

How to Use Spinal Nerves to Turn Off Pain Instantly!

by Stephen Kaufman, D.C.

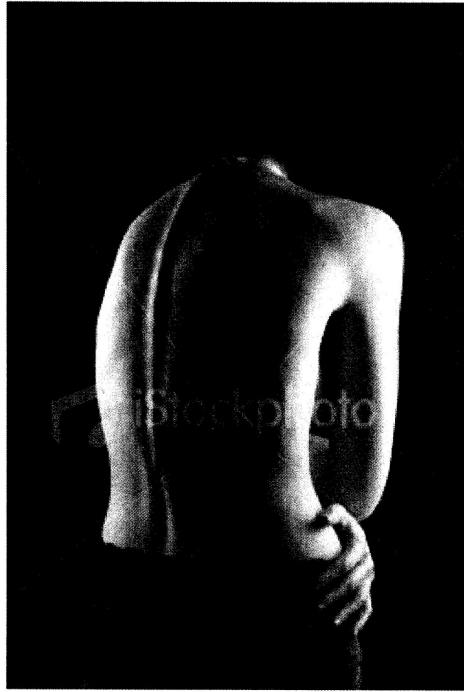
BEFORE I BECAME A CHIROPRACTOR, I read many books about chiropractic. My limited understanding (a fantasy, really) was that chiropractors put some kind of secret pressure on spinal nerves that turned off pain instantly. After going to dozens of chiropractors and practicing for many years, I realized that this was, indeed, a hopeless fantasy. I never saw anything that consistently turned off pain by utilizing spinal nerves.

The Manual Spinal Nerve Block

One day, as I was doing research on the Internet, I came across an old Japanese chart demonstrating various neurological pathways. For some reason, the style and content of the chart triggered that ancient fantasy in my brain and an idea popped into my head. Suppose I applied a very specific form of pressure to spinal nerve roots *utilizing known neurological pathways* to try block pain with just manual pressure. The beauty of this theory was that it required no drugs or instruments—I could experiment using just my hands and a patient's pain. Since the only thing involved was a type of light pressure on various nerves, it would be completely safe and pain free. (The specific pathways I was interested in were the spinothalamic tract and the tract of Lissauer.)

It's important to note that the manual spinal nerve block procedure does *not* involve any type of thrusting or manipulation. Although various schools of chiropractic discuss the relationship between spinal nerves and various organs, to my knowledge, no other technique has demonstrated instant elimination of pain by stimulation of spinal nerves.

Working with this hypothesis, I eventually found that I could instantly turn off much muscular tenderness in areas that were sore to touch. These are often called "trigger points," but our definition of trigger points is very broad—it's any area that's more tender to pressure than the surrounding tissues or the same area on the opposite side of the body. Often, the exqui-



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Numbness and Radicular Syndromes Often Respond as Well as Pain

Many doctors are afraid that numbness may be a more serious sign than pain. I have gotten many calls about patients with paraesthesias. In my experience, numbness often is due to altered circulation in muscles secondary to areas of constriction. Carefully examining the muscle that the related nerve travels through almost always reveals very painful areas (trigger points). Relieving these trigger points with manual spinal nerve blocks very often normalizes circulation rapidly. I used to tell my patients that numbness might take longer to respond than pain, but I've now seen many instances of it disappearing in seconds after the proper manual spinal nerve block has been performed.

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sitely tender area would become normal (not tender to pressure) instantly with the application of the correct type of pressure to a spinal nerve root, even if that spinal nerve were a foot or more away from the sore spot. This worked consistently, even if the trigger point had been sore for many years, or there was acute pathology including fractures.

In many cases, chronic pain syndromes, such as cervical and lumbar disc pain, shoulder pain, TMJ pain, sciatica, and severe low back pain, responded rapidly to this procedure. Trigger points or areas of tenderness are well known to every chiropractor. Palpating the paraspinal area from the atlas down to L5 usually reveals multiple areas of extreme tenderness; even after adjustment, these areas often remain tender. Applying one of the manual spinal nerve blocks, in most cases, will cause an immediate reduction in tenderness of these points. In chronic cases, several treatments using this procedure will usually eliminate the trigger point on a long term basis.

Other contributors may originate in the SCM, neck extensor or scalene muscles. Numbness in the lower extremity is often caused by areas of constriction in the piriformis, gluteal, or quadratus muscles.

Utilizing different nerve pathways, there are actually ten manual spinal nerve blocks discovered so far. One near the atlas often has a wide ranging effect throughout the body. The stellate ganglion block seems to down regulate excessive sympathetic nervous activity and may profoundly reduce stress and the physical symptoms associated with it. One M.D. who specializes in Lyme's disease has been using one of the parasympathetic techniques with dramatic effect on her patients with Lyme-related arthropathies (joint pains.)

Difficult Extremity Cases, Abdominal Pain and Even the Pain from Kidney Stones Respond.

Extremities respond well, too. I saw two cases of Osgood Schlatter's disease with severe knee pain that both cleared rapidly when the appropriate manual spinal nerve blocks were applied. A two-year follow up showed no recurrence.

The manual spinal nerve blocks are the treatment of choice in chronic abdominal pain of many kinds. I've seen instant results in turning off pain in Crohn's disease and ulcerative colitis. Post surgical pain following hernia surgery, hysterectomies, bowel surgery, etc., even if it's been there for years, has disappeared in one or two treatments. One physician said, "This would revolutionize the way we do hernia surgery."

Even two patients with kidney stones got immediate relief; the stones passed quickly without further problem. By stimulating the related nerve roots and eliminating the palpatory pain over the kidney area, the patients' pain disappeared. Relaxation of the musculature of the back then allowed the stones to pass through quickly.

Stephen Kaufman, D.C., graduated from Los Angeles Chiropractic College in 1978, and practices in Denver, CO. His techniques, Pain Neutralization Technique and Manual Spinal Nerve Blocks, represent a rapid new, lasting approach to pain. For further information, visit www.painneutralization.com or www.manualspinal.com, or call Dr. Kaufman at 1-800-774-5078 or 1-303-756-9567.



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