

CHIROPRACTIC (GENERAL)

Taking the Poison

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As the son (and grandson) of chiropractors, growing up in a chiropractic family, the "medicine cabinet" was generally filled with shampoo and shaving cream. We didn't keep the usual bottle of aspirin you see in most households. My parents looked to chiropractic adjustments instead.

If you had a headache, it was your body's way of telling you that you needed an adjustment. You told Dad and got one, pretty much on the spot.

Unfortunately, not everyone grew up understanding the value of chiropractic. Most used aspirin and other painkillers as their primary method of numbing the signals their bodies were trying to send them. Many of those people eventually became chronic users of drugs (usually in combination) to relieve their "pain." They never saw pain as a message, only something to be avoided.

You probably know some of these people. They may even be some of your patients. They take four or even six over-the-counter pain pills when the instructions say to take one or two. They take two pills of one painkiller and two more of a different painkiller an hour later.

Many of them are psychologically addicted to their pain drugs. They take them every day, just to make it through the day.

A recent study suggests that persistent use (overuse) of analgesics (particularly the over-the-counter variety) is associated with chronic pain. (Please see "When Painkillers Cause Pain" on the front page of this issue.) This study makes some observations that not only support the chiropractic paradigm, but may apply to some of your patients with persistent pain patterns.

Depending on which study you read, chronic headache is suffered by 2%-5% of the population. Other studies report a prevalence of chronic headache associated with medication overuse of about 1%. This means that between 20% and 50% of all chronic headache is associated with medication overuse. These figures probably hold true for your patients as well.

In fact, chronic headache associated with "medication overuse" is so prevalent that the International Headache Society adopted the term "drug-induced headache" as a classification in 1988. As with many things that may not be politically correct, this term was changed to "medication overuse headache" (MOH) some time later.

In the study at hand, the authors developed "odds ratios" for the likelihood of having chronic pain according to the results they found in their study. Interestingly enough, the likelihood of chronic pain increases with the length of time a person uses analgesics daily. Those who used daily analgesics for six months or more were more than 20 times more likely to have chronic migraines, almost 10 times more likely to experience chronic nonmigraine headaches, and three and a half times more likely to have neck and/or low back pain.

This should tell you something about your patients, especially the ones who are not responding as well as you'd like.

From the results of this study, you could conclude that patients taking painkillers daily may never be able to eliminate their headaches, backaches or neck pain until they get off them. If the constant influx of drugs is contributing to the pain, all the chiropractic care in the world may not be able to overcome the harsh effects these drugs are having on a body that is constantly doped up. The authors also point out that: "Potentially all drugs [emphasis mine] may lead to MOH (medication overuse headache)..."

You should strive to learn what drugs your patients are taking, how much and how often. Whether you are free to suggest that they decrease the amount of over-the-counter drugs they are taking is an issue of chiropractic practice rights within your state.

Regardless, encourage those patients who are constantly taking painkillers to read "When Painkillers Cause Pain," and perhaps suggest that they consider if they may be among those whose pain is associated with their drug use. According to the International Headache Society, if their pain is "drug-induced," they should see their "headache disappearing after withdrawal of the substance (medication)." Unfortunately, depending on how long and how much they have been taking, it could take awhile for the drugs to completely clear out of their system.

Sadly, we live in a time in which people are so used to taking pills as a solution that they are using them for perceived convenience, rather than for health. (Please see the graph on the front page of this issue for another example of drug misuse for convenience.) Many people today are ready and willing to sacrifice their long-term health for a quick fix.

You may be the only voice of reason in the lives of your patients who are caught up in a society bent on addressing everything with a drug.

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