

Pain Relief: The Digestion Connection

Charles Masarsky, DC, FICC

Author's Note: Each patient education article in this column is written for your current and potential patients. It draws on the research documented in *Somatovisceral Aspects of Chiropractic: An Evidence-Based Approach*, co-edited by Marion Todres-Masarsky, DC. Whenever possible, I have updated the material from the textbook with more recent research findings.

There is an interesting body of evidence linking subluxation correction to improved digestive function. Unfortunately, this body of evidence is still too small to be deeply convincing to most people. However, this evidence needs to be understood in the context of the irrefutable risks posed by pharmaceutical painkillers. The following patient education article will make this context crystal clear. Please feel free to use it on your bulletin board for lay lectures and in your practice newsletter.

Doctors of chiropractic have helped millions of people obtain relief from back pain, neck pain, tension headaches and other painful symptoms related to the spine. What most people don't know is that chiropractic care may confer other health benefits as well.

Nerves from many regions of the spine have a definite digestion connection.¹ These spinal nerves are capable of speeding up or slowing down the passage of food through the gastrointestinal tract, increasing or decreasing the amount of digestive juices secreted into the tract, and sending a greater or lesser supply of blood to various digestive organs. The consequences of disturbing these spinal nerves are not necessarily limited to spinal pain, but can potentially involve any function affected by these nerves, including digestion.

An Australian survey of 1,494 chiropractic patients revealed that spinal pain is often accompanied by heartburn or indigestion.² The majority of these patients never told their doctors of chiropractic about their stomach symptoms - only their spinal pain, which usually was located between the shoulder blades. Of the patients with indigestion or heartburn, 22 percent reported relief from their digestive symptoms, as well as their spinal pain, while under chiropractic care.

Other studies have linked low back pain to constipation or diarrhea.^{3,4} Correction of misalignment or restriction (subluxation) in the lumbar spine or pelvis was followed by relief of both the low back pain and bowel problems.

Unfortunately, many people with back pain, neck pain, tension headache and other types of spinal pain turn to painkilling medications before trying chiropractic care. This decision may be detrimental to digestive health. For example, the American Gastroenterological Association estimates that some 16,500 Americans die each year from bleeding ulcers related to the use of nonsteroidal, anti-inflammatory drugs (NSAIDs).⁵ This category of drugs includes several that are commonly taken for spinal pain, such as Aspirin, Advil, Aleve, Motrin, and Naprosyn.

Tylenol is not an NSAID and is not believed to be responsible for significant numbers of bleeding ulcers, but it has been linked to another digestive problem - liver damage.⁶ The risk to the liver posed by Tylenol is especially severe in patients already taking other medications with known liver toxicity.⁷

While the research evidence linking chiropractic care to improved digestive health is not yet conclusive, compare it to the drug approach. There is compelling evidence that the medications many people use instead of chiropractic care are hazardous to digestive health.

No painkilling drug can match the safety record of chiropractic care. Is it reasonable to make painkilling drugs your first line of defense against spinal pain? Or is it more intelligent to consider this approach: Chiropractic first, drugs second, surgery last?

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MAY 2007