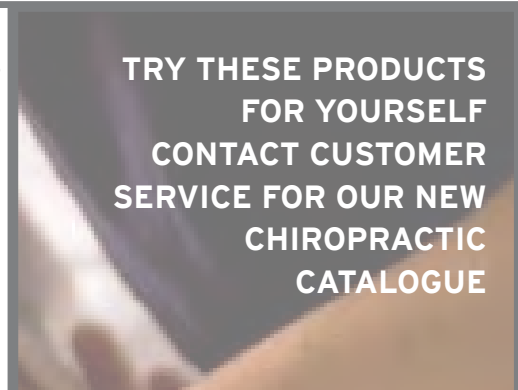
As I mentioned, an entrenched paradigm leads to stagnation and obsolescence. The opposite of that is being cutting edge and being willing to

push the boundaries. For many years, chiropractors have been pushing the boundaries of the clinical encounter with their art. To read Ingber's demonstration of the tensegranous matrix, and with pure science support our artistic concepts, is nothing short of wondrous.

It is with moments such as these, in research terms, that our consciousness can shift forever. Our commitment to our own development through intellectual, intuitive and inspired states, as well as remaining open to new paradigms, allows us to develop increased certainty and, with that, enhanced presence. Research such as Ingber's uncategorically supports our paradigm and it behooves us to grasp these moments of pure insight and brilliance and use them to our own advantage as a profession.

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BODHI STONES
Hand Carved Massage Tools



A PILOT STUDY

- Written by Kelly Holt

- Research by Cheryl Hawk, DC, PhD,^{a,b} Jerrilyn A. Cambron, DC, PhD,^c and Mark T. Pfefer, RN, MS, DC^d

A PILOT STUDY OF THE EFFECT OF A LIMITED AND EXTENDED COURSE OF CHIROPRACTIC CARE ON BALANCE, CHRONIC PAIN AND DIZZINESS IN OLDER ADULTS.

ABSTRACT

Objective: The purpose of this study was to collect preliminary information on the effect of a limited and extended course of chiropractic care on balance, chronic pain and associated dizziness in a sample of older adults with impaired balance.

Methods: The authors conducted a randomised pilot study targeting a sample size of 30, comparing 2 schedules of chiropractic care to a no-treatment group. Group 1 (limited schedule) was treated for 8 weeks, group 2 (extended schedule) was treated for 8 weeks (then once per month for 10 months) and group 3 received no treatment. Assessments were made at baseline and 1, 2, 6 and 12 months later. The primary outcome was changed in the Berg Balance Scale (BBS) from baseline to 1 year. Changes in the Pain Disability Index and Dizziness Handicap Index were also measured.

Results: 34 patients were enrolled, 13 in group 1, 15 in group 2, and 6 in group 3. Only 5 had baseline BBS scores less than 45, indicating increased risk for falls. There were no treatment-related adverse events. Nine patients dropped out by 1 year. No significant differences within or between groups in median BBS from baseline to 12 months were observed. Median Pain Disability Index scores improved more from baseline to 1 year in group 2 compared with groups 1 and 3 ($P = .06$, Kruskal-Wallis test). For the 9 patients with dizziness, a clinically significant improvement in Dizziness Handicap Index scores of groups 1 and 2 was observed at 1 month and remained lower than baseline thereafter; this was not true of group 3.

Conclusion: Further investigation of the possible benefit of chiropractic maintenance care (extended schedule) for balance and pain-related disability is feasible and warranted, as well as both limited and extended schedules for patients with idiopathic dizziness (*J Manipulative Physiol Ther* 2009;32:438-447).

It's encouraging to see that chiropractors are beginning to investigate the possible role they may play in reducing the number of falls in the elderly. Falls are a significant cause of death, injury

and loss of quality of life. In people over the age of 65, they currently account for over 80% of injury related hospital admissions and they are the leading cause of unintentional injury related death in older adults¹.

The chiropractic profession may play a significant role in reducing the risk of falls in the elderly. Falls result when an individual is unable to maintain the centre of gravity of their trunk within the base of support provided by their feet on the floor². Postural stability and maintenance of balance is dependent on the appropriate integration and function of several subsystems of the nervous system. These systems include the vestibular system, visual system, the basal ganglia, cerebellum and the somatosensory system. The central nervous systems (CNS) has to continuously process all somatosensory information from the skin, muscles and joints, integrate this information with cerebellar, vestibular, visual and basal ganglia input and formulate appropriate and accurate motor responses. This process is known as sensorimotor integration and its precision has a profound effect on our postural stability.

With normal ageing, there is generally a deterioration in the neurological systems associated with postural stability including the vestibular system, joint position sense, vision, muscle strength, peripheral sensation, reaction time and coordination³. This leads to an area of particular interest to the chiropractic profession as numerous studies have demonstrated a significant effect of chiropractic adjustments on many of these sensory and motor systems⁴⁻⁶.

It is likely that vertebral subluxations result in altered afferent input to the central nervous system that modifies the way in which the CNS processes and integrates all subsequent sensory input. This may result in an increased risk of falling as the nervous systems become less efficient and able to respond appropriately to perturbations in the environment that have the potential to result in a fall.

The abstract above describes a pilot study that is part of a research programme that aims to investigate this potential link between chiropractic care, balance, dizziness and falls. As



Kelly Holt

a pilot study, this study didn't have a large enough sample size to generate data that could be tested using inferential statistics. However, it was encouraging to see that the patients suffering from dizziness that were in the chiropractic groups showed a clinically significant improvement in their Dizziness Handicap Index scores over the course of the study. It is also encouraging to see the inclusion of an extended schedule of pragmatic chiropractic care in the study, meaning the chiropractor was able to care for the patient as they would in normal clinical practice.

On its own, this study doesn't provide enough evidence to have a large impact on chiropractic practice. However, the evidence to support the role chiropractic care may play in the prevention of falls in the elderly is growing as the group behind this study, as well as our Australian Spinal Research Foundation funded research group at the New Zealand College of Chiropractic, continue to investigate this relationship.

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MAJOR GROWTH ... AN EXCITING FUTURE



The Expanded Centre for Powerful Practices Management Team

Judy and I started Powerful Practices in 1991 with a series of seminars around Australia and New Zealand. This quickly grew to coaching, which consisted of regular seminars and fortnightly 15 minute coaching calls. This came about as clients found that seminars alone were not enough to put the material in place and integrate it into their practices. Powerful Practices grew quickly from me initially, then Judy joined me, as well as Lynn Heazlett as our CA Tutor and Coach. We moved our office to a larger premises shortly afterwards.

In mid 1996 we had to close Powerful Practices 'Mark 1' as I was blown from the roof of our beachside home at Currumbin in a cyclonic storm. Spinal and shoulder fractures and a discombobulated nervous system were the result. This meant I needed healing time and we took a long break for a couple of years, travelling in Australia and overseas while restoring our excellent health mentally, physically, emotionally and spiritually.

In July of 1999 we arrived back on the Gold Coast and I started practicing again 3 days per week. In addition Powerful Practices 'Mark 2' was born with me coaching and mentoring two days per week. This time it was half hour weekly calls and no seminar schedule.

Soon it was necessary for Judy to join me again as the coaching schedule kept growing and in September 2000 I stepped aside from practice to move to coaching full time once again. Next came coach Craig Gilbert in 2000, then Doug Herron in 2004, Berni Ireland in 2005 (specialising in CA coaching), followed by Clinton McCauley, Michael Powderly and Richard Mitton in 2007. Now Ryan Yorke and Malcolm Rudd have joined the team in 2009. Dr Tracy Kennedy-Shanks is about to start her extensive life coaching qualification, personal development and communications training. This will complement an in-depth Chiropractic mentoring, coaching and consulting program covering 10 different and integrated coaching syllabus.

With growth comes change and the huge ability to tap into many more minds, years of successful experience and untold wisdom.

From January 2010, I will move to coaching one day per week and assume the role of **Chairman** of The Centre for Powerful Practices. *Judy* will continue in her **Founders' Mentoring** role. *Dr Craig Gilbert (Qld)* will continue in his role as **Mentor Emeritus** and *Dr Doug Herron* is continuing his **coaching** and mentoring as **Senior Mentor**.

As well as their roles as coaches and mentors, the remainder of our team will all fill specific roles as well.

Dr Malcolm Rudd (WA) will assume the position of **General Manager**

Dr Clinton McCauley (SA) will be **Manager - Coaching**

Dr Richard Mitton (Qld) will be **Manager - Finance & Legal**

Berni Ireland (Qld) will be **Manager - Administration**

Dr Michael Powderly (Vic) will be **Manager - Products, Services and Marketing**

Dr Ryan Yorke (SA) will be **Manager - IT & Seminars**

We know that the much expanded organisational base will allow us to provide you with more cutting edge information and a more rounded coaching, mentoring and consulting program. Younger minds and hearts are bringing added resonance with the new generation of practitioners and CAs.

I will move to spending more time coaching and mentoring the coaches, further overseeing the expansion of The Centre for Powerful Practices in Australia and overseas, as well as writing, and speaking internationally which is growing each month.

As a team there are HUGE BENEFITS for you, our members and alumni, in these major changes we are making. The team have all been training in these new areas for the past 12 months.

We are all ready and excited!

***Here to serve you wonderfully.
John Hinwood***

CHIROPRACTIC FOR INFANTS: A LOOK AT THE EVIDENCE

- by Jeanne Ohm

Parents often ask why a newborn baby should be checked by a chiropractor. Adjustments help alleviate spinal subluxations (misalignments of the vertebrae) caused by intrauterine constraint, abnormal positioning in the uterus and spinal distress from the journey through the birth canal or during the delivery process itself. Ideally, babies should be checked and adjusted as soon as possible after birth.

Gottlieb¹, a well-published researcher, reviewed the effects of the birth process and concluded "the trauma from the birth process remains an under-publicised, and therefore significantly under-treated, problem".

Towbin³, a prominent researcher on birth trauma reports "survival of the newborn is governed mainly by the integrity and function of the vital centres in the brain stem. Yet, paradoxically, the importance of injury at birth to the brain stem and spinal cord are matters which have generally escaped lasting attention".

Another published researcher, Guttmann⁴, reported that more than one thousand infants were examined and it was concluded that approximately 80% of all newborns had some form of nerve dysfunction.

Guttmann concluded that many health problems can arise from misalignment of the first vertebrae in the neck, resulting in a lowered resistance to infections in the ears, nose and throat. He also noted, however, that even an adjustment using the lightest pressure of the index finger could normalise an infant's clinical picture.

His colleague, V. Fryman⁵, examined 1,250 babies five days after birth and found that 95% of this group

were not only misaligned but also had cervical strain. She also noted that the infants responded with immediate muscular relaxation and had a greater ability to sleep after specific spinal adjustments. Renowned researcher and practitioner Biedermann^{6,7} has done numerous clinical studies relating upper cervical misalignment in the newborn to prolonged labor and the use of extraction devices. He too has recorded significant improvements in the health of infants who receive specific adjustments after birth.

Nerve dysfunction associated with birth trauma may result in breathing weakness, mood irritability, digestive disorders, difficulty with feeding and attachment, sleeping problems, immunity deficits and neurological impairment to name a few. Left uncorrected, subluxations and their resulting nerve system dysfunction may develop into numerous health issues for the baby.

Recently, the International Chiropractic Pediatric Association (ICPA) published the preliminary results of their study in *Explore: The Journal of Science and Healing*, in an article entitled, 'The Safety and Effectiveness of Pediatric Chiropractic: A Survey of Chiropractors and Parents in a Practice-Based Research Network'⁸. The preliminary data confirms what chiropractors have known for over 100 years: chiropractic care for children is safe and effective.

On the issue of safety, out of 5,438 office visits, there were only three minor aggravations reported from the adjustments, a .00055% chance of negative reaction. Being well below a 1% risk factor, this study shows that children have a 99% chance of no problems receiving chiropractic care. The study showed that the three




aggravations reported were minor discomfort following the adjustment and were readily resolved with continued adjustments.

In the study, over 90% of the chiropractors and parents reported an adjustment-related improvement with respect to the children's presenting complaints. Even more interesting is the discovery of benefits unrelated to the presenting complaints. Both parents and doctors reported better sleeping patterns, improved behaviour and more robust immune system function while under chiropractic care.

With the increased amount of scientific research supporting clinical experience, chiropractic care is being accepted as a viable necessity for newborns. For more details, visit www.icpa4kids.com.

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WORLD LEADER IN CHIROPRACTIC RESEARCH PRESENTS AT AGM

- by David Cahill

At the most recent Annual General Meeting of the Australian Spinal Research Foundation, those present were treated to a synopsis by Dr Heidi Haavik Taylor of the research she is doing, primarily out of her lab at the New Zealand College of Chiropractic.

This continued a tradition which has seen Associate Professors Barbara Polus and Philip Bolton present in recent years.

Dr Haavik Taylor's work, the foundation for which was laid by Dr Bernadette Murphy, is innovative, tenacious, ground-breaking and courageous.

Innovative

How on earth do you investigate what happens when chiropractors adjust subluxations? We have known for years that it has something to do with the nervous system, but how do you investigate that in a valid, reproducible way that will one day result in meaningful applications?

1. Well, firstly, all research needs a working model. It is out of that model that the research questions arise.
2. All models have certain basic assumptions.
3. Those assumptions are based upon the paradigm from which you view the world.

Heidi and Bernadette formulated a model of the subluxation some years ago. In a simplified way, it goes like this:

A subluxation equates with altered afferent input to the nervous system. This disafferentation leads to altered sensory processing which leads to altered sensorimotor integration and therefore altered output, leading to altered function. From there, it follows that the chiropractic adjustment, by improving afferentation, will change everything else as well, leading to improved function. In essence, this is a model of neuroplasticity.

Neuroplasticity can be defined as any lasting change to the nervous system. This model is consistent with the paradigm from which the majority of chiropractic practice operates. The extreme importance of this cannot be overstated because the starting point determines how relevant the eventual research will be to chiropractors.

Drs Murphy and Haavik Taylor then needed to devise ways of researching

this model. In other words, measuring afferent function and cortical processing. This is exactly what they have achieved by developing protocols in the following methods:

- Somatosensory Evoked Potentials
- Trans-cranial magnetic stimulation
- Various other methods of measuring motor control and function
- Joint position sense.

Tenacious

Without a love for your profession, and a strong desire to see things through, the research gig would be 'too hard'. Challenges along the way include the eternal competitive battle to obtaining funding; the repetitive and, at times, mundane nature of performing the actual research; the misunderstanding of peers; the bias against chiropractic in some scientific arenas, particularly when it comes to publication; perhaps the questioning in the dead of night of your model; and even the isolation that seems to exist for many researchers with respect to the rest of our profession.

To develop the protocols, ensure their scientific validity and become established as credible neuroscientists, Haavik Taylor and Murphy had to begin publishing work (back in 2003) that was seemingly unrelated to chiropractic. This was necessary to get the peer review all researchers need to refine their model and/or protocols and ensure valid outcomes in the long run^{1,2}. Murphy's foundational work in fact goes back to 1995^{3,4}. This takes many years and requires a steadfast holding of your vision.

Ground-breaking

Their paper, published in *Clinical Neurophysiology* in 2007⁵, directly demonstrated change in the way the brain processes information at the cortical level following the adjustment of subluxations. This was a first. It suggests neuroplasticity as a mechanism as to how adjustments effect change.

It is my belief this will come to be known as a landmark piece of research for chiropractic. In the three short years since then, the chiropractic research community has broadened its horizon remarkably in terms of what can be studied and the context in which it can be done. This paper has undoubtedly been one of the catalysts for this expansion of possibility.

And, of course, as a catalyst it is just the beginning! Two subsequent papers build further evidence of the neuroplasticity model by demonstrating that adjusting subluxated cervical spines altered the excitatory and inhibitory drive to specific muscles in a muscle specific manner^{6,7}. These changes occurred at the level of the cortex.

More exciting studies are currently in press - look out soon in *JMPT* and *Spine*.

Courageous

It takes courage to believe in yourself and your vision. Many of us exhibit this in practice, both in the initial stages of setting up a practice and then in facing up to the misunderstanding that exists when one is preaching a non-mainstream message.

Our profession would be wise to understand that this is also true of our researchers and fully support them in their courage, conviction and vision.

Dr Haavik Taylor's address to our AGM was illuminating and inspiring. This is an exciting time for the science of chiropractic.

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INTERVIEW WITH INTERNATIONAL CHIROPRACTOR OF THE YEAR

- by Roley Cook

Martin Harvey, President of the Australian Spinal Research Foundation, was recently awarded 'International Chiropractor of the Year' at Parker Seminars Las Vegas.



Martin Harvey

Congratulations on being recognised at the Parker Seminar as International Chiropractor of the Year. It's a prestigious award and something of which you must be very proud.

I was thrilled, honoured and surprised. I am proud to have been acknowledged, but am also really conscious that I am being honoured for work that I was part of a team doing it. The Foundation Board, staff and all our volunteers did a huge amount of work and I was fortunate enough to be part of it.

What is your background?

I decided to become a chiropractor because my family had great experiences with chiropractic as a kid and I thought it looked like a great lifestyle. I was right on one hand, but didn't realise I would fall in love with chiropractic and its ability to help people live healthier, happier lives. As a student, DG was a massive turning point for me: it enabled me to see chiropractic in a new light and helped me connect with some amazingly generous and inspired chiropractors. I would say that whatever success I have had in practice, and in chiropractic, stems from attending DG for the first

time in 1990. I started in practice at the end of 1991 so have just clocked up 18 years in practice and I love it. I can't imagine doing anything else or retiring out of practice. One of the things I have come to realise is that the future of chiropractic depends on the amount of research we do. There is a real urgency for us to get the data that supports what we do.

Martin, despite your humility, these awards are not given to people without achievements. What are some of yours?

I have always felt very fortunate to be a chiropractor and felt it was only fair to give back so I have been on a number of chiropractic Boards including the CAA Victorian, Chiropractic Education Australia and, of course, the Australian Spinal Research Foundation. One of the achievements that stand out for me in that time are being the Chair of the Parker Organising Committee for last year's Parker seminar: to be part of something where so many incredible people were all working to help chiropractic improve was amazing. Another highlight is when I was elected to be President of the Foundation. To follow in the footsteps of people I admire greatly like Dave Cahill, Brian Kelly and John Hinwood is a great honour. Getting to deliver a paper at a conference in the US describing the Foundation's unique funding process, where we only fund studies that relate to the core paradigm of chiropractic, also stands out. Finally, being asked by Dr Matt McCoy to be on the editorial review board of the "Journal of Pediatric, Maternal & Family Health- *Chiropractic*" was a great honour.

The chiropractic profession has faced many challenges and achieved remarkable progress. What challenges do you see the profession facing currently and what aspirations do you hold for the profession?

I believe that almost everyone has the opportunity to have a healthier, happier life by having regular chiropractic care so my aspiration for the profession is that we move to a position in society where this is our role. I can see having a chiropractor being like having a dentist: something that everyone knows they should. To get there is where the challenges lie. At the moment registration boards, insurance companies and, most importantly, consumers are saying to put up or shut up. They are demanding that we have scientific evidence to support what we say. I see the biggest challenge

the profession faces is whether we have the commitment, patience and vision to support research on the scale it would take for us to provide that evidence. I'm excited though that Spinal Research can facilitate the needed research and we have great people in our professional leadership who can then use it to promote the profession to government. We are also committed to getting this information to practicing chiropractors, patients and the 80% of our communities who don't yet get chiropractic care.

Many of us are interested in the philosophies adopted by successful people. What is your 'mantra' and what philosophies do you embrace?

From a practice perspective, there are two mantras I love and use frequently. One of them is "great practices are built on the days when you don't feel like being there". It keeps me doing the right things even when I don't feel 100% or I'm running late or something negative happens. I also like "you can't be a revolutionary and be accepted at the same time". When it comes to chiropractic, as a health philosophy it is the opposite to what our culture traditionally embraces. We need to expect a bit of rejection or opposition of our ideas but still strive to communicate them in a way that is accessible to people with a 'pre-revolutionary' view of health.



Martin Harvey and Fabrizio Mancini



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Saturday 31st July 2010 - 9am to 5pm

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AUSTRALIAN SPINAL RESEARCH FOUNDATION FUNDS AMAZING NEW RESEARCH - by David Cahill

REMARKABLE AND REVOLUTIONARY RESEARCH THAT IMPACTS OUR UNDERSTANDING AND OUR QUALITY OF LIVING OCCURS AROUND THE WORLD ON AN ALMOST DAILY BASIS AND YET, TRAGICALLY, SO OFTEN GOES UNNOTICED.

In October 2009, the CAA hosted Dr Dan Murphy at their National Conference in Canberra. It was an outstanding presentation of the current medical literature of relevance to us, much of which lends great support to our work as chiropractors. From the point of view of neurology, the evidence has become overwhelming that if we improve joint proprioception by restoring normal mechanoreception and reducing aberrant nociception, then we have a major effect upon the central nervous system resulting in widespread 'global' benefits for the human being. In practice, most of us undoubtedly have certainty around this proposition.

Outside of our offices, the more widely pervasive medical paradigm pays scant attention to this research and our practical applications of it. For the world to sit up and take notice and, one day, fully take on board in a practical sense our offering to it, we need chiropractic research to make concrete the link between the adjustment and the neurological pathways, which are known to lead to substantial global human benefit.

Dr Murphy outlined briefly how knowledge has grown in the past two decades regarding the effect the nervous system has on the immune system. His recommended paper to read on that topic is *The Sympathetic Nerve - An Integrative Interface between Two Supersystems: The Brain and the Immune System*¹. If you manage to wade through this paper, one of the ultimate conclusions you will come to is that the post-ganglionic sympathetic efferent (PGSE) outflow is the major determinant of immune function. Yes, that reads the major determinant.

How exciting then that one of the two grants given most recently by the Foundation focuses on the PGSE. Associate Professor Philip Bolton at the University of Newcastle has been awarded a grant for a study entitled *Do chiropractic vertebral adjustments modulate sympathetic nerve activity in humans?* In this study, Dr Bolton will attempt to measure the effect of chiropractic adjustments on sympathetic nerve activity in humans.

Blood pressure, heart rate, skin, blood flow and sweating, together with direct recordings of sympathetic activity in the common peroneal nerve, will be measured concurrently. Recordings will be taken before, during and after the adjustments. One group will receive adjustments done by hand and another group will receive instrument adjustments.

The measurement of the sympathetic component of the common peroneal nerve utilises a technique called microneurography, upon which Dr Bolton has been developing his skills and collaborating with other researchers in Newcastle and Sydney for a number of years.

Equally as exciting is another grant awarded to Dr Bolton by *Spinal Research* recently. Again it is a direct measure of nervous system function, this time at the brain level. In Dr Bolton's words, "the aim of the study is to determine if the benefits of chiropractic adjustments occur through increasing the levels of one of the brain's primary nutritive factors, brain derived neurotrophic factor (BDNF).

"BDNF is a small protein produced by neurons, which plays a key role in neurological health by promoting the survival, protection and growth of neurons, as well as the development of new neurons.

"BDNF enables normal, healthy function of the brain and nervous system by supporting behaviours such as learning and memory. Interestingly, BDNF deficiency has also been implicated in situations of profound dysfunction in the central nervous system including Alzheimer's disease, Huntington's disease, depression and schizophrenia.

"One possible mechanism for the benefits of chiropractic adjustments may be that they upregulate BDNF levels in the brain."

The study uses an established rodent model of chiropractic adjustments. Its potential implications for the utilisation of chiropractic care on a wellness basis are profound.

Both these studies are an example of making direct the link between adjustments and nerve function. They are also an example of two different types of research, which are ultimately necessary to elucidate mechanisms. The sympathetic nerve study is a measurement directly on human subjects. We undoubtedly need to demonstrate our effects on humans. Human research, however, will never uncover all the mechanisms involved as to do so becomes far too invasive. Hence the need for animal research at a more basic level.

The Australian Spinal Research Foundation is committed to supporting an expanding research profile within the chiropractic profession.

Reference:

1 *The Sympathetic Nerve - An Integrative Interface between Two Supersystems: The Brain and the Immune System.* Elenkov, I, Wilder, R.L et al *Pharmacol Rev* 52:595-638, 2000

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The Mission of the Australian Spinal Research Foundation is to fund research and disseminate knowledge that enhances the understanding, development and effectiveness of chiropractic care.

RESEARCH FUNDING ACKNOWLEDGED

Australian Spinal Research Foundation was recently awarded the *International Leadership Award for Research* at Parker Seminars Las Vegas, which is the largest chiropractic seminar worldwide.

In presenting the award, the President of Parker College, Dr Fabrizio Mancini, commented "we know the challenges that face our profession through the need to increase knowledge, coming out of research, for all doctors.

"Spinal Research was established 33 years ago and is growing an outstanding international reputation for funding research which is unique to chiropractic.

"This award recognises Spinal Research's international leadership in being a vital link in nurturing researchers, developing the science of chiropractic in all its dimensions and providing service to the chiropractic profession internationally".

In accepting the award, Dr Martin Harvey, the President of Spinal Research, said "this award is a culmination of vision, determination and contribution by an enormous number of people spanning the 33 year history of our Foundation.

"The award acknowledges all those who have contributed by donations, membership, leadership or volunteer service to allow Spinal Research to serve and support the chiropractic profession.

"We clearly acknowledge them and invite others to contribute and participate. The research projects we have recently funded are very exciting and will evolve to become of real value to chiropractors in practice and the chiropractic profession at large.

"Research for the profession is constrained by limited financial resources and we, those who benefit from research, need to do more and



Roley Cook, Fabrizio Mancini and Martin Harvey

give more.

"As we receive funds we will continue to invest in research which will support the profession to ensure chiropractic achieves its rightful place in health care".

Congratulations to all those who contributed to the achievement of this award.



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FOUNDATION AWARDS LIFE MEMBERSHIPS

AT THE RECENT DYNAMIC GROWTH CONGRESS IN BRISBANE, SPINAL RESEARCH WAS PLEASED TO BESTOW LIFE MEMBERSHIP UPON DRs JOHN HINWOOD AND BRIAN KELLY.

Indicative of the importance and esteem which is placed in this honour is the fact that in the 33 years that the Foundation has been in existence, only two other life memberships had previously been awarded. Those were to Dr Doug Winter and Emeritus Professor John Waterson.

Both John and Brian have been outstanding servants of *Spinal Research* and, indeed, the chiropractic profession.

John joined the Board of Governors back in 1985 and became President in 1987. He held that position until 1995.

During his presidency, many initiatives were started and, while John would be the first person to state that he had many other great people helping him, no one other than John would have dared to dream so big about what was possible for chiropractic research in Australasia.

John has an incredible 'can do' attitude and, through that, he is able to be bold in endeavours and, importantly, enlist others to the cause.

Back in the late eighties and early nineties, his efforts included the following:

- Launching the Dynamic Growth Congress and workshops. This, in itself, is a singularly spectacular achievement. It is impossible to quantify the effect DG has had in terms of the personal and professional growth of chiropractors and CAs over the past 22 years. What is not commonly appreciated now is the unifying effect the Congress had, bringing people from the ACA and the UCA together for the first time under a common cause. It is also fair to say that many of the current generation of leaders in our profession, including those in *Spinal Research*, had their chiropractic fire stoked at DG.

- Launching the Bridge to the Future fundraising campaign. Again, John's strength in creating a vision and enlisting support showed that substantial funds could be raised in order to really kick off what was then an embryonic research community. The legacy of this initiative is still bearing fruit today.
- Successfully running the Bedtest program and selling the concept to manufacturers, creating an income stream which generated significant funds for research for many years.

There are many other achievements, of course, most of which we will never know, yet from which we will all continue to benefit in the years to come.

Mention must also go to Dr Judy Hinwood, who was co-convenor of Dynamic Growth and has also been a life-long contributor to chiropractic research. Her contribution, while often perhaps not as visible as John's, surely has been just as vital. We thank you Judy and wish for you to share in the spirit of this award.



John Hinwood receives Life Membership Award at Dynamic Growth Congress 2010

Brian joined the Board in 1997. He became chair of fundraising at a very difficult time in the Foundation's history. Cometh the hour, cometh the man, and Brian's ability to see beyond the (sizable) obstacles to the greater vision was what the Foundation so desperately needed at that time. He

became President in 1999 and was an inspirational leader in that position until 2006.

His leadership was characterised by strength and solid commitment to a grand vision. During Brian's term, the research focus was refined and the course was set for the path the Foundation has taken towards international leadership in chiropractic research.

Like John, Brian inspires others to join in the journey.



Brian Kelly receives Life Membership Award at Dynamic Growth Congress 2010

Both remain committed to the work of the Australian Spinal Research Foundation acting as honorary consultants.

It must be said that contributions such as theirs comes with great sacrifice and, often, it is their families who have had to go without them for large periods of time. To them, the current Board of Governors and, indeed, the profession at large, express heartfelt gratitude.

To John and Brian, thank you, congratulations and may your lives be enriched by knowing that your **magnificent contributions continue to inspire those following on towards greater achievement.**

AGM REVIEW - by Martin Harvey

'Exciting' is not normally a word that I would use to describe a weekend spent in a hotel meeting room, but that's exactly how I would describe the latest Australian Spinal Research Foundation's Annual General Meeting and Board meetings.

Dr Heidi Haavik Taylor gave a presentation on neurophysiological chiropractic research which was exciting because it supports the idea that spinal adjustments can help the brain and nervous system work better. Refer to page 8 for further detail.

It was also exciting to welcome new Board Member, Dr Brett Grant. Brett has a wellness-based family practice in Sydney and has been a long-term supporter of the Foundation. We are thrilled to have someone of his energy and passion for chiropractic and chiropractic research on the Board.

When he joined the Foundation, the CEO, Roley Cook, encouraged us to take on a 'dispersed leadership' model where each board member acts as a leader in their area of activity rather than relying on a 'top-down' model where the leadership role is fulfilled by the President and Vice President. It's a model that makes our Foundation much more dynamic and productive.

So it was exciting for us to be able to take this model to its next level and allocate each Board member Portfolios, or areas where they will be a leader in.

The Foundation Secretary, Dr Tony Rose, is continuing with his role as Dynamic Growth Congress Convenor and Dr Gary Smith is continuing his role as Convenor of the Dynamic Growth Experiences. They have both already taken these events to new levels and it's great that they are able to continue their work. Gary will also be responsible for getting video and photos from Foundation events.

Dr Rosemary Keating has taken on the 'Editor of chiropractic content' role where she is coordinating all the chiropractic information for all Foundation publications. Alongside this, Dr David Cahill is our new 'Research Journalist' where he will be translating research information into a form that will be more useful for practicing chiropractors. David will also be continuing his role as head of our Clinical Advisory Panel, which is a key part of our research funding process.

The Research Committee is headed up by the Foundation's Vice-President, Dr

Ray Hayek, who has done a massive amount of work in upgrading and streamlining our research funding processes. Ray has also taken on our portfolio related to International Research relationships.

Dr Brett Grant will be heading up our emerging chiropractors portfolio where he will be developing ways that the Foundation can help students and chiropractors in their first few years transition in to the profession.

As the Foundation's President, I will be continuing to head up the Parker Organising Committee and, with Roley Cook, take on the role of developing our international relationships.

Dr Mark Uren, as Foundation Treasurer, is overseeing the Foundation finances. Dr James Carter and Professor Elizabeth Deane are working on a new initiative of the Foundation that has the potential to massively increase the impact the Foundation has, but it's all top secret at the moment!

So it was a tremendously productive weekend and one that puts the Foundation in an exciting (there's that word again) position to grow and continue to pursue our Mission.

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Dynamic Growth Experiences are firing up for 2010. Plans are in place to make Dynamic Growth Experiences in 2010 highly relevant, useful and informative for chiropractors, chiropractic assistants, students and others.

The convenors are currently recruiting the best speakers and topics to really make these events outstanding for you - the delegate.

Topics will be varied and, depending on location, will include: neurology, dedicated CA and student sessions, research updates, paediatrics, practice management tips (especially for graduates), philosophy and guest speakers from outside the profession. You can look forward to an afternoon of fun, team and individual development, science, philosophy and art—all with practical and useable tips.

For those keen on a winter break away, why not consider DGE North Queensland in Mackay? This is followed by Synaptic Design's "21st Birthday Bash" on Hamilton island, which is the following weekend. A week off in between at Airlie Beach or the Whitsunday may be just what the chiropractor ordered!!

Be sure to reserve these dates in your diary!

DATE	CITY	CONVENOR(S)
29 th May 2010	Melbourne	Kimberlie Furness Troy Miles
19 th June 2010	Perth	Evan Lawson
31 st July 2010	New Zealand	Victoria Te Rito
7 th August 2010	Mackay (Nth Qld)	Justine Blair Angela Henderson
21 st August 2010	Brisbane	Travis West
11 th September 2010	Sydney	Julie Uren Shalom Drimer
16 th October 2010	Adelaide	Ashleigh Kemp

REFLECTIONS ON DG 2010

Delegates rolled in to experience the Dynamic Growth Congress 2010 in Brisbane and were treated to, what was arguably, the best line up of all time. The outstanding result from the congress was the overwhelming CONTENT that was delivered by all the speakers. Delegates left with a journal full of notes and action steps to take themselves and their practices to the next level of success. Our international speakers were outstanding, Russ Rosen, Tedd Koren, Laura Hanson and Jeanne Ohm - real crowd pleasers. Our local speakers stepped up to a new level with presentations on practice growth, hiring and firing, paediatrics and much more. There was also a wonderful taste of confront, with speakers putting out a challenge to the delegates to step up and take on the responsibility of growing chiropractic in their community.

Another huge outcome of the Congress is that not only were people inspired, educated and re-committed, it also raised vital funds to support the Australian Spinal Research Foundation in funding high quality chiropractic research - a great thing for all. Please, if you are not a member, join NOW!

We are already looking forward to DG Congress 2011 which will be full of more high quality speakers offering practical information and practice based ideas for every Chiropractor and their team.

See you at DG Congress 2011,
Tony Rose – Convenor



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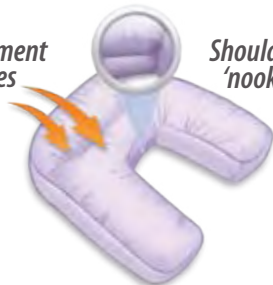
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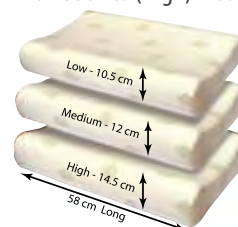


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