

Chiropractic Patients Have Fewer Strokes

A literature review in the September, 2001 issue of the *Journal of Vertebral Subluxation Research* reports that patients under chiropractic care experience strokes at a considerably lower rate than people who are not under chiropractic care.

The report says that people who are not under chiropractic care suffer strokes at a rate more than twice that of people who are under chiropractic care. Some of the studies reviewed put that number much higher; people not under chiropractic care may be as much as 27,500 times more likely to have a stroke than chiropractic patients.

This research is significant since many authors in medical research have attempted to link chiropractic care with the occurrence of strokes. Some unethical authors have gone so far as to report injuries caused by "chiropractic adjustments" that were performed by non-professionals such as kung fu instructors, barbers, unlicensed masseurs and even spouses.

Comparatively, chiropractic proved to be much safer than many common drugs and medical procedures. Aspirin and related drugs (known as NSAIDS) are associated with 80% of all ulcer related deaths. Short and long term users of NSAIDS are three times more likely to die than people who don't use them.

According to the study, more than 50% of all medications that are commonly prescribed have serious and sometimes fatal side effects. In 1994, the fourth leading cause of death in the United States, accounting for 106,000 deaths, was drug reactions to properly prescribed and utilized drugs.

Appendectomies have a death rate of 1 in 74. Spinal fusion surgery has a death rate of 1 in 50. The simple act of venipuncture (drawing blood) causes 1 death in every 25,000 procedures.

According to the author, "it has been suggested that more Americans are killed in hospitals every six months than died in the entire Vietnam war, that the medical death rate is equivalent to three jumbo jet crashes every day and that the [disease] care system may be a public health threat of epidemic proportions." ▲

■ Stroke-reducing surgery not needed in patients without symptoms

The June 8, 2000 issue of *The New England Journal of Medicine* reports that endarterectomy, a high-risk surgery used to clear neck artery blockages may be unnecessary in patients who have blockages but no symptoms. In fact, say the researchers, endarterectomy can actually increase the risk of other types of stroke and related complications.

This study found that people who have blockages have a low risk of stroke if they are not experiencing any symptoms. In fact, patients with neck artery blockages between 60% and 99% only experienced a 16% risk of having a stroke. Also, 45% of the strokes that did occur in this group were of the type not helped by endarterectomy.

Researcher Dr. Henry Barnett of the John P. Robarts Research Institute in London, Ontario, Canada says that focusing on the four major factors for stroke, high blood sugar, high blood pressure, high cholesterol and smoking will provide more benefits to more patients than endarterectomy.

While noting that there may be patients without symptoms who would benefit from it, he noted that "the scales are tipped against the routine use of endarterectomy in patients who have no symptoms."

Barnett went on to say, "we have to look carefully at the enthusiasm with which the question of operating on asymptomatic arteries is embraced."

■ Heart catheters increase risk of stroke in some

A study in the April 12, 2003 issue of the British journal The Lancet finds that using heart catheters to diagnose a certain type of heart problem can unnecessarily increase the risk of the patient having a stroke.

Patients with aortic-valve stenosis (narrowing) did much better when surgeons relied on non-invasive echocardiograms.

Associate professor of cardiology at the University of Bonn in Germany and lead researcher Dr. Heyder Omran says, “if you do a good echocardiogram and you are confident about the results, I don’t see a reason for doing the [invasive catheter procedure]. Those who do will certainly expose the patient to the risk of stroke.”

22% of the 101 patients in the study who had the catheterization procedure had indications of blood clots after the treatment. Three patients in the study who had catheterization had impairments in neurological function indicating they suffered a stroke.



1 in 10 still have stroke surgery unnecessarily

The May 8, 2003 issue of the journal *Stroke: Journal of the American Heart Association* reports that 1 in 10 people are having a common stroke surgery even though they are not good candidates and the risks outweigh the benefits.

The surgery is called carotid endarterectomy. It involves stripping fatty plaque from neck arteries that are dangerously clogged in order to decrease the risk of stroke. However, the procedure itself can increase the risk of stroke if small pieces of plaque break loose and travel to the brain.

In the study, researchers examined the files of 2,124 patients who underwent the surgery at six New York hospitals between 1997 and 1999.

In nearly 11% of the cases, endarterectomies were performed inappropriately. This would amount to about 14,000 unnecessary surgeries a year.

When the researchers looked closer at the inappropriate surgery group they found that 27% of them didn't have enough blockage to justify the procedure. They also found that nearly half of the people in the inappropriate surgery group were too sick with other illnesses to have had the procedure in the first place. Many of the patients had heart failure, high blood pressure, diabetes, heart or kidney disease that should have precluded the surgery had they been good candidates.

The authors conclude that patients facing the surgery should ask their doctor if they are too sick to have the procedure and to get a second opinion.

Commentary: We suggest a third or fourth opinion.

Common drug ingredient could cause strokes

Reuters health reports the U.S. Food and Drug Administration (FDA) has recommended that a common ingredient in many over the counter drugs be reclassified as unsafe because it may cause hemorrhagic strokes (bleeding in the brain).

The drug, phenylpropanolamine or PPA, is found in many common non-prescription cold and cough medications and appetite suppressants including Accutrim, Alka-Seltzer, BC Cold Powders, Comtrex, Contac, Dexetrim, Dimetapp, Naldecon DX, Permathene, Robitussin, Tavist-D and Triaminic.

The five-year study found that stroke patients were 50% more likely to have been exposed to PPA within a three day period prior to having their stroke.

Patients who used cough and cold remedies containing PPA were 23% more likely to have a stroke and those using appetite suppressants containing PPA were sixteen times more likely to have a stroke. The FDA estimates that PPA may be responsible for 200-500 strokes every year in people under 50 years of age.

Predictably, the manufacturers of products using PPA felt that the study did not establish a clear cut relationship between PPA and strokes. However, according to lead researcher Dr. Ralph Horwitz of the Yale University School of Medicine, statistically, these figures "could not have been expected by chance."

By way of commentary, all drugs pose a risk. What's the next symptom-masking drug that research will discover is dangerous? Your body has a natural tendency to maintain its own health provided nothing interferes with how it functions. Chiropractic care helps ensure proper function by making sure the master control system, the nervous system, is free of interference.

■ Vioxx linked to blood clots, heart attacks and strokes

Reuters news service reported on April 19, 2002 that sales of the arthritis drug Vioxx are down because the drug has been linked to blood clots that can cause heart attacks and stroke. Vioxx is produced by the drug manufacturer Merck & Co.

Last year, Vioxx revenue fell nearly \$1 billion short of initial projections because of concerns that patients taking the drug develop blood clots that can cause heart attacks and stroke. An August, 2001 study in the *Journal of the American Medical Association* found that the class of drugs known as COX-2 inhibitor drugs, which includes Vioxx, Celebrex and Bextra, increased the risk of heart attack, stroke and other cardiovascular problems.

Commentary: Over and over again we hear of new “miracle” drugs that end up causing more problems that are more dangerous than the disease they are supposed to treat. Taking drugs does nothing to allow the highest expression of health. Making sure your body is functioning at its highest potential possible with Chiropractic wellness care is the best way to get and stay healthy.

■ Viagra Linked To Blood Clotting, Heart Attacks

The January 10, 2002 issue of Cell reports that research at the University of Illinois at Chicago College of Medicine has found Viagra may be the cause of heart attack and strokes in men who take the impotence drug.

This study surprised the researchers because for the past 20 years, it has been thought that a compound in cells called cGMP prevented heart attacks and stroke by keeping blood platelets from clumping together or clotting. This study found that not only does cGMP cause platelet clumping that can lead to heart attacks and strokes, but also that Viagra actually increases levels of cGMP in the body.

Viagra was originally developed to prevent heart attacks and strokes by stopping platelets from clumping together. As of July 1999, 564 deaths of men taking Viagra have been reported.



Heart Bypass linked to lingering brain damage

The New England Journal of Medicine recently reported that Heart Bypass surgery causes serious, lingering brain damage in as many as 25,000 Americans per year.

Six percent of people undergoing Heart Bypass surgery suffer significant, perhaps permanent, brain damage. “That's a frightening figure for an elective procedure,” said the director of the study, Dr. Dennis Mangano of the San Francisco Veterans Affairs Medical Center.

Worldwide, 800,000 bypass surgeries are done each year with 400,000 in the United States. Doctors believe the surgery knocks loose tiny bits of fatty deposits that then float in the bloodstream until they block the small vessels of the brain, starving it of oxygen.

Dr. Philip Wolf, of Boston University, a stroke specialist not involved in the study, called the degree of brain damage “ a gross underestimation, because these people were not seen systematically by a neurologist. It must be the tip of the iceberg.” ▲



Some carotid artery surgery unnecessary

The February 4, 1999 issue of the *New England Journal of Medicine* is reporting that a widely used surgery to clean out clogged arteries is of little value unless the arteries are severely blocked.

The research, which was performed at the John P. Robarts Research Institute in London, Ontario, Canada, found that the risks of surgery outweigh the benefits if the artery is blocked less than 50%. In arteries blocked between 50 and 69%, the operation decreased the risk of stroke from 16% to 22%, only a 6% decrease. ▲



Bypass Surgery Can Increase Stroke Risk

A study in the July 17, 2001 issue of *Circulation: Journal of the American Heart Association* finds that patients who have heart bypass surgery soon after having a heart attack or an episode of severe chest pain may have an increased chance of having a stroke in the following months.

More than 18,000 patients who had heart-related chest pain called unstable angina or a less severe form of heart attack called a non-Q-wave heart attack were studied. Patients who had heart bypass surgery within 2 weeks of either of these episodes occurring were, on average, four times as likely to have a stroke as patients who did not have bypass surgery at all. The risk was even higher in elderly patients and those with a past history of stroke, diabetes and high heart rates.

■ Study: Angioplasty, Stenting Increase Stroke Risk

The September 17, 2003 issue of the Journal of the American College of Cardiology highlights a study showing more than 20% of people who have undergone carotid angioplasty and stenting procedures may have particles break off from the artery walls and travel to the brain causing stroke.

Carotid angioplasty involves inserting a small balloon into a narrowed carotid artery and inflating it to spread the blockage open wider so more blood can flow through. Stents are small wire mesh tubes that are left behind to hold the artery open. Small particles can break off of the artery walls during the procedures and travel to the brain, blocking blood flow and causing strokes.

Researchers in Germany looked at MRI studies of 42 patients before and after they had the procedures. They found that protection devices designed to trap the small particles before they get to the brain don't always work.

Of the 42 patients studied, 9 of them (21%) had particles break free, bypass the protection devices and travel to the brain, blocking blood flow.