



CHIROPRACTIC NEWS & VIEWS

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Hawaii State Chiropractic Association, Inc.

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**REESE'S PEANUT BUTTER EASTER EGG
TV COMMERCIAL "HIDDEN IN PLAIN SIGHT"
IN CHIROPRACT OFFICES ALL OVER THE COUNTRY, PATIENTS ARE
ASKING "WHERE ARE THE REESE'S EGGS?"**

PRESIDENT'S MESSAGE

Joseph G Morelli Jr D.C., F.I.C.C., HSCA President & ACA Hawaii Delegate

Aloha All:

This time of year, is the time all over the northern hemisphere when there is blooming and rebirth after the long winter months.

Here in Hawaii, our seasons are not so distinct vs. the Mainland US, etc., but as you know, Spring/Easter is the celebrated time of year in many religious and cultural traditions dating back eons.

The general the idea is to clear away the old, stale, dead, and replace with the new, clean, fresh and improved.

I like to think of Chiropractic as in the Spring of our professional offerings. We should be the "new bloom" in healthcare.

Following this line of thinking, I am still somewhat stumped why the medical/healthcare community continues to ignore the largest non-drug, non-surgical, hands-on healthcare practitionersCHIROPRACTIC..... when they are looking for a way around the "opioid crisis".

Although we are not going to magically make this scourge go away; by putting Chiropractic in the first order of treatment algorithms for the most common reported pain complaints can significantly reduce the need to dispense these addictive meds.

As you know, musculoskeletal conditions (back pain, neck pain, joint pain, headaches, etc.) are most common reasons the average person visits their doctor other than routine annual checkups.

So, let's continue to with the theme of Springtime renewal and continue to put effort in our everyday professional lives to make Chiropractic, not an alternative, but a primary choice in healthcare for these most common conditions.

You might be wondering why there is the Reese's Peanut Butter Egg on the front page of this newsletter? This is a crazy thing related to a current TV commercial campaign for "Reese's Eggs" that is related to the Easter candy craze. It's a play on finding the hidden eggs.

I saw the TV commercial myself one night, and I had to laugh! The announcer starts by saying that the Reese's Eggs are hidden in places **you'll never find them!**....then he says **SIKE!**....then says that the eggs are now found in supermarkets, grocery stores, bowling alleys, **CHIROPRACTOR'S OFFICES**, gas stations etc.!

I don't know about you, but several of my patient's must be avid TV watchers. So far this week, I've had multiple patients and/or their families ask: "where are the Reese's Eggs hidden?"

This is crazy! So much so, that I went to COSTCO and bought a big box of the Reese's Eggs and have been giving them out when asked!

I am thinking of putting up a notice in my reception room asking if they can guess where I have hidden the eggs.

I don't know if this ad campaign was supposed to be a backhanded slur on Chiropractic, or possibly we've gone more mainstream that I have thought!

Anyway, some advertising *genius* (not) in some left-handed sort of way is putting us in front of the public whether he knows it or not. I guess now a days, we take whatever we get!

ALOHA...Happy Easter...eggs!

SOMETHING NEW, REALLY NEW

There's a new initiative coming to the HSCA. We're looking for doctors who have not been active in the organization to help design the HSCA they want to see in the future. Starting right now. The planning is about to begin.

You could be part of the inaugural group whose voices will shape the profession so that it represents you and supports your needs as you build your practice for the next 5-10 years. We all want to be successful and sometimes that takes an organizational push to get the profession moving forward.

Contact Dr. Dean Shivvers (517-4826) or Dr. Cara Poppas (261-4040) to let them know that you want in. You can be one of the new voices they're looking for. What else are they looking for? New ideas. New projects. New methods. New outlook.

We're all busy. But not too busy to care about our profession and our private practices. We all want thriving practices. We want to support ourselves and our families. We want the community to look at our profession as an important part of their health plan for their families. We want them to see Chiropractors as providing critical and needed services in that health plan.

The future will happen anyway. Good planning usually results in a brighter and more secure future. A better future depends on who is doing the planning. It could be you. You're invited.

HSCA ON FACEBOOK

By Dean Shivvers D.C., HSCA Oahu Island Director

Aloha:

The HSCA has recently started a Facebook page. It can be found easily by searching Hawaii State Chiropractic Association in the Facebook search bar. In the news feed, we are sharing important information about upcoming HSCA meetings, links to this newsletter, and interesting facts about the benefits of Chiropractic you can share with your patients. Please follow the page and share with your friends. Mahalo, Dr. Dean Shivvers

PALMER COLLEGE OF CHIROPRACTIC ADDS NEW AFFILIATIONS WITH FOUR VETERANS AFFAIRS HOSPITALS

Palmer College of Chiropractic has formed new academic affiliations with four Veterans Affairs hospitals: Mann Grandstaff Veterans Affairs Hospital in Spokane, Wash.; Tuscaloosa, Alabama Veteran's Affairs hospital in Tuscaloosa, Ala.; Chillicothe, Ohio Veteran's Affairs Hospital in Chillicothe, Ohio and Veteran's Affairs Pittsburgh Healthcare System in Pittsburgh, Pa. Palmer College now holds academic affiliations with 30 institutions across the country. Academic affiliations with VA hospitals provide our students with the honor of offering chiropractic care to U.S. veterans, while also gaining experience and additional training from staff chiropractors.

"Acceptance to rotations is very competitive and allows students to see and participate in patient care in an integrated, multidisciplinary setting." Student trainees are not only exposed to chiropractic care but are able to observe procedures

in numerous other medical disciplines such as nutrition, occupational therapy, physical therapy and even observe surgeries and other health-care procedures.

Palmer College has increased its number of academic affiliations with VA hospitals by 20 percent in the last year and the number continues to grow. Palmer has held academic affiliations with VA hospitals and Department of Defense sites since 2007, and in that time approximately 160 students from its three campuses have participated in rotations.

Only highly-qualified student applicants are accepted to participate drawn from the Palmer College of Chiropractic campuses in Davenport, Iowa., San Jose, Calif., and Port Orange, Fla. Palmer is the first and largest chiropractic college, delivering more than 170,000 patient visits annually.

CBD OIL: THE BASICS *By Nicole Spear, MS, CNS*

Information, claims, and debates about CBD oil have infiltrated the internet over the past decade and the tide continues to rise. Consumers are confused, and practitioners are pressured to take a position on the claims and concerns surrounding this compound. Is it safe? How is it different from marijuana? Is it psychoactive? Will it fuel drug addictions? Are there ethical concerns? Is it a medical breakthrough? Is it legal? Before making a logical decision regarding which side of the fence to land on, a basic understanding of CBD oil, its claims and its concerns, are in line. “Just the facts, ma’am” is what we will explore here.

What is CBD Oil?

CBD is cannabidiol – a cannabinoid compound extracted from the cannabis plant. Various *Cannabis* species supply over 100 cannabinoids, but medicine has focused primarily on either tetrahydrocannabinol (THC) or cannabidiol (CBD).

Cannabis Sativa L. is a taller and more narrow species, relatively low in THC (approximately 0.3%) but rich in CBD, which is harvested from the seeds and stalk fibers. This species is traditionally known as hemp.

Cannabis Indica is short and densely populated with broad leaves. This species is often referred to as marijuana since it contains up to 30% of the psychoactive cannabinoid, THC, which can be harvested from its flowering tops. *Cannabis Indica* contains very little CBD, which is considered to be an antagonist to the psychotropic effects of THC.

What are the Claims?

Interest in cannabinoids has surged in the last 20 years for their pharmacological effects on the neurological system and especially, as possible modulators of pain, inflammation, addiction, mood and psychosis, mental health disorders, and most recently, cancer.

Both CBD and THC act upon the endocannabinoid system of the human body, which is a signaling system laced throughout the central and peripheral nervous system. As a fairly new discovery, the complex nature of this system is still being researched; however, we know there are two primary receptor types, CB1 (located in the brain and peripheral tissue) and CB2 (located in the immune and hematopoietic systems), and two primary endogenous ligands, *N*-arachidonylethanolamine (anandamide) and 2-arachidonoylglycerol (2-AG). Phytocannabinoids such as THC and CBD exert their effects when they bind to the

endocannabinoid receptors. Activated CB1 receptors are responsible for the psychotropic effects of THC, while activated CB2 receptors are linked to the health-promoting benefits of CBD, including pain management.

One of the larger areas of focus in cannabinoid research is as an analgesic, especially for chronic, neuropathic pain. In fact, “several CB2 agonists reached clinical Phase II for pain management and inflammation.” A systematic review of 13 randomized placebo-controlled trials involving cannabinoids for the treatment of chronic nonmalignant pain found cannabis-based medicinal extracts provide effective analgesia in various conditions. The mechanism behind the analgesic effect is not yet confirmed but, proposed hypotheses include: “effect on inflammatory cells, reduction of basal NGF tone, induction of beta-endorphin release from keratinocytes, direct action on nociceptors. Evidence in support of this last hypothesis comes from down regulation of capsaicin-induced CGRP release in spinal cord slices and Dorsal Root Ganglia (DRG) neurons in culture after treatment with CB2 selective agonists.”

CBD has also been studied as an antagonist for the psychotic effects of THC. This research has laid a foundation for studying the effectiveness of CBD in other psychotic and mental health conditions including schizophrenia. A systematic review of the antipsychotic effects of CBD in human subjects showed “the ability of CBD to counteract psychotic symptoms and cognitive impairment associated with cannabis use as well as with acute THC administration.” Further, it confirmed “the potential of CBD as an effective, safe and well-tolerated antipsychotic compound.” Another study “evaluated if repeated treatment with CBD (30 and 60 mg/kg) would attenuate the behavioral and glial changes observed in an animal model of schizophrenia based on the NMDA receptor hypofunction” and found “both the behavioral disruptions and the changes in expression of glial markers induced by treatment were attenuated by repeated treatment with CBD.”

CBD has been cited as an effective therapy in the management of various inflammatory conditions. In a review of various rat models, it has been found that CBD “reduces joint inflammation in collagen-induced arthritis (CIA) in mice and carrageenan paw edema in rats. CBD treatment also suppressed release of tumor necrosis factor (TNF) α from synovial cells isolated from the mice.” Furthermore, CBD inhibits iNOS in a beta-amyloid-induced murine model of neuroinflammation, reduces intestinal inflammation, and attenuates inflammation induced by high glucose in diabetic mice. More recently, transdermal application of CBD has been shown to be effective for inflammatory conditions since CBD is hydrophobic and has poor oral bioavailability.

CBD seems to offer hope for managing pain and inflammation that is resistant to other therapies. From neuropathic pain associated with multiple sclerosis, cancer, and diabetes, to chronic pain associated with inflammatory conditions, CBD offers a solution. However, it is important to also be informed about the controversies that swirl around the use of CBD because of its close relative, THC (widely known as “medical marijuana”), which also seems to offer some clinical benefits and especially when combined with its antagonist, CBD.

**NEW STUDY DEMONSTRATES CURCUMIN IMPROVES
DYSLIPIDEMIA AND INFLAMMATORY MARKERS IN PATIENTS
WITH DIABETES**

By Michael Jurgelewicz, DC, DACBN, DCBCN, CNS

Curcumin is a natural compound known for its wide range of protective properties. It is derived from turmeric root, the bright yellow-orange spice popular as the main ingredient in Indian curry powders. Turmeric’s high concentration of curcumin underlies the centuries-old use of this root in Ayurveda, traditional Indian medicine.

According to a new study published last Tuesday, researchers demonstrated the effect of curcumin supplementation on inflammatory markers and lipid profiles of patients with diabetes.

This double-blind randomized clinical trial included forty-four patients with type 2 diabetes. Each patient was randomly assigned to take 1500 mg of curcumin or a placebo per day for a ten week period. Laboratory assessments, including a lipid panel, high-sensitivity C-reactive protein (hs-crp), and adiponectin, as well as anthropometric measurements were taken at baseline and at the study’s completion.

Results showed a significant reduction in serum triglycerides in the patients who consumed the curcumin for the ten week period. In addition, hs-crp levels decreased and there was an increase in adiponectin, a fat burning hormone, compared to the placebo. These results indicate the benefits of curcumin supplementation in patients with diabetes.

Earlier studies have shown that curcumin promotes changes in the expression of genes involved in cholesterol synthesis, such as the LDL receptor mRNA, HMG CoA reductase, SREBP, cholesterol 7 alpha hydrolyze, PPAR, and LXR1.^{1,2} One human study demonstrated that 500 mg of curcumin per day increased HDL cholesterol by 29% and reduced total cholesterol by 12%.²



>>>>WEBINAR<<<<<

**INTRO TO RADIAL PRESSURE WAVE AND FOCUSED
SHOCKWAVE THERAPY**

SPONSOR: Chattanooga University
COURSE: OVERVIEW OF ACOUSTIC WAVE THERAPY
SPEAKER: Dr. Christopher M. Proulx, D.C.
DATE: April 2, 2019 (Tuesday)
TIME: 12:30 pm to 1:30 pm HST (no HI CE’s)
CONTACT: Kraig Beebe (602) 819-4600
Kraig.Beebe@DJOGlobal.com
 Mario Cordero (808) 396-8884
Medicdist@hotmail.com

INFORMATION: See flyer insert in this newsletter





Introduction to Radial Pressure Wave and Focused Shockwave Therapy

The purpose of this course is to provide the participant with an overview of acoustic wave therapy, to include radial pressure wave and focused shockwave. The webinar will cover the basic mechanisms and indications, as well as differences between radial pressure wave and shockwave therapies.



Guest Speaker:

*Dr. Christopher M. Proulx, D.C.,
Ph.D.(abd), A.T.C., C.S.C.S.*

Dr. Proulx is a clinical consultant at DJO, LLC in the Chattanooga division. He is also in private practice and consultant as a physical medicine and rehabilitation specialist and performance coordinator for individuals and athletic teams and guest lecturer/researcher at colleges and universities. He holds a Doctorate of Chiropractic, PhD(abd) in Exercise Science, Master's of Science in Exercise Science, and a Bachelor's of Science in Sport Management and Health Fitness. Chris has over 20 years of experience in sport and clinical sciences. He has authored and co-authored several peer reviewed publications and has presented his work across the U.S., Central and South America, China, and Europe in many different venues. He has been a consultant to several manufacturers, clinicians, athletes, and coaches at all levels. Proulx is a licensed chiropractor, certified athletic trainer, and certified strength and conditioning specialist.

No CEUs have been approved for this course.
In some states you may apply for approval with certificate.

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MKT00-8484 Rev A

WEBINAR
APRIL 2, 2019

12:30 PM – 1:30 PM HST

CONTACT

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COURSE OBJECTIVES

Upon completion of this course
the student will be able to:

- Describe the benefits of acoustic wave therapy
- List indications of acoustic wave therapy
- Describe the differences between radial pressure wave and focused shockwave therapy