

YOU SAVED MY LIFE



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CHIROPRACTORS CAN DO MORE THAN FIX BAD BACKS – AS ONE MAN DISCOVERED WHEN A ROUTINE VISIT REVEALED A HIDDEN KILLER....

When Brian Bannell went to see his Chiropractor about back and leg pain, he expected to be fixed within the hour. Instead he was sent to the local hospital's accident and emergency department with a set of x-rays for a 'second look'.



Chiropractor Prab Chandhok was right to be concerned about certain suspicious signs. Brian, 59, had the condition abdominal aortic aneurism, a

weakened artery which kills three-quarters of sufferers because symptoms are hard to diagnose until it's too late.

Within 48 hours, Brian, who lives in Camberley, Surrey, with his wife Linda, had surgery to repair the four-inch bulge in his artery. The father of three has recovered well from the operation in June 2007 and is back at work running his plumbing business.

"There is no doubt my Chiropractor saved my life. When I got to the hospital I discovered, to my amazement and horror, I had a life threatening condition," he said.

The most common place for an aneurism to develop is in the aorta, the main blood vessel at the back of the abdomen which supplies blood to the legs.

In Brian's case, this led to a sciatica like pain that alerted Prab Chandhok to the possibility that he was suffering more than a recurrence of previous backache.

"We are able to take our own x-rays and I detected something, a couple of spots of calcification – a process in which calcium builds up in body tissue, causing it to harden – that I thought needed to be investigated as a matter of urgency," said Prab Chandhok, of the Camberley Chiropractic Clinic.

If calcium builds up in the wrong place, it can cause problems in the way blood vessels and organs work.

Along with 2000 other registered Chiropractors who undergo four years of university level training, Mr Chandhok is qualified to diagnose more than the back problems commonly associated with the profession.

Chiropractors use gentle manipulation, massage and stretching of soft tissue to free up stiff joints and misalignments of the spine causing neck and back pain, as well as giving advice to speed up recovery and prevent recurrence.

The training which underpins the work is recognized not only through registration with the General Chiropractic Council, but increasingly by the medical profession.

Many doctors believe chiropractors should not be saddled with the 'alternative' tag. This has held back wider acceptance of the profession and prevented the NHS from reaping the benefits because most patients have to pay privately.

‘Our members have undergone four or five years of full-time education, which includes most of what is taught in medical schools, with the exclusion of pharmacology and surgery,’ said Tony Metcalfe, president of the British Chiropractic Association (BCA).

‘They have the specialist skills of manipulation, exercise and rehabilitation as well as the ability to take and read x-rays.

Our members are qualified and statutorily registered as primary healthcare practitioners. They are able to diagnose those conditions amenable to chiropractic care, identify those that are not and those that require referral.

Chiropractors are professional health care providers who deliver a complete package of care. More than 11 million patient visits to chiropractors each year demonstrates the confidence the public has in the profession.’

The largest study on the management of back pain, begun in 1990 by the Medical Research Council, showed the superior effectiveness of chiropractic compared with hospital outpatient management for acute and chronic back pain.

A British Medical Journal study showed chiropractic management and skilled manipulation were more effective and cost-effective than out-patient treatment.

There is a continuing fall in long term disability reported by chiropractic patients compared with those receiving other treatments.

Yet the reputation of chiropractic has been tarnished by association with research looking at ‘spinal manipulation’ carried out by other, sometimes less skilled, practitioners.

Back pain costs the economy at least five million working days a year and is the cause of half a million people getting long term incapacity benefits.

Nigel Hunt, a chiropractor working in Salisbury, Wiltshire, found it would be ‘cost-neutral’ to provide more chiropractic on the NHS in line with existing clinical guide-lines and at best there could be substantial savings.

‘Many people could benefit from our treatment – 10 per cent of long term back pain sufferers account for 90 per cent of NHS costs for treating this condition – but they can’t afford to pay for it,’ he said.

For a decade, Dr Shraga Haber, senior GP at the largest medical centre in Salford, has helped bring chiropractic to thousands of NHS patients, backed by the local primary care trust. He says the clinical and cost case is proven. ‘It is a so-called complementary medicine, but should be recognized as part of mainstream practice, providing everyday treatment’.

Professor Sean Hilton, professor of general practice at St George’s Hospital in London, sees the issue from both sides of the fence.

As a patient, he has benefited from chiropractic treatment for back problems since the mid-eighties and as a clinician has referred many of his patients.

There is good evidence for manipulative therapy and chiropractic should take its place at the conjunction of orthodox and complementary medicine,’ he said.

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