

“Aw, My Aching ...”

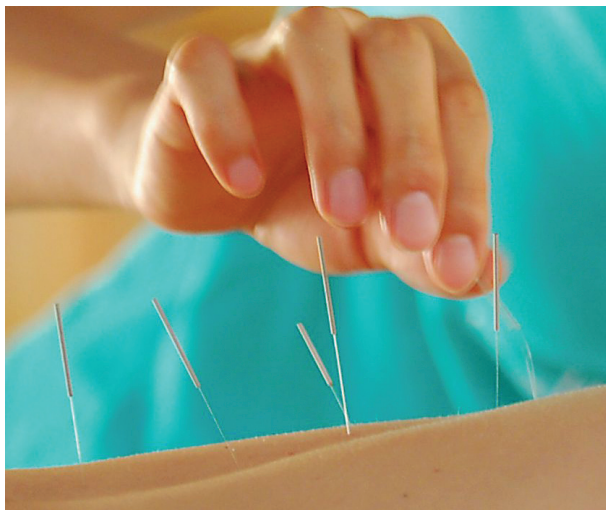
All of us will experience pain. Learn more about some new and old treatments available to relieve acute and chronic pain.

EVERYONE EXPERIENCES PAIN - A skinned knee, a toothache, or more debilitating pain as with cancer or chronic disease. Pain is the body's natural messenger, telling us that there is something wrong and needs attention. But blinding pain is just - *a pain!* If you are at the end of your rope, tie a knot at that end and hold on tight. There is relief.

On Nov. 10, 2005, Marilyn Johnson had back surgery. Surgeons repaired a herniated disc between the fourth and fifth lumbar vertebrae, enlarged the space around her spinal cord that had narrowed and was causing leg numbness, straightened the curvature in her spine, stabilized her spine with rods and pins and fused her fourth and fifth lumbar vertebrae with her first sacral vertebra. The surgery went well and Johnson healed quickly. Unfortunately, one month later, »

Story by Darline Turner-Lee
Photos Courtesy of AOMA, Dr. Bradley Fullerton
+ Darline Turner-Lee





The ancient art of acupuncture combines knowledge of energy flow (chi) with precision needle placement for pain relief.
Photos Courtesy of the Academy of Oriental Medicine.

Resources

Amy Iseminger, PA-C
Austin Pain Associates
www.austinpainassociates.com

Mark Malone, MD
Advanced Pain Care
www.austinpaindoctor.com
www.prolotherapy.com

Bradley Fullerton, MD
(Prolotherapist)
The Patient Physician
Partnership
www.drfullerton.yourmd.com

Academy of Oriental Medicine
of Austin
www.aoma.edu

www.rolf.org

Sandy Collins, Advanced Rolf
and Certified Movement
Therapist
www.sandycollinsrolfing.com

Johnson began to have excruciating pain in her lower back. She called the orthopedic surgeon and went in for an evaluation. The surgical sites were healing well but her sacrum had fractured. Johnson was confused because she had been resting and not doing anything. Her orthopedic surgeon was also surprised. In the final analysis, her surgeon concluded that Johnson's sacrum had fractured due to new stress placed on it from her straightened spinal column. The new configuration of her spine had caused a new stress on her skeleton and the sacrum fractured as a result.

"It was really disheartening to learn about this. I had been doing so well," says Johnson. "At times the pain was so bad I couldn't move. I would take a pain pill and that would knock me out. I couldn't get a thing done." Johnson was referred to Austin Pain Associates for ongoing management of her sacral pain.

Austin Pain Associates

"Our approach to pain management has four main components, which are physical therapy (including on-site functional therapy and occupational therapy); behavioral therapy (onsite group and individual therapy works to modify and incorporate various lifestyle habits); injection therapies and oral pain medication," says Amy Iseminger, PA-C, who is a physician assistant on staff at Austin Pain Associates. "We tell our patients from the beginning that we want them to be independent. They have a responsibility to actively manage their pain and to help find effective treatments."

Johnson manages her pain with epidural injections, oral pain medication, and stress reduction in the form of rest and heat.

"It's very important that I get my mind off of my pain," says Johnson. "I find that reading while I am resting really takes my mind somewhere else, allowing the medications to take effect and the pain to subside." Johnson adds that visualization and hypnosis may also be helpful.

Advanced Pain Care + TENS

Mark Malone, MD, of Advanced Pain Care notes that the perception of pain has to be managed for pain relief.

"Chronic pain patients often become hypersensitive to any stimuli and perceive all stimuli as pain. We use many different pain therapies including Transcutaneous Electrical Nerve Stimulation (TENS) units to change the signals the brain receives altering a person's pain perception. The body has an incredible ability to heal itself. When inflammation is reduced and pain is alleviated, the body can do its thing. Even when the initial insult isn't completely healed, we can reduce the pain enough so that the patient is asymptomatic and can carry on with their life while healing takes place."

Prolotherapy

Prolotherapy is a musculoskeletal therapy that involves injecting a concentrated sugar solution mixed with an anesthetic into an injured area to cause mild inflammation. The body responds by sending healing and growth factors to the area, thus enhancing the healing process. The process is very effective on injuries to the ligaments, tendons and cartilage-fibrous tissues, which tend to heal poorly due to poor blood supplies.

Bradley Fullerton, MD, first found out about prolotherapy in 1992 while he was a resident. He >>

Bradley Fullerton, MD, combines extensive knowledge of anatomy with precision skill when applying prolotherapy. Photo Courtesy of Bradley Fullerton, MD.



initially disregarded the procedure as anecdotal. Later, in private practice, he had a patient with intractable knee pain who was unable to work. As a last resort, he tried a series of three prolotherapy injections. The patient had such marked relief in her pain that she begged and badgered him for more injections. After a total of six injections, the patient had no further pain and was able to resume her job as a hotel housekeeper. Fullerton was convinced.

"Prolotherapy involves looking at the biomechanics of an injury, how it occurred and why it persists," he says. "It requires a keen knowledge of anatomy to determine exactly what is injured and where to inject."

Ian Dille is an elite cyclist who had prolotherapy following knee surgery in 2005.

"I just never returned to my baseline," says Dille. "I could ride recreationally, but not competitively." Post-operatively he had persistent knee irritation as the knee tendon was rubbing over the shin bone. He tried conventional and alternative treatments and nothing helped. Dille consulted with Fullerton in 2006 and had three injections over three months. One month after his last injection he was able to ride competitively.

Rolfing®

Rolfing® Structural Integration is named after its founder Dr. Ida P. Rolf who set out some 50 years ago "to develop a holistic system of soft tissue manipulation and movement education that organized the whole body in gravity."

"Rolfing is a series of 10 sessions in which the practitioner works on a person's body to organize the musculoskeletal system," says Sandy Collins, advanced Rolfer and certified movement teacher. "It was originally designed for healthy people to improve their strength and flexibility enhancing movement as well as anti-aging."

Similar, yet distinct from deep tissue massage, myofascial release and chiropractic, Rolfing is very effective for structural abnormalities by getting the basic structure aligned. According to Collins, Rolfing can be used for acute injuries and ailments of the knees, back, neck, hips and shoulders. However, it is best used as a preventive measure, to promote proper alignment and function.

"When a person comes in with pain, I can just go to work on that pain," says Collins. "But true Rolfing involves looking at the whole structure and organizing the whole structure so that the pain is completely removed and the original insult is not repeated. For example, if someone comes in with neck pain, the pain may actually originate from their feet in the

form of poor stance. So I begin working to organize and align their feet. I then move up, organizing their hips, back and finally their neck resolving the pain."

Collins also utilizes her movement expertise to change people's movement patterns and habits, further reducing the recurrence of pain.

"If a person sits with their head to one side and is complaining of neck pain, I help them change how they hold their head to help alleviate the pain for good."

Acupuncture

Acupuncture is an ancient healing art used in China for thousands of years. "Acupuncture makes injuries heal faster and better," says Jaime Wu, MD, of the Academy of Oriental Medicine (AOMA). Wu has been in practice at AOMA for 13 years and is one of its founding physicians. "Acupuncture can treat physical injuries such as whiplash or back pain but also illnesses such as migraine headaches or irritable bowel syndrome."

In oriental medicine, injury or illness is believed to be the result of stagnation or a blockage of chi (the life force). Acupuncture stimulates chi, removing blockages and relieving stagnation. In western medical terms, acupuncture increases circulation so that nutrients are brought in while damaged tissue is removed from the injured area.

Yong-Xin Fan, MD, an associate of Wu's at AOMA, advocates a combined approach to pain management. "Acupuncture can't fix a fracture, but it stimulates blood flow bringing much needed nutrients to the area, enhancing healing."

Zheng Zeng, MD, frequently combines oriental medicine techniques. "Herbs with acupuncture are very effective for pain management. If the injured area is not too sensitive, I may apply needles directly to that area, but if the area is too sensitive, I can place needles on corresponding body parts to stimulate healing." Zeng also employs the ancient treatment of cupping. "The warm air contained within the cup on the skin relaxes muscles while the suction that is created increases circulation."

The specialty of pain management has grown tremendously from oral opiate medications and there is much that pain sufferers can do alone and in collaboration with their chosen practitioners. What is clear is that there is no need to live with pain. As Dr. Malone tells his patients, "Pain is inevitable. Suffering is optional."

The choice is yours. ★