Dynamic Chiropractic

ORTHOTICS & ORTHOPEADICS

Post-Adjustment Walking and Proprioceptive Rebooting of the Brain

"Why do I have to walk up and down the hall after an adjustment?" This is a common question in my office. Throughout the years, I have realized that watching the patient's gait, including toe and heel strike, toe-in and toe-out, limping, pelvis, shoulder and ear levels, arm swing, and overall posture were all great answers. The truth is, these are all tremendously important. The observations are beneficial in deciding the status of the patient, and what to do next. For many years, this was my main focus and my patients definitely improved.

After several years in practice, I decided to check my patients after having them walk back and forth in my office following their adjustment. I was pleased to see that my adjustment was holding, and that other areas of concern (subluxations) were appearing. I then worked on the new areas, and then repeated the hall-walking process. I continued to work on these patients in this manner until all subluxations were corrected for that day. I started doing this with all of my patients and achieved good results. I took this as a standard for my practice.

One day, I had several patients who were in a rush, and they left the office before I could instruct them to walk the hallway and have their spines rechecked. The outcome was very interesting. In each case, the results of the adjustment were less than we expected. I then started to think of the cause of the less-than-positive results, and decided that it had to do with more than the gait, arm swing, and other obvious reasons. I decided to apply some of the neurology I had learned through my postgraduate classes.

The sensors of the body send messages to the brain via the sensory nerves that travel from the spinal cord to the brain. There are a great many different sensors that transmit signals to the brain, but I am only going to address proprioception. As written in *Taber's Cyclopedic Medical Dictionary*, proprioceptors are receptors that respond to stimuli originating within the body itself, especially those responding to pressure, position, or stretch (i.e., muscle spindles, Golgi tendon organs, Pacinian corpuscles, and labyrinthine receptors). Every spinal adjustment affects every part of the body, including muscles, nerves, joints, blood vessels, organs, and every other major system of the body.

My theory is that the brain assimilates the proprioceptive information submitted by the sensors and processes the effects on the body. This may take a little time for the brain to analyze and make optimal use of these data. During this time, I have the patients walk and allow the brain to "reboot" and then relay to the body the overall effect of the spinal adjustment on the body. If the brain is not given the opportunity to completely analyze the information, it seems that the body does not respond as well to the adjustment, and at times reverts to pre-adjusting status.

I call this "post-adjustment walking and proprioceptive rebooting of the brain." This procedure has served my patients very well over the years, and I hope that it can be of use to others.

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