

INFORMED CONSENT

Stroke: Stroke is the most serious problem associated with chiropractic adjustments. Stroke means that a portion of the brain does not receive enough oxygen from the blood stream. The results can be temporary or permanent dysfunction of the brain with a very rare complication of death. Chiropractic adjustments have been associated with strokes that arise from the vertebral artery only; this is because the vertebral artery is actually found inside the neck vertebrae. The adjustment that relates to vertebral artery stroke is called the "extension-rotation-trust atlas adjustment." *We do not do this type of adjustments on patients.* Other types of neck adjustments may also potentially be related to vertebral artery strokes, but no one is certain. The most recent studies (*Journal of the CCA, Vol. 37, No. 2, June 1993*) estimate that the incident of this type of stroke is 1 per every 3,000,000 upper neck adjustments. This means that an average chiropractor would have to be in practice for hundreds of years before they would statistically be associated with a single patient stroke.

Disc Herniations: Disc herniations that create pressure on the spinal nerve or on the spinal cord are frequently successfully treated by chiropractors and chiropractic adjustments, traction, etc. This includes both in the neck and back. Yet, occasionally chiropractic treatment (adjustments, traction, etc.) will aggravate the problem and rarely surgery may also cause a disc problem if the disc is in a weakened condition. These problems occur so rarely that there are no available statistics to quantify their probability.

Soft Tissue Injury: Soft tissues primarily refer to muscles and ligaments. Muscles move bones and ligaments limit joint movement. Rarely chiropractic adjustments, traction, massage therapy, etc. may tear some muscle or ligament fibers. The result is a temporary increase in pain and necessary treatments for resolution, but there are no long-term affects for the patient. These problems occur so rarely that there are no available statistics to quantify their probability.

Physical Therapy Burns: Some of the machines we use generate heat. We also use both heat and ice, and recommend them for home care on occasion. Everyone's skin has different sensitivity to these modalities, and rarely, either heat or ice can burn or irritate the skin. The result is a temporary increase in skin pain, and there may even be some blistering of the skin. These problems occur so rarely that there are no available statistics to quantify their probability.

Soreness: It is common for chiropractic treatments, traction, massage therapy, exercise, etc. to result in a temporary increase in soreness in the region being treated. This is nearly always a temporary symptom that occurs while your body is undergoing therapeutic change. It is not dangerous, but please do tell your doctor about it.

Other Problems: There may be other problems or complications that might arise from chiropractic treatment other than those noted above. These other problems or complications occur so rarely that it is not possible to anticipate and/or explain them all in advance of treatment.

How safe is chiropractic treatment compared to medical treatment? A study by Dabbs found that chiropractic adjustments are **100-400** times safer than taking NSAID's (drugs like aspirin, motrin, nuprin, aleve). NSAID's are the most commonly prescribed drugs for neck and back pain. (*Dabbs, V., JMPT 1995; 18:530-536*). A study published by the medical journal Spine compared the safety of neck manipulation to forms of medical treatment. The study found that the chance of serious injury are as follows:

Neck Manipulation	1 in 1,333,000
Taking NSAID's (drugs like aspirin, motrin, nuprin, aleve)	1 in 1,000
Neck Surgery	1 in 89

(*Hurwitz, E.L., Spine, 1996:21:1746-1760*)

These studies prove that chiropractic treatment is hundreds of times safer than medical treatment.

Compare these risks to some of those of everyday living that we readily accept:

Dying in an auto crash	1 in 5,000	Drowning	1 in 20,000
Dying from general anesthesia	1 in 30,000	Choking to death	1 in 68,000
Dying in surgery	1 in 80,000	Dying from poisoning	1 in 86,000
Dying in an airplane crash	1 in 250,000	Dying from electrocution	1 in 350,000

(*McCarthy, L.J. Patient Care, October 15, 1998*)