

**ALTERNATIVE HEALTH & REHAB. CENTRE, PLLC**  
**Alternative, Complimentary and Preventive Health Care Services**  
A Treatment Centre with a Holistic Personal Approach.

Open: 8am-8pm Monday-Friday, 9am-6pm Sat., by appointment  
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**Spinal Decompression Therapy -SDT**

**What is Spinal Decompression Therapy?**

Spinal Decompression Therapy is a group of non-surgical variable elongation (long axis) decompression traction procedures that effectively treats many back and neck structural alignment, pressure and pain conditions. This type of therapy is very successful with disc herniation, degenerative discs, spinal stenosis, scoliosis, posterior facet problems and their related nerve and joint pressure syndromes: Lumbalgia, Sciatica, Thoracic Outlet Syndrome, Lumbalgia, etc. This is done by decompressing (opening) the spinal discs and facet joints, and stretch the associated muscles, ligaments and tendons. This therapy effectively enhances the healing process by rendering guided reduced pressure changes to the structural motor units. This therapy enables the majority, about 85%, of patients to return to a more active and normal lifestyle, usually within 2-3 months, without the use of drugs or surgery.

Research conducted at major teaching Hospitals, Chiropractic Colleges and clinics shows that the abnormal, extensive, or incorrect placed disc or joint, produce nerve and joint pressure which is responsible for a significant number of low back, neck, leg and arm pain syndromes. Abnormal pressure by incorrect positioning, injuries, and abnormal development or degeneration changes increases internal disc pressure which can lead to possible bulge, protrusion (herniation) or prolapse (rupture) of disc material which then puts additional pressure on the exiting nerve roots and joint structure. The spinal decompression that we use here at the Centre is FDA approved, and has been clinically proven to relieve vertebral motor unit pressure, with a very high success rate for relieving pain and symptoms associated with restricted, herniated and/or bulging discs, and facet syndromes.

Our particular spinal decompression traction therapy protocols, in conjunction with our additional treatment modalities, can effectively relieve 95% of the pain and disability resulting from disc bulge, herniation, injury and degeneration, aids in the healing of damaged discs and reversing pressure conditions on the nerves. Our spinal traction therapy treats the functional and mechanical aspects of disc pain through non-surgical variable traction/decompression of spinal discs and facets along with active and passive rehab and fitness exercises. We have add acupuncture for pain control, mild hyperbaric oxygen therapy to enhance the oxygen, healing and repair rate, massage therapy for soft tissue damage and relieving of muscle spasms, rehab, exercise and fitness training for core muscle stabilization and control, nutrition for weight control and joint healing, cold compression therapy and low level laser therapy to enhance localized blood circulation and disc healing rate along with our detoxification program.

Clinical studies verify the significant reduction of internal disc level pressures which result in the non-surgical opening of the disc, foramen - nerve exit hole, and facets. Conventional continuous traction has not demonstrated a significant reduction of this internal disc pressure were variable directed decompression traction has.

Our computer controlled spinal decompression traction equipment is designed to apply distraction and decompression to particular areas of the spine without producing reflex para-vertebral muscle contractions/spasms.

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By significantly reducing internal disc pressure, this therapy promotes retraction of the bulging or herniated portion, back into the disc area and promotes intake of fluids, oxygen, nutrition and other substances necessary for healing the damaged area.

This activity stimulates repair and inhibits leakage of materials from the nucleus of the disc, thus reducing the possibility of future rupture. The task of relieving pain comes about as a result of relieving pressure and drawing areas of herniated disc and related material back into place.

Decompression therapy creates negative pressure within the disc, referred to as negative intra-discal pressure. This creates essentially a low pressure zone to help draw the bulging, or herniated disc material nutrients and oxygen back into the disc space.

The most recent research trial sought to correlate clinical success with MRI evidence. This type of therapy resulted in the reduction of disc herniation between 10% and 90% depending on the number of sessions performed, while disc annulus healing was evident in all cases.



MRI picture of disc herniation before and after therapy.

The most recent clinical study of 219 patients has shown that spinal decompression therapy alone, provided resolution of symptoms for 86% of the participants, and 84% remained pain-free 90 days after the 12 weeks of therapy were followed and completed. (Basic therapy only. By adding in the other complimentary therapies, our results are up to 95+%. Our research is on going.)

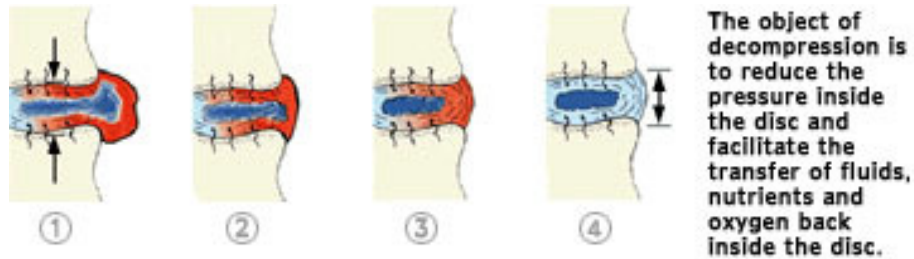
### **What Are The Treatments Like?**

After lying on the treatment table, either supine (face up) or prone (face down), you will be fitted with a decompression harness. The harness system helps to focus the decompression pressure to the effected spinal joints. The machine is then turned on and adjusted to your body weight, over all and individual cycle time, maximum and minimum traction pressure, rate of decompression and the location of the problem. The distractive forces utilize a computer controlled logarithmic curve to avoid reflex responses which would create muscle spasm. The split table design decreases friction and allows separation of the vertebra without over traction. (Most patients will see a 3-4 inch separation of the table). Almost always, therapy is painless. In fact, we've had several patients fall asleep during their therapy.

A specific treatment plan based on the latest scientific evidence shows the best results are achieved utilizing treatments over 6-8 weeks.

If needed, our spinal decompression therapy can be complemented by the disc pump/re-hydration device, other structural elongation therapies and oxygen therapy to enhance the speed and comfort of your correction. Although health insurances do not cover spinal decompression, they may cover spinal assisted traction and other complementary services performed in conjunction. (basic chiropractic, massage, acupuncture, muscle strengthening/fitness, nutrition and stress counseling, etc.)

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**Questions:**

**Whom is this therapy used for?**

Mainly chronic or un-resolving back or neck pain, since this pain is related to the spinal disc 90-95% of the time. Specific conditions include herniated, protruded, or bulging discs, spinal stenosis, degenerative disc disorder, sciatic nerve pain, facet syndrome, pinched nerves, and radiculopathy.

**What does spinal decompression do to my back?**

Disc space increases in height, this decreases disc pressure, protrusion and bulges, stretches the ligamentum flavum, reduces stenosis, opens the vertebral canal for increased nutrient flow, increases metabolite exchange, nutrients and oxygen, opens the apophyseal joints and reduces facet stress, nucleus moves to the lower pressure zone and enlarges, total intradiscal pressure drops to below 100mm Hg, facets and foramen opens and vertebral muscles stretch relieving spasm effects.

**How Long Are Treatments?**

Each treatment lasts 10-40 minutes at a time with each day session involving 1-4 treatments. This, of course, depends on your individual case and the intensity and involvement of your condition. Following each session, you should consider a cold pack, lumbar support/home disc distraction belt, any prescribed anti-inflammatory, muscle relaxants and pain relievers. It is important to note that many patients get substantial pain relief after just 6-8 sessions. If you follow our advanced treatment recommendations, in regards to additional therapy, lifting, proper posture, exercise, stress reduction, weight loss, proper body mechanics and follow-up care, you should return to your pre-condition activities relatively quickly and stay basically pain free for the rest of your life!

**How Long Will My Treatment Program Take?**

This depends on the complexity and extent of the treatment and rehabilitation needed, for the top end in pain (9-10) we consider twice a day treatment, 40 minutes each, and then progressively reduce treatment number and time as you respond. Most treatments will be administered over an initial 3-4 weeks. Therapy sessions are reduced and time between increased as we progress. After the acute aggressive treatment phase, sub-acute care and rehabilitation is added. This includes continuing special exercises, massage, stress reduction suggestions, mild hyperbaric therapy, fitness, core stabilizing and strengthening exercises and nutrition advice to enhance the short and long term results. Most patents are released to rehab/support care after 8-12 weeks and maintenance care of 1x/month after 24 weeks.

**Why is your type of therapy more successful than others?**

Distraction/traction therapy as practiced in our clinic is an advanced comprehensive treatment program, targeted “core” stabilization exercises combined with chiropractic and soft tissue care and rehab exercises. We use adjunctive therapies that have proven effective in healing rate. It is this multi-faceted approach that makes our combination of therapies so effective and is what sets our Centre apart from all others.

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**Can this Spinal Therapy help my back pain?**

Though each patient is different and no doctor can guarantee success, the clinical results of our combined therapy have been shown to be effective in over 95% of patients treated. The common problems of many back conditions are damaged discs and poor spinal muscle stabilization and control. Our treatment program addresses both of these core problems along with increasing oxygenation, and blood and nutrient exchange. This exchange of fluids is something the damaged disc desperately needs to help it repair and heal from the inside out. Muscle strength, control and endurance can all be improved with our spinal strengthening therapy program.

**Will these Spinal Treatments Hurt?**

This type of therapy is one of the most gentle and comfortable therapies available. The treatments utilize FDA cleared equipment with proven safety and efficacy. Most patients report a mild sense of stretch on their back and pelvis, and often fall asleep during treatment sessions. Usually the biggest problem is getting off the table.

**Is Spinal Decompression a New Type of Treatment?**

Although traction therapy has been around for thousands of years, computerized spinal decompression traction therapy is new. Advances in equipment and procedures have dramatically improved effectiveness. Continual improvements in the delivery system and regular updates in protocol keep this system in the forefront of non-invasive disc therapy. Each year over 75,000 patients are treated with this type of therapy and that number is growing. The blending of focused traction of the site, rehabilitation to the supporting structures, overall strengthening of musculature and disc nutrition makes our treatment protocols unique. This therapy affects the disc as directly as possible without surgery.

**Why the Need for Exercises and Other Therapies?**

Along with the damage in the disc, we also need to treat the supporting spinal muscles. A complete program targeting the function of the stabilization muscles of the spine is a vital part of our spinal decompression therapy. Ice, oxygen therapy, mild exercises and low back supports during the acute stage. Heat, muscle relaxation/massage and strengthening exercises, acupuncture, nutrition, mild hyperbaric therapy and detoxification of the body can offer additional benefits for inflammation, spasm reduction and joint healing and repair rate during the sub-acute phase. Our goal is to not only help heal the disc but enhance muscle control and support of the low back. A gradual breakdown of the foundational support of your back is what puts undue stresses on the discs and leads to disc degeneration, pain and loss of function. Our program of spinal decompression, exercise and adjunctive therapies will assist in rehabilitating these structures.

**Will My Pain Go Away For Good?**

Although it is difficult to predict the future, experience has shown that most of our patients do find long-term relief or effective management of their pain when they complete the entire recommended program of treatments and therapies. Regular home exercise and periodic maintenance visits to our clinic, will help in maintaining your spinal health and reduce the probability of reoccurrence. As with any comprehensive rehabilitation program, your continued home care exercises and discretion in some daily activities is the key to long-term relief. "Think twice, lift once!"

**How is Spinal Decompression different from older type traction?**

Older type traction is a simple steady force that is put on the patient's body with the intent of unloading the body's joints, muscles and other structures. For example, hanging upside-down is a common method to put the spine into traction. Rather than one's body weight putting stress on the spine, which is what happens when standing erect; the body weight is working to unload the spine.

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Various forms of traction have been around for over 2500 years; however, pain relief has been inconsistent and short-lived. In fact, several clinical studies have shown ordinary (old type, steady pull) traction to be an ineffective form of back and neck pain relief.

The reason is unexpected, but pretty simple. Our bodies react to the steady pull of the traction on the spine by contracting the muscles surrounding the spine as a protection to extension damage. Rather than achieving the desired effect of unloading the spine, the pressure on the spine is actually increased, thus increasing intradiscal pressure. Thus this old type of traction does NOT allow the discs to re-hydrate and heal, which is what ultimately yields pain relief. It is good for stretching the muscles.

Most patients, who fail to respond to our treatment, do not follow our treatment protocols, including acupuncture, flexibility and strengthening exercise and nutrition programs. Although the technology is unique, patients still have to take responsibility for their own healthcare and are advised to quit smoking, cut down on caffeine and alcohol (dries out the disk), loose weight and take nutritional vitamins and supplements to assist the healing process. Treatment contradictions are pregnancy, fractures, diffuse osteoporosis, fusions, malignancies or cancers of the bone.

**Some facts to consider when deciding on the use of distraction therapy vs. surgery:**

**Spinal Surgery:**

- Increased risk of complication due to hospital, anesthetic and scar development.
- Increased danger from possible infections.
- Surgery recovery time is generally 6-8 weeks.
- Additional 6-8 weeks of rehabilitation and physical therapy.
- Lower rate of short term and long term results.

**Our Spinal Distraction technique and therapy program has shown the following:**

- Significant relief of acute (short term) or chronic (long term) low back pain, associated leg pain and/or numbness, generally within 8-12 weeks.
- Successful in 90+% of patients completing recommended therapies.
- Earlier return to work without restriction.
- Non-invasive and low cost in comparison to medical intervention.

**Cost involved (see combined sheets for package program and discounts):**

**Basic Therapy:**

Initial history, case evaluation tests, review of findings and recommendations: \$45,  
Initial X-rays of primary (4) and secondary areas (2) involved - \$125-\$150, depends on areas,  
Spinal Decompression: \$30/\$45/\$60/\$75. Combined with other therapy: \$15.

**Additional Beneficial Therapies that can be added:**

Use of Posture pump during therapy: \$5.  
Other spinal related areas treated: (1-2 areas) - \$35, (3-4 areas) - \$45,  
Oxygen Bar: \$5/15-20 minute intervals  
Low Level Laser Therapy for inflammation and cellular repair - \$5 set-up + \$10/5 minutes.  
Mild HBOT: \$5 set-up + \$25/30 min. intervals, Sauna + O2: \$5/10 min. intervals

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**Other professional related services:**

Acupuncture: Initial - \$80, Follow-up - \$60,  
Massage: 50 minutes: \$5 set-up + \$1/minute (Deep - \$70, add hot packs/ full hot rocks - \$12),  
Fitness Trainer: Initial - \$5 + \$15/30 min, Fitness room: \$5/hour, 12 hours - \$30,  
Nutritionist: Initial - 1 hour - \$80, Follow-up: 45 minutes- \$45, 60 minutes - \$60,  
Counseling: Initial - \$80, 30 minutes - \$40, 45 minutes - \$50, 60 minutes - \$60,  
Iridology: Initial - \$75, regular evaluations - \$50.  
Exercise programs - Yoga, Callenetics, Aerobics, Weight training, etc.  
Colon Hydrotherapy - Initial: \$85, Follow-up - \$65.

**Other Services:**

Detoxification: Global Wellness - \$30, Ion Cleanse (foot bath) - \$30,  
Home Supplements, Supports and Supplies: cost plus 10%.

**CLINICAL STUDIES DOCUMENTING THE  
EFFECTIVENESS OF SPINAL DECOMPRESSION THERAPY**

*“Eighty-six percent of ruptured intervertebral disc (RID) patients achieved ‘good’ (50-89% improvement) to ‘excellent’ (90-100% improvement) results with decompression. Sciatica and back pain were relieved.” “Of the facet arthrosis patients, 75% obtained ‘good’ to ‘excellent’ results with decompression.”*

Shealy, Norman MD; Borgmeyer, Vera RN MA. Emerging Technologies: Preliminary Findings: Decompression, Reduction, and stabilization of the lumbar spine: A cost-effective treatment for lumbosacral pain. American Journal of Pain Management. 1997; 7(2).

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*“Serial MRI of 20 patients treated with the decompression table shows in our study up to 90% reduction of subligamentous nucleus herniation in 10 of 14. Some rehydration occurs detected by T2 and proton density signal increase. Torn annulus repair is seen in all.”*

Eyerman, Edward MD. Simple pelvic traction gives inconsistent relief to herniated lumbar disc sufferers. Journal of Neuroimaging. Paper presented to the American Society of Neuroimaging, Orlando, Florida 2-26-98.

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*“Results showed that 86% of the 219 patients who completed the therapy reported immediate resolution of symptoms, while 84% remained pain-free 90 days post-treatment. Physical examination findings showed improvement in 92% of the 219 patients, and remained intact in 89% of these patients 90 days after treatment.”*

Gionis, Thomas MD; Groteke, Eric DC. Surgical Alternatives: Spinal Decompression. Orthopedic Technology Review. 2003; 6 (5).

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*“All but two of the patients in the study improved at least 30% or more in the first three weeks.” “Utilizing the outcome measures, this form of decompression reduces symptoms and improves activities of daily living.”*

Bruce Gundersen, DC; Michael Henrie, MS II, Josh Christensen, DC. A Clinical Trial on Non-Surgical Spinal Decompression Using Vertebral Axial Distraction Delivered by a Computerized Traction Device. The Academy of Chiropractic Orthopedists Quarterly Journal of ACO, June 2004.

**Flexion Traction Technique - Cox Technique - FTT**

**What is it?**

Flexion-Distracton, (FD) is a prone, on your stomach, treatment procedure utilized for back pain. Flexion-Distracton is an alternative procedure used for those patients whose conditions do not need surgical intervention or spinal distracton, but still need joint mobilization.

**Flexion-Distracton is utilized for many conditions such as:**

Failed Back surgical Syndromes	Disc Bulging/ Herniations
Sciatica / Radiating Leg pain	"Whiplash" injuries
Stenosis	Radiating Arm Pain
Neck Pain	Failed course of Steroid Injections
Radiculitis	Spondylolisthesis
Transitional segment defects	Facet Syndromes
Spinal Scar tissue and Adhesions	

**How does Flexion-Distracton Work?**

For Disc related conditions:

Increases the posterior intervertebral disc height by removing tension on the posterior annular fibers and nerve.

Tightens the posterior longitudinal ligament to help return bulges into the annular disc fibers.

Allows the nucleus pulposus, the center of the disc, to rock forward more and relieve posterior pressure and irritation of the spinal nerve.

Helps return physiological motion to vertebral facets.

Improves circulation, reduces swelling and increases posture and locomotion.

For Non-Disc related conditions:

Patients with other conditions causing back pain (facet syndrome, spondylolisthesis, sprain/strain, scoliosis, transitional vertebra, sacroiliac restrictions and misalignment, certain types of spinal stenosis),

Flexion/Distracton provides motion, pressure related benefits and helps align the spinal joints into a more normal position in the following way:

The posterior disc space increases in height.

Decreases disc protrusion and reduces stenosis.

Stretches the ligamentum flavum, to reduce stenosis.

Opens the vertebral canal by 2 mm (16%).

Increases metabolite, nutrients and oxygen transport into the disc.

Opens the apophyseal joints and reduces posterior disc stress.

The nucleus pulposus rocks.

Posterior intradiscal pressure drops to below 100mm Hg.

Intervertebral foraminal openings enlarge giving more room to the nerve.

**Cost:** this is an assisted traction add on to other chiropractic therapies of side position, thoracic elongation and cervical therapy. Directly assisted intermittent flexion traction, intermittent lateral flexion with traction - left and right, and intermittent flexion traction with lateral flexion, lateral flexion with intermittent flexion traction. This is a supplement to "AS" ilium problem.

Treatment - \$25, If additional to other low back therapies - \$15.

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**Extension Distraction Technique - Robeson Technique - EDT**  
**--- This traction technique is exclusive to this Centre ---**

**What is it?**

Extension-Distraction, (ED) is a prone, on your stomach, aggressive treatment procedure utilized for back pain related to disc and facet problems. Extension-Distraction is an alternative procedure used for those 10-15% patients whose conditions may not be able to handle spinal decompression or flexion distraction, and is used before surgery is considered.

**Extension-Distraction is utilized for many conditions such as:**

Failed Back Syndromes	Disc Bulging/ Herniations	Sciatica / Leg pain
Stenosis	Failed course of Steroid Injections	Radiculitis
Spondylolisthesis	Transitional segment defects	Facet Syndromes
Spinal Scar tissue and Adhesions	Failed Physical Therapy	

**How does Extension-Distraction Work?**

This technique maintains the lordosis in the intervertebral disc height or slightly increases it, while increasing the anterior disc height by continuous extension slow traction. While in this extended elongation position laterally bends and posterior rotation is applied. This is applied until the convex side reaches the extension lateral bend and rotation end point removing any muscle slack. At this end point a quick extension pull is applied. This set pull releases the restricted facet joint and creates a vacuum force on the disc to move it anterior, thus relieving pressure on the disc and nerve root.

**Results are:**

- The anterior disc space increases in height allowing the disc to move forward.
- Decrease disc protrusion by vacuum effect and reduces stenosis.
- Stretches the anterior longitudinal ligament to increase spinal flexibility.
- Opens the vertebral canal depth.
- By increasing mobility, metabolites, nutrients and oxygen are transported into the disc.
- Opens the apophyseal joints and reduces posterior disc stress.
- The nucleus pulposus is pulled anterior.
- Posterior intradiscal pressure drops.
- Intervertebral foraminal openings enlarge giving more room to the nerve.

**Cost:** This is an assisted traction add on to other chiropractic therapies of side position, thoracic elongation and any cervical work. This is a supplement to "PI" ilium problems.

Treatment: \$25, If additional to other low back therapies: \$15.