

## In the Wake of the Quake

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The time was 5:03 on October 17, 1989. I had just finished working on a patient and had sent him downstairs. Suddenly the floor beneath me started to move. There was no guesswork to be done; this was an earthquake and not a small one. I ran down the stairs and herded everybody out of the building into the parking lot. That's when the ground really started to move. It was like standing on a surfboard with lots of waves passing underneath you. I kept waiting for the earth to open and swallow us up or for the bridge next to us to collapse -- neither of which happened. After what seemed an eternity the ground stopped moving, or almost. No one could really tell. I looked at the bridge over Richardson's Bay, and the gaps in the expansion joints of the bridge were at least twice as wide as they had been just a moment before.

I had never been in a disaster like this before. What would happen to myself and my patients over the ensuing days was quite interesting. It took a few moments to really realize what had happened. Everyone had a sense of relief that they were still alive and nothing really bad had happened within eyesight. With the realization that we had no electricity, a patient turned on his car radio. In the following minutes we were to understand how lucky we had been to escape injury and destruction. Things got worse as time progressed. The fullness of the damage began to sink in. What at first, almost seemed like euphoric laughter, turned to sounds resembling fingernails scraping down a blackboard. No one really wanted to go back into the office, even though as best we could judge the ground had stopped moving. I would have been hard-pressed to actually determine if the ground was shaking or not. There was no sense of foundation or reality. Any quick motion felt like we were riding waves again -- this was to last for days, even weeks. Any sensory cue that was happening at the time of the quake, when repeated brought back all the same sensations and emotions again. Example: My office manager's office is right below mine. For up to a week after the quake, if my footsteps got loud enough, she would lose her equilibrium -- just as during the moments of the "shake, rattle and roll."

During the hours following the shaking there was a huge sense of loss. Not only of property and lives, but also of security. There seemed to be no foundation to anything. All you believed was real, was not anymore. All I wanted to do was be home in bed, trying to find some source of security. For days after the quake everybody was in shock. A lot of people just sort of walked around with their mouths slightly open and a blank stare on their face. When asked, most people said they were keeping things pretty simple. They were incapable of thinking on their normal more complex levels. Things that mattered before didn't quite seem the same. The major reevaluations hadn't even started for most people for some time to come. Mostly people were just dealing with the enormity of the shock. Personally, I could not believe how affected I was.

In working with patients after the quake, I quickly began to see patterns unfolding. Everyone that I saw had their entire low back out bilaterally, as iliums, L5PL, and L3PR. Even if patients had had no history of problems in their low back, they were all out of position. Their distortions in the rest of the spine were fairly normal except increased. All patients lost a lot of progress. It was like turning the calendar backwards a few weeks to months, depending on the patient. I feel the findings in the low back are due to the increased stress. This blew the adrenals out, causing the sartorius muscle to contract, pulling the iliums forward into their distortion. This was so dramatic



that the third and fifth lumbers followed suit in their own compensatory posterior distortion. Again, because of the stress on the adrenals, most low backs were much more unstable and responded much more slowly.

People's mental state in the ensuing days was even more interesting. Some people -- the majority -- were simply in shock and trying to deal with it as best they could. Then there was a whole segment of people who were into denial of the whole situation. I had one patient who was one of the first people to get to the I-880 overpass -- the highway that collapsed. He climbed up on the structure. With the sensation of the explosions going on in the cars that had been crushed on the first level, rocking his feet, he gave first aid to the survivors on the top deck who had just fallen 30 feet straight down. After hearing all the stories he had to tell, I asked how he was doing. He replied that he was okay. It seemed very evident that he had not contacted his own emotions and how he really felt about the whole situation. I suggested that he seek some professional help to assist him in really coming to terms with the whole situation. You could see the same denial in lots of people's faces.

As time has progressed, a lot of people are coming to terms with what all went on. I feel most people's basic fundamental foundations were rocked. This led to a lot of "stuffed" stuff coming to the surface -- a lot of personal insecurity, doubts about who they were and where they were going. For the people who are in denial, the process is more slow and arduous. The people who have been more sensitive to their experience seem to be doing better at this point. New energy and new focuses are being developed. New foundations are being laid. The signs of recovery are there. For some people who have started the healing process, there seems to be a higher focus to life for them. There seems to be a benefit coming from the trauma. People pulled together for the benefit of all. Some people are feeling the start of a new beginning based on higher ideals and aspirations based more on love. For the people in denial, they are still in limbo -- not really here or there -- just waiting to start the healing process.

All in all, if you find yourself in a disaster, please give yourself the time to deal with the shock and trauma. Then assist your patients through the process as gently as you can. Try to get the people who are in denial to start the process of contacting their real feelings as to what happened. The sooner they start the sooner they can come to completion with it.

Due to the greatly increased stress levels, it is much more difficult than normal to get adjustments to stay. I found people much more willing to try to blame the doctor for their problems. I have had to spend a lot of extra time explaining the debilitating effects of stress on their own particular problems. I've found the best method of dealing with the situation is to increase my levels of compassion and patience.

I hope you never find yourself facing a major disaster, but if you do I hope these thoughts might be of some benefit.

JANUARY 1990