Dynamic Chiropractic



CHIROPRACTIC TECHNIQUES

The Next Best Thing to Spine Adjusting...Extremity Adjusting

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It was in my first quarter in chiropractic college (October 1973) when I realized that if I was to treat the whole person, like the school said, I would be doing by treating the spine. Then I would need to go home to my athletic friends and face them with good spine skills and excuse myself if it were a traumatic injury to the knee, shoulder or a foot. Somehow, that did not sit well with me.

You see, I had injured some of my friends in the course of athletics and I felt responsible for fixing them when I went home, to have the skills to really do something for their knee, shoulder or foot. A fellow upper quarter student knew my love of sports and suggested I attend an off campus extremity seminar with him to learn the techniques that treat outside of the spine and that would ultimately help me become the Sports Chiropractor.



I had expressed what I desired to be. That was the beginning of a long journey that has led me to a very different understanding of how the body works and why it breaks down at times. I believe people should live healthy and have strong bodies into old age without needing artificial parts. This begins with what chiropractors call "The Master Control System" of the brain, spinal column and spinal nerve roots going out to all the muscles, organs and tissues of the body telling them what to do, when to do it and how much to do it.

Bottom Up

This system from the "Top Down" is encased in bone until it exits the spine and goes to its designated end point tissue. I especially noticed that many of these end point tissues are in the extremities and they also have joints. It was taught that "structure determines function," and that thought led me to palpate the models of extremities in the library besides the spine. I eventually learned that the structure was designed to work in those extremities in very predictable ways and when I got to the feet and saw that structure it hit me.

There is another "Master Control System" from the "Ground Up."

The best kept secret is that everyone's feet have unique angles to the ground and the right foot is not always the same as the left foot. These varying angles of the feet then rotate the legs differently upon each step, which rocks the pelvis on one side farther than the other side and pulls the lumbar spine through the psoas muscle to one side more than the other. BINGO! I just came to understand why some chiropractic adjustments don't hold well.

So, the moral of this first story about extremity adjusting is that to truly balance the human body, one must not only be a student of the "Top Down Master Control System" which is "Neurological Soft Tissue" to help people get well, they also need to be a student of the "Ground Up Master Control System" which is "Mechanical Hard Tissue" and controls bone rotation from the congenital angles of the feet. The true foundation of the spine when standing and ambulating is the feet. The foundation of the spine while sitting is the pelvis.

While at Palmer College, I was involved in two very different sports that helped pay my way through school and offered an on-field classroom of injuries to experiment with. I acquired a full scholarship playing rugby and discovered that I was one of the few players on the team interested in extremity adjusting and, by default, handled a number of injuries as a student both for our team and others.

It became apparent that the other players that attended chiropractic college with me were not as interested in dealing with these very interesting injuries. Furthermore, I began to realize that some injuries were hard to figure out and lacked solid protocols in that period of time and needed some way of accurate identification. Only then could a proper treatment be given and tested for accomplishment of the task.

The other sport I initiated at Palmer was wrist wrestling (arm wrestling), which developed into a team that practiced a few times during the week and traveled on the weekends looking for action in the towns up and down the Mississippi. The stresses of wrist wrestling would tear ligaments and break arms at times.

Once again I had a ready-made classroom of real injuries to test different protocols of diagnosis and treatment. My education led me to mechanoreceptors and discovered that they were in each joint of the body and that when those tissues were stretched, they would inhibit adjacent muscular activity.

This is when I applied muscle testing to the joints that were injured and found there was consistent weakness with certain subluxations of the joints. When these subluxations were corrected, the strength returned immediately. This discovery was a major breakthrough in figuring out and treating extremity injuries and subluxations.

I now had pre- and post-adjustment tests that were consistent and predictable. It came in very handy at tournaments because my team entered the matches at full strength each time. I had a few three time world champions on the team as a result. The rugby team would start wrist wrestling matches at the post game parties to draw the other teams into a money match when they discovered that talent.

Fast forward to my third year in practice as I was thirsty to learn as much as I could so I could be a better chiropractor. While attending a seminar at Western States Chiropractic College, I answered a few questions during a class I was taking and the staff there asked me to come back in one month and teach these new ideas I had shared about the diagnostics and different treatment approaches I had developed.

That launched my first official postgraduate lecture at an institution that has expanded over the years to thirteen postgraduate faculties I have had the honor to teach for.

This journey has landed me at a whole variety of venues for professional, collegiate and amateur events. What I really enjoy though even more is teaching chiropractors how to fix the seemingly difficult problems that come in their offices due to extremity subluxations. Whether it's the ribs, shoulder girdle or a lower extremity dysfunction affecting the ability of the spine to stabilize and get well, the extremities should have a symbiotic relationship with the spine to find balance and wholeness of the human frame and soft tissues.

This history lesson is just a way for me to share with you how I developed and expanded my

knowledge and understanding of extremity adjusting. In a series of articles to follow we'll go into a more full understanding of how to treat the specific extremities.

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