



# SANTIAGO CHIROPRACTIC ASSOCIATES

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## What's Up, Doc?

Lake Hiawatha, NJ, April 2015— When faced with musculo-skeletal pain, many individuals often have questions about who the right doctor may be for their ailments. Understanding the roles and capabilities of each of the specialists in this field can be crucial to getting you the fastest and safest form of relief.



Although most patients present to our office on a referral basis, occasionally they present to us after a failed self-rehab or rest period and sometimes we are even turned to as a “last resort” after having already gone for a consult with an orthopedist or a pain management specialist. In most cases, this progression would be considered backwards.

*Let's take a look at what you need to know...*

**Medical Doctors:** Your primary care physician is a great place to start if you have any question at all about the origin of your pain. They can serve as an excellent referral option helping to point you in the right direction for issues requiring a specialist. For musculo-skeletal complaints they will usually refer to orthopedists for serious conditions and chiropractors/physical therapists or to your couch for rest when the injury is less serious. Many times they will prescribe a muscle relaxor and/or pain-killer as well.

**Orthopedists:** If you have experienced a considerable trauma and know or suspect a significant fracture or tear, orthopedists are the best options for these more serious musculo-skeletal injuries. They perform surgeries with precision and efficiency when necessary.

**Pain Management Doctor:** A referral to pain management is most commonly recommended for patients with non-surgical conditions who have either not responded appropriately to conservative treatment in a given period of time or for patients in so much pain that conservative treatment is not initially possible.

**Chiropractors:** Chiropractors, most simply put, should be your go-to for improving movement that has been lost or become painful. They are most effective when dealing with acute or chronic pain conditions and will commonly manipulate soft tissue as well as your joints in order to restore natural and pain-free motion.

**Physical Therapists:** PTs are typically the best choice for rehabilitative exercise following a surgery or debilitating injury. Your PT should be consulting with your surgeon to recommend and then supervise both active and passive rehabilitation treatments. They also can also be effective when dealing with acute or chronic pain conditions.

As a general rule, when possible, you should aim to begin treating any injury or issue with the most conservative forms of care first as typically they have the least associated risk. Conservative treatments could also include massage therapy, acupuncture and other forms of naturopathic treatments. Before beginning any treatment however, it is most important to determine the source of your issue or at least a working diagnosis.

If having read more about your different resources, you have any questions, please speak with Dr. Santiago or Dr. Scarano during your next appointment.



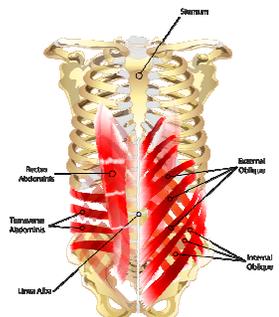
**LAST CHANCE TO REGISTER**  
**for the Lincoln Tunnel Challenge**  
**RACE DATE: APRIL 19<sup>th</sup>**

*See you there!*

**Directions to Register:**  
- Go to [www.LTC5k.org](http://www.LTC5k.org)  
- Click on “LTC5K Registration”  
- Read the waiver & Click on “I agree”  
- Click on “Join a Team”  
- Select “Santiago Chiropractic”  
- Click “Continue”  
- Follow directions to complete registration!  
*Note: We will pick up your race bib/shirt for you...*



## Asymmetrical Training for Functional Benefits



Whether being analyzed by your doctor or looking at yourself in the mirror, by nature we strive for symmetry. Ironically however, most activities of everyday life (carrying groceries or a small child, swinging a hammer, shoveling, sweeping, eating, using the computer mouse, gardening, etc.) are asymmetrical. These activities are performed with a dominant side performing most of the work. Asymmetry is even more obvious in athletics: Racquet sports, golf, baseball, boxing, martial arts, bowling, basketball, football, field hockey and lacrosse. These activities require propulsion, primarily from one lower extremity, with the core stabilizing to transmit power. Even seemingly symmetrical activities like swimming, bicycling, walking and running are a synchronized, coordinated concert of alternating one-sided exertions requiring an alternating one-sided contraction of the muscles of stabilization and the muscles of propulsion.

*Image 1. Anterior core muscles*

If we function in asymmetry, why do we train almost exclusively with symmetrical workouts? Most gyms and rehabilitation facilities still utilize balanced, symmetrical resistance loading: bench press, squatting, pull-downs and most weight-lifting machines. These symmetrical exercises train our muscles in a way they are not necessarily utilized in daily function. To maximize function and performance, we should be training and rehabbing with asymmetrical loads.

Most people will tend to separate their physical training routines into categories such as strength training, core training, aerobic exercise and flexibility as if these categories are mutually exclusive. However, let's take into consideration an exercise such as a lunge walk with an overhead weight (*See Image 2*). This exercise enhances hip mobility and flexibility, works global body strength including the core, and if done correctly, will work the cardiovascular system as well.

The spine is a flexible column, not a hinge joint, so we should NOT train the muscles supporting the spine as we would a hinge joint as with exercises such as sit-ups, crunches or other truncal flexion exercises. Because it is designed to inhibit spinal motion and transfer power, the core should be trained to work in harmony with the extremities.

Training to enhance performance and to rehabilitate patients following injury should also emphasize functional motion patterns that provide a benefit and that transfer to real-life activities.



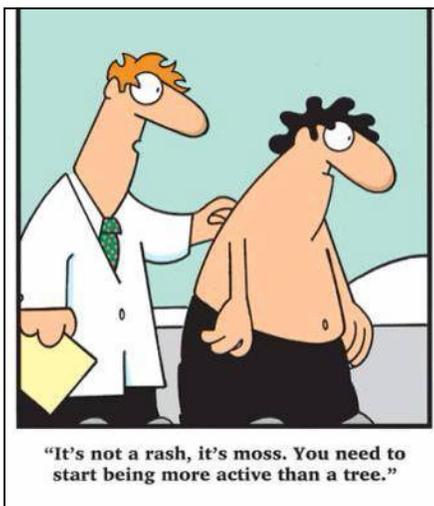
*Image 2. Lunge walk with overhead weight*

While not appropriate for everyone, the use of dumbbells, kettle bells, sand bags, pulleys, ropes, sleds, elastic bands and medicine balls are great tools for asymmetrical functional training.

### Exercises that challenge the core with asymmetrical stresses include:

- Single-leg, single-arm dead-lifting
- Farmer walking
- One-arm overhead presses
- Lunge walking with weight
- Standing one-arm pulley exercises
- One-arm clean and presses
- Turkish get-ups
- Squatting with weight in one-hand

If you have interest in seeing examples of these exercises or questions about if these exercises may be right for you please ask Dr. Santiago or Dr. Scarano during your next visit. Remember—if you are not training for function, you are training for dysfunction!



For more health tips and ways to eat well, move well & think well:  
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