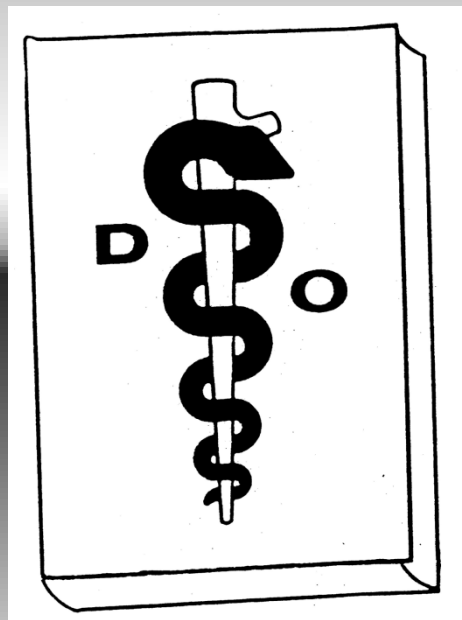


Place for Chiropractic in the era of Modern Medicine



The world of Healing Art

- **Medicine: allopathic**
- **Osteopath: circulatory System**
- **Chiropractic: Innate, subluxation**



Dualism in Healing Art

Drug vs. Subluxation





Germ 이론 (Koch, Pasteur, Fleming)
Pharmaceutical & Medical technology:
miraculous advancement !

Dual Face of Medicine

Good Side



Dark Side:



Disease in the past

Polio

Small Pox

Tetanus

Typhoid fever, 장티푸스

Cholera

Dysentery, 세균성 이질

TB, 결핵

Hepatitis B

Diseases in Today

Cancer

Cardio-vascular disease

Metabolic disease

Autoimmune Disease

Musculoskeletal Disease

Depression

Industrialized Medicine

Polypharmacy!
약물과대복용



In USA:

- US Health in International Perspective: Shorter Lives, Poorer Health, Americans come in dead last in a comparison of 17 affluent nations.
- Nearly 20% of Seniors Are Injured by Medical Care by Being given the wrong medication or too much.
- "average" 65-year-old (or older) adult living in the US, you fill more than 31 prescriptions
- Just over 89% of Medicare patients take prescription medicine daily
- 46 % of patient, 5 or more prescriptions.
- Nearly 54 % take meds prescribed by more than one doctor.
- Antidepressant cause 40.000 death a year – major cause of arteriosclerosis of carotid artery
- 60,000 killed by Vioxx in 1999
- Receiving treatment that led to more complications of an existing medical problem

Study in the current issue of the *Journal of Patient Safety* that says the numbers may be much higher — 매해 210,000 - 440,000 명의 환자가 처방약물로 사망한다.

Medical error is the third-leading cause of death in America, behind heart disease, which is the first, and cancer, which is second.

In a June 2010 report in the **Journal of General Internal Medicine**, study authors said that in looking over records that spanned from 1976 to 2006 (the most recent year available) they found that, of 62 million death certificates, almost a **quarter-million deaths per year** were coded as having occurred in a hospital setting due to medication errors.

Arch Intern Med. 1995 Oct 9;155(18):1949-56.

Drug-related morbidity and mortality. A cost-of-illness model.

Abstract

BACKGROUND:

Preventable drug-related morbidity and mortality represent a serious medical problem that urgently requires expert attention. The costs to society of the misuse of prescription medications, in terms of morbidity, mortality, and treatment, can be immense. To date, research has primarily documented increased rates of hospitalization secondary to medication noncompliance and/or adverse drug effects.

OBJECTIVES:

To develop a conceptual model of drug-related morbidity and mortality, and to estimate the associated costs in the ambulatory setting in the United States.

METHODS:

A probability pathway model was developed to estimate the cost of drug-related morbidity and mortality in the United States. Pharmacist practitioners were surveyed to determine conditional probabilities of therapeutic outcomes owing to drug therapy. Health care utilization and associated costs owing to negative therapeutic outcomes were estimated.

RESULTS:

Drug-related morbidity and mortality was estimated to cost \$76.6 billion in the ambulatory setting in the United States. The largest component of this total cost was associated with drug-related hospitalizations. When assumptions of the model were varied, the estimated cost ranged from a conservative estimate of \$30.1 to \$136.8 billion in a worst-case scenario.

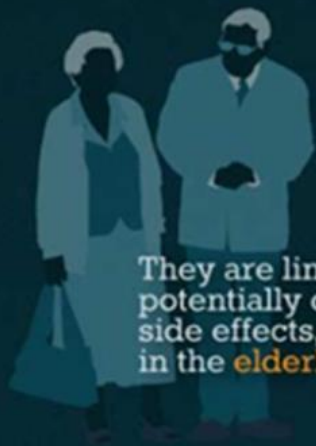
CONCLUSIONS:

The cost of drug-related morbidity and mortality in the ambulatory setting in the United States is considerable and should be considered in health policy decisions with regard to pharmaceutical benefits. Policies and services should be developed to reduce and prevent drug-related morbidity and mortality. 약물로 인한 질환과 사망은 심각한 상황이며 국민건강 법률 제정 과정에서 약물치료 효과에 대해 고려해야 한다. 그리고 약물로 인한 질환과 사망을 예방하고 감소시키기 위해 건강법률이 제정되어야 한다.

NSAIDS:

The **Painful** Truth Behind Painkillers

Non-steroidal anti-inflammatory drugs (NSAIDs) are widely used to treat arthritis, injuries, and other painful conditions. While there are over 70 million prescriptions worldwide, NSAIDs are among the most dangerous medications on the market.



They are linked to potentially devastating side effects, particularly in the **elderly**.

IN THE USA:

100,000 people who take NSAIDs are hospitalized every year.



Approximately

15,000 die

Side Effects of NSAIDs

Cardiovascular Problems

40-60% increased risk
compared to non-users of NSAIDs.

Hearing Loss

25% of 27,000 men
are diagnosed with hearing loss.

Gastrointestinal (GI) Complications

such as GI bleeding, abdominal pain,
heartburn, nausea, and vomiting
over
7,000 people in the US
are hospitalized
due to GI problems. In rare cases, some
patients experience GI bleeding.

Heart Failure

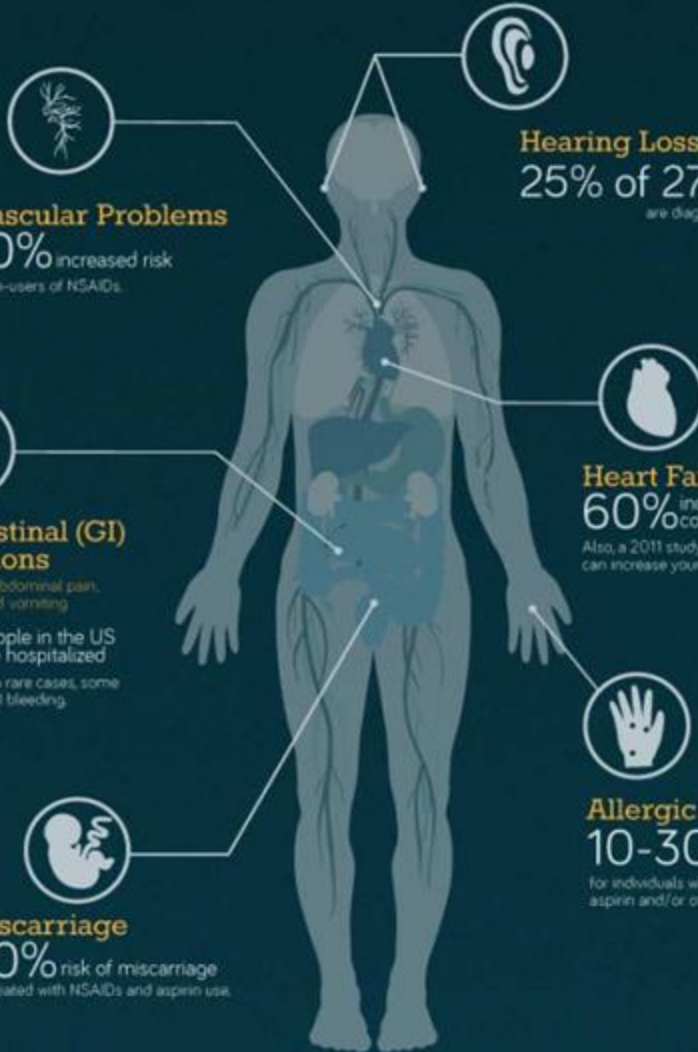
60% increased risk of
congenital heart failure
Also, a 2011 study found that NSAIDs
can increase your risk of heart attacks.

Miscarriage

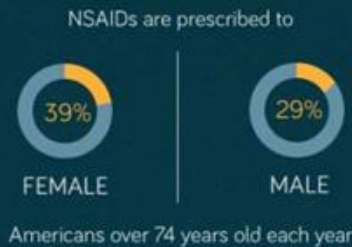
80% risk of miscarriage
associated with NSAIDs and aspirin use.

Allergic Reactions

10-30% increased risk of
allergic reaction
for individuals with ASTHMA, when taking
aspirin and/or other NSAIDs.



NSAIDs are used by
60 Million
Americans



Most Common Types of NSAIDs



Diclofenac (Voltaren)

Released in 1978, diclofenac is the **most widely prescribed NSAID** worldwide. It is the **third most prescribed painkiller** in Canada and in England, **six million** people were prescribed.



This drug increases your risk of cardiovascular conditions by **38 to 63 percent**.



Ibuprofen

First introduced in the United Kingdom in 1969, this over-the-counter NSAID is commonly used by athletes and patients who have osteoarthritis-induced knee pain.

In 2001, there were about **12.7 billion** ibuprofen tablets released into the market. In 2002, **17 percent** of adults were taking the drug.



This drug is linked to miscarriages and problems with pregnancy.



Celecoxib (Celebrex)

This painkiller was created in December 1998 to treat osteoarthritis and rheumatoid arthritis.

In 2011, over **two million** Americans received a prescription for this drug.



This drug is linked to heart problems.



Naprosyn (Naproxen)

Initially released in 1973, Naproxen was used between 2005 and 2006 by **500,000** patients.



This drug is associated with an increased risk of developing blood clots.



Acetylsalicylic Acid (Aspirin)

The **oldest and best known** NSAID.



This drug increases risk of heart attacks in men ages 45 to 79 and can worsen urticaria and angiodema in asthmatics.

Corticosteroid: Anti-Inflammatory

- Increased blood sugar
- Difficulty controlling emotion
- Difficulty in maintaining train of thought
- Weight gain
- Immunosuppression
- Facial swelling. Severe.
- Depression, mania, psychosis, or other psychiatric symptoms
- Unusual fatigue or weakness
- Mental confusion / indecisiveness
- Memory and attention dysfunction (Steroid dementia syndrome)
- Blurred vision
- Abdominal pain
- Peptic ulcer
- Painful hips or shoulders
- Steroid-induced osteoporosis
- Stretch marks
- Osteonecrosis- same as avascular necrosis
- Insomnia
- Severe joint pain
- Cataracts or glaucoma
- Anxiety
- Stomach pain or bloating
- Severe swelling
- Mouth sores or dry mouth
- Avascular necrosis
- Hepatic steatosis, 지방간



Dr. Sanjay Gupta, chief medical correspondent at CNN, who explains the rise in heroin addiction by linking it to dependence on prescription opioids. Indeed, what many fail to realize is that opioid prescription painkillers are very similar to heroin.

Acetaminophen (Tylenol) overdose is the leading cause for calls to Poison Control Centers across the US—more than 100,000 instances per year— and acetaminophen poisoning is responsible for nearly half of all acute liver failure cases in the US.



Philip Seymour Hoffman (1964-2014)

Chiropractic claim:

- Innate (본유의 지혜) which governs our body to function, maintain health and heals.
- Structure dictate the functions of body
- Subluxation interfere healing nerve signals



For Neck Pain

In a study funded by NIH's National Center for Complementary and Alternative Medicine to test the effectiveness of different approaches for treating mechanical neck pain, 272 participants were divided into three groups that received either spinal manipulative therapy (SMT) from a doctor of chiropractic (DC), pain medication (over-the-counter pain relievers, narcotics and muscle relaxants) or exercise recommendations.

After 12 weeks, about 57 percent of those who met with DCs and 48 percent who exercised reported at least a 75 percent reduction in pain, compared to 33 percent of the people in the medication group. After one year, approximately 53 percent of the drug-free groups continued to report at least a 75 percent reduction in pain; compared to just 38 percent pain reduction among those who took medication.

-- Bronfort et al. (2012), *Annals of Internal Medicine*

For Headaches

“Cervical spine manipulation was associated with significant improvement in headache outcomes in trials involving patients with neck pain and/or neck dysfunction and headache.” 경추 어저스트먼트는 경부통/경추장애 환자와 관련된 두통치료에서 매우 뚜렷한 치료효과를 보여주었다.

-- McCrory, Penzlen, Hasselblad, Gray (2001), Duke Evidence Report

“The results of this study show that spinal manipulative therapy is an effective treatment for tension headaches. . . Four weeks after cessation of treatment . . . the patients who received spinal manipulative therapy experienced a sustained therapeutic benefit in all major outcomes in contrast to the patients that received medications.” 척추 어저스트먼트는 긴장성 두통에 약물 치료에 비해 매우 효과적이며 지속적이다.

-- Boline et al. (1995), Journal of Manipulative and Physiological Therapeutics

For Acute and Chronic Pain

"Many treatments are available for low back pain. Often exercises and physical therapy can help. Some people benefit from chiropractic therapy."

--Goodman et al. (2013), *Journal of the American Medical Association*

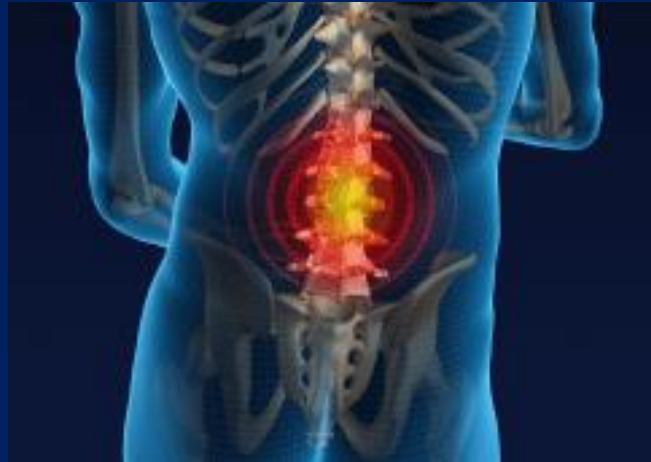
"[Chiropractic Manipulative Therapy] in conjunction with [standard medical care] offers a significant advantage for decreasing pain and improving physical functioning when compared with only standard care, for men and women between 18 and 35 years of age with acute low back pain."

--Goertz et al. (2013), *Spine*

환자 만족도, Patient Satisfaction

"Chiropractic patients were found to be more satisfied with their back care providers after four weeks of treatment than were medical patients. Results from observational studies suggested that back pain patients are more satisfied with chiropractic care than with medical care. 4주 동안의 치료 후, 요통관리에서 카이로프랙틱 환자들은 의학적 치료 보다 더 만족스럽게 생각한다 고 보고한다.

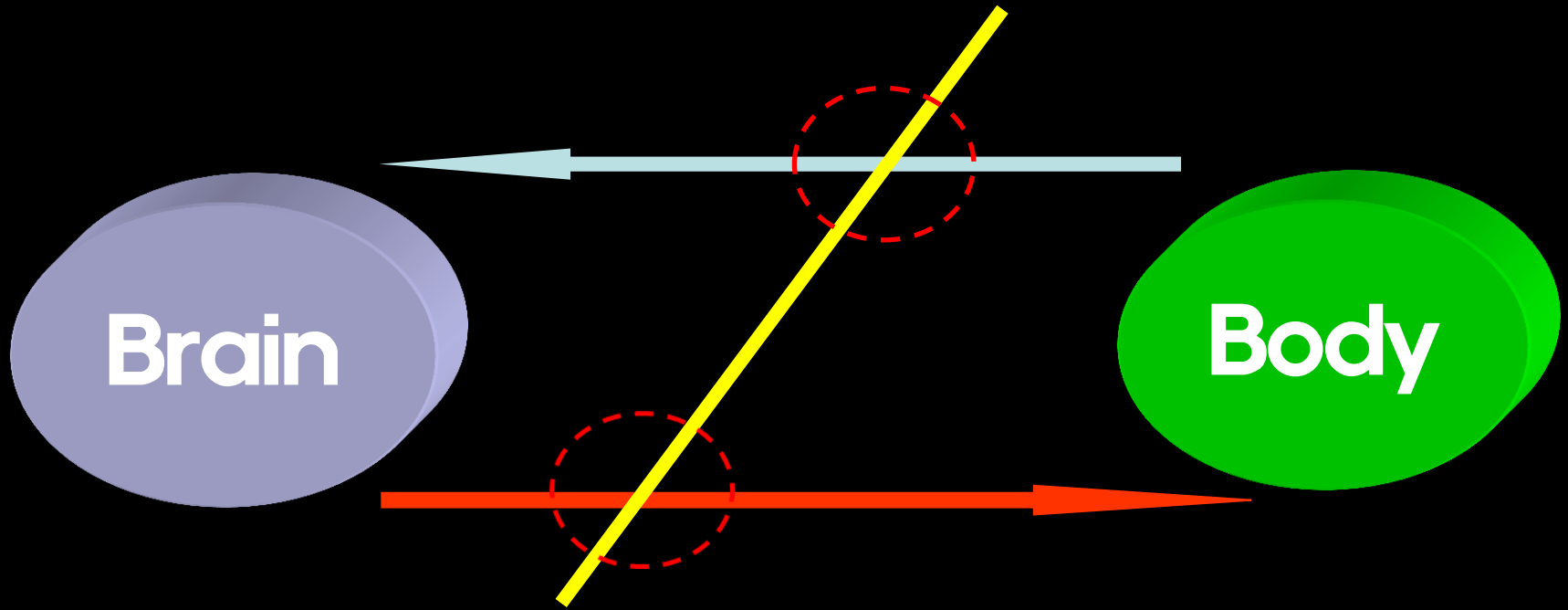
Hertzman-Miller et al (2002), *American Journal of Public Health*



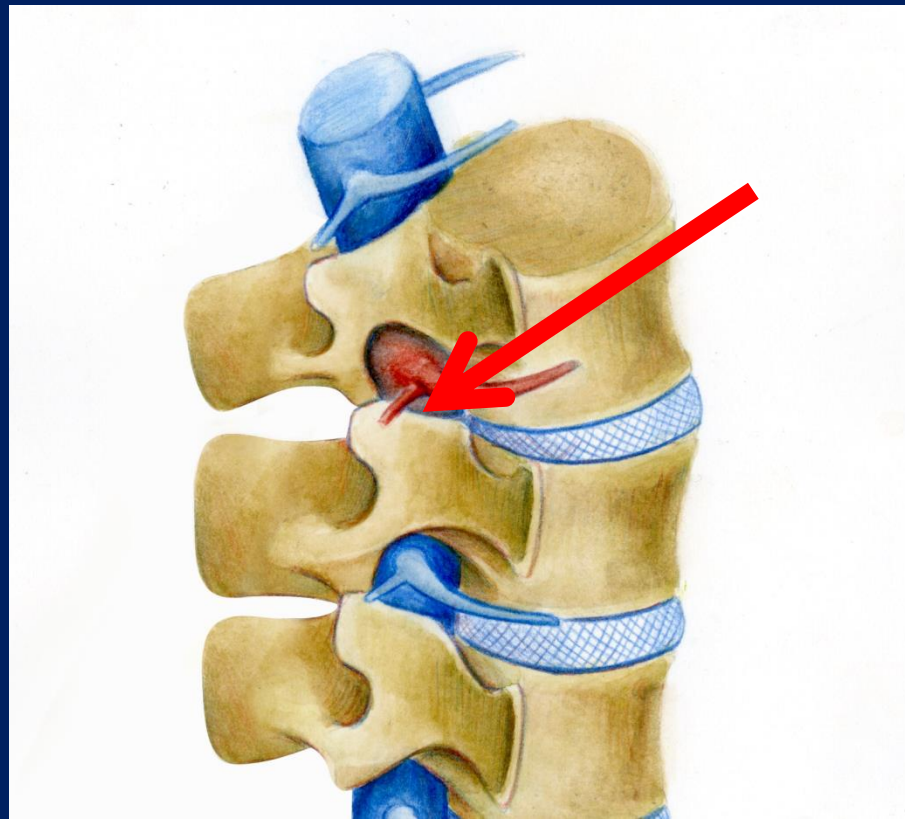
경제적 효과, Cost Effectiveness

Low back pain initiated with a doctor of chiropractic (DC) saves 40 percent on health care costs when compared with care initiated through a medical doctor (MD), according to a study that analyzed data from 85,000 Blue Cross Blue Shield (BCBS) beneficiaries in Tennessee over a two-year span. The study population had open access to MDs and DCs through self-referral, and there were no limits applied to the number of MD/DC visits allowed and no differences in co-pays. Researchers estimated that allowing DC-initiated episodes of care would have led to an annual cost savings of \$2.3 million for BCBS of Tennessee. They also concluded that insurance companies that restrict access to chiropractic care for low back pain treatment may inadvertently pay more for care than they would if they removed such restrictions.

– Liliedahl et al (2010), *Journal of Manipulative and Physiological Therapeutics*



Chiropractic Paradigm:
Subluxation



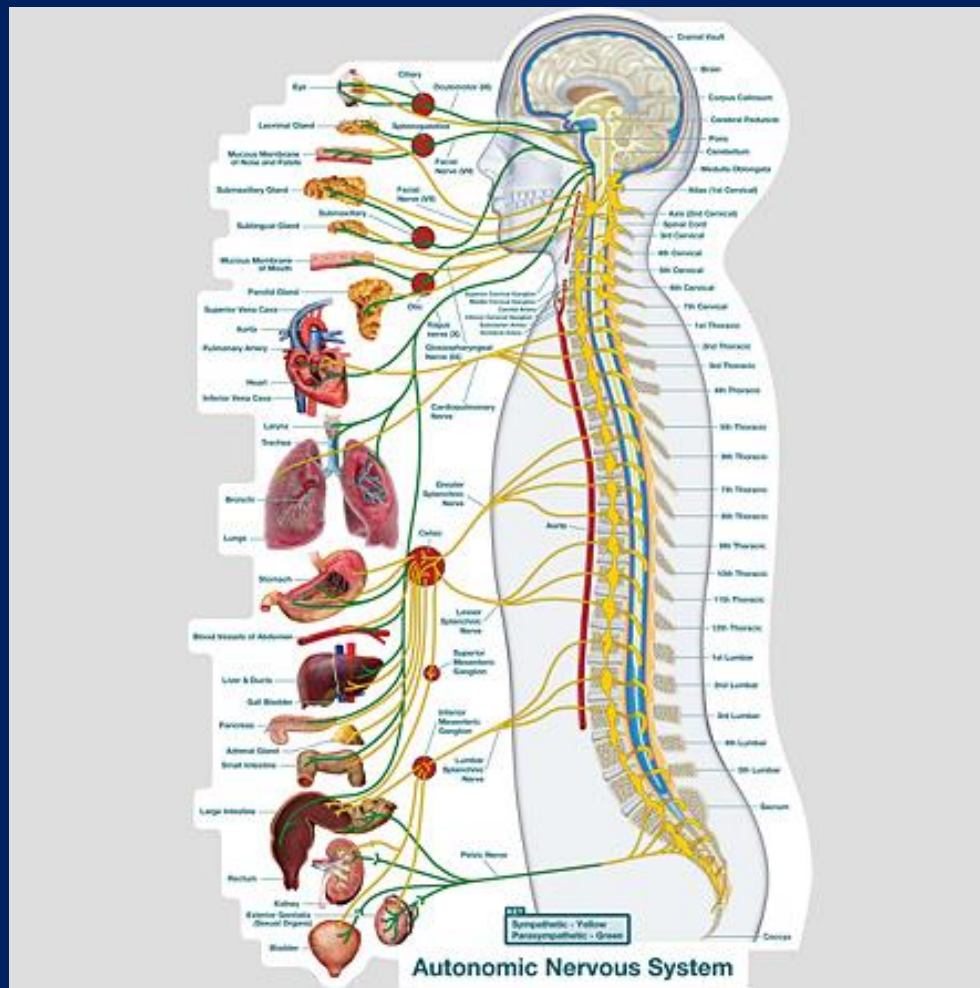
Subluxation cause:

muscle spasm

inflammation

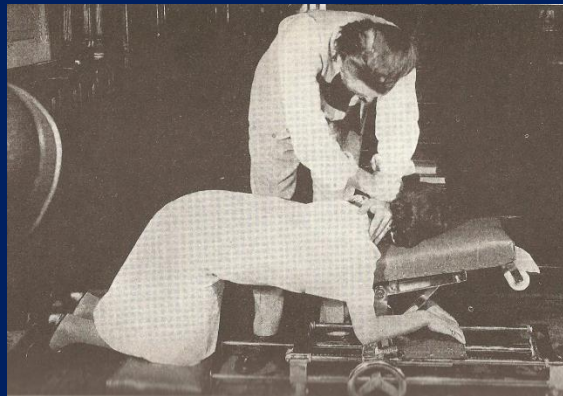
Pain

Decrease nerve signals



인체의 **모든 장기**는 척추신경으로부터 신경신호를 받아 각 장기의 고유 기능 (항상성)을 유지한다 !!!!

What Chiropractic Do? Correct Subluxation !



Do you know anyone who would like:

- 60% less hospital admissions
- 59% less days in the hospital
- 62% less outpatient surgeries
- 85% less in pharmaceutical costs

A 7-year study showed that patients whose primary physician was a chiropractor, experienced the above results.

For the health of your loved ones...

CHOOSE CHIROPRACTIC

Patients using chiropractors in North America: who are they, and why are they in chiropractic care?
Coulter ID1, Hurwitz EL, Adams AH, Genovese BJ, Hays R, Shekelle PG.

SUMMARY OF BACKGROUND DATA AND OBJECTIVES:

Alternative health care was used by an estimated 42% of the U.S. population in 1997, and chiropractors accounted for 31% of the total estimated number of visits. Despite this high level of use, there is little empirical information about who uses chiropractic care or why.

METHODS:

The authors surveyed randomly sampled chiropractors (n = 131) at six study sites and systematically sampled chiropractic patients seeking care from participating chiropractors on 1 day (n = 1275). Surveys collected data about the patient's reason for seeking chiropractic care, health status, health attitude and beliefs, and satisfaction. In addition to descriptive statistics, the authors compared data between patients and chiropractors, and between patients and previously published data on health status from other populations, corrected for the clustering of patients within chiropractors.

RESULTS:

More than 70% of patients specified back and neck problems as their health problem for which they sought chiropractic care. Chiropractic patients had significantly worse health status on all SF-36 scales than an age- and gender-matched general population sample. Compared with medical back pain patients, chiropractic back pain patients had significantly worse mental health (6-8 point decrement). Roland-Morris scores for chiropractic back pain patients were similar to values reported for medical back pain patients. The health attitudes and beliefs of chiropractors and their patients were similar. Patients were very satisfied with their care.

CONCLUSION:

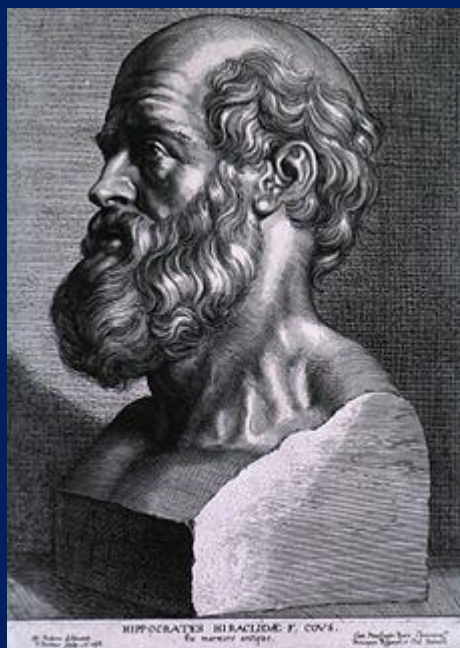
These data support the theory that patients seek chiropractic care almost exclusively for musculoskeletal symptoms and that chiropractors and their patients share a similar belief system.

Spine (Phila Pa 1976). 2002 Feb 1;27(3):291-6; discussion 297-8.

Place for Chiropractic ?



is in your , and for one suffering from subluxation.....



Do no harm !

' Doctor in future will seek the
cause of disease from spine'
..... from

히포크라테스의 저서, Spine



I  **My**
Chiropractor