

Spinal Hygiene and Safety, Part One

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Spinal hygiene and safety may be a new concept for chiropractors, but if you have a family practice, this should become a part of your daily routine for parents and children. Dentistry has promoted its concept of dental hygiene for decades. And after years of diligent repetition, the general public has accepted the necessity of visiting the dentist as just another part of their lives.

The habits of Americans have been altered by dentistry, from purchasing fluoride toothpaste to the niche products for baby-boomer concerns for tartar control and gingivitis. Flossing has become a daily ritual for the masses, and parents wouldn't imagine giving their infant a night-time bottle. All these behaviors have become conditioned because dentists took the time to teach their patients about dental hygiene.

Chiropractors have a similar opportunity to share ideas and behaviors that would enhance the recovery of the patient or improve their lifestyle. In a family practice, the chiropractor examines the spine of the child as a routine. It is during these visits that the doctor should take time to share his or her knowledge to the child and parent.

Start your spinal hygiene and safety awareness with new parents. Advise parents that approximately 50 percent of all infants are accidentally dropped in their first year of life. That's an alarming figure, and occurs most commonly when the infant is on a changing table, bed or couch. Recommend to parents to never leave their child unattended on the couch or bed (even if it's for 30 seconds to answer the telephone), and teach them to change their infant on the floor (which is ergonomically better for the adult spine) to reduce the risk of spinal trauma.

Changing diapers may also place undue stress on the thoracic spine. Raising the infant's legs with one hand to place the diaper underneath can cause repetitive stress to the spinal joints. Commonly, a vertebral subluxation in this region may contribute to the disorder of the colic or stomach reflux.

The use of baby walkers appears to be on the rise again since manufacturers have addressed some of the previous safety concerns. Unfortunately, the alterations do not improve placing early stress on the lumbopelvic area and lower limbs. Baby jumpers are a joy for infants who like to be upright and in motion, but the repetitive bouncing stress can be unhealthy on joints that are not yet developed to bear weight.

Baby bouncers (a cloth carrier on string suspension) that the infant can use to rock themselves are often placed on a kitchen counter or dining room table rather than the floor. The added height can become a problem if the child creates enough momentum and springs off the counter, usually striking their skull.

The portable high chair that is attached to the end of the breakfast table is another hazard. Poor attachment to the table or a heavy infant who strongly rocks the chair can propel the infant backward, risking a fall to a hard surface.

Public awareness has changed consumer habits by alerting automobile drivers with airbags to avoid placing infant carriers and children in the front seat. However, many parents unknowingly

endanger child passengers with other unsafe procedures. For example, most infant car seat manufacturers recommend that car seats not be reused if they have been involved in a car accident. Parents should be made aware that many manufacturers will replace or reduce the cost of replacement of the car seat if you return it. Many companies have a policy to review their products after an accident.

Early this past March, the National Highway Traffic Safety Administration (NHTSA) and the Consumer Product Safety Commission (CPSC) announced a massive recall of 800,000 "Evenflo On My Way Home" infant car seat/carriers. It appears that the product meets the crash standards inside the car, but there is no mandatory safety standard for using the seats outside of the car. Both agencies have reported injuries that have occurred because buttons on either side of the seat that are used to latch and adjust the carrying handle can unexpectedly release, causing the seat to flip forward.

Skull fractures, concussions and bruises have been the most commonly reported injuries. Those who have this product with model numbers #207 and #497 can call the Evenflo hotline for a free kit to correct this problem. Their phone number is (800) 203-2138.

For those family chiropractors who treat children in automobile accidents, take note. The federal standard for car seats is that the product must be designed to prevent serious injury in 30 mph crashes. Unfortunately, many insurance companies and even IME chiropractors will defend a position that children in car seats cannot be injured in crashes.

Another safety issue for the car is the proper use of seatbelts for children. The shoulder harness should not cross the neck of the occupant or be worn under the armpit of the child. Several companies manufacture a device that will lower the shoulder harness to the comfort and safety level for the smaller child.

Dr. Carol Phillips, a pediatric chiropractic authority, has discovered that often the infant carrier (which is made from molded plastic) has a large indent or hole approximately at the sacral region. From her clinical experience, she has noted that this can cause sacral strain, causing subluxation. Dr. Phillips recommends that the chiropractor inspect the carrier and, if this problem does exist, inform the parent to have a piece of foam to fill the space.

Part two will discuss the spinal hygiene and safety for the older child. For a copy of the USA Today article regarding the infant car seat recall, contact the ICPA at 1-800-670-KIDS (5437).

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