

Recurrent Sports Injuries: Getting to the Root Cause

Michael Cheikin MD

Most athletes who are injured experience their pain as a major inconvenience. The first question that I hear as a rehab doc is, "When can I get back to my sport?". Often, they go back too soon, at first "testing" their bodies, their minds, and their physicians' advice. Sometimes they get away with it. However, in the hundreds of cases I've seen, the problem recurs a second time, and then a third. Each time, it is a bit more intense, is less responsive to treatment, and becomes more disabling.

Early in my twenty-five year career, I would do the usual drill, using medications, modalities such as heat and cold, and physical therapy-like exercises. However, in too many cases, the problem would recur, sometimes in exactly the same pattern, sometimes in a different pattern.

I saw this happen to my brother-in-law. He had an anterior cruciate ligament repair for his knee. A few months later, the knee had a new and different pain. His orthopedist told him he was developing "arthritis" and there was nothing to be done. His response, "Then why did I go through all the surgery and rehab to still have a bad knee?" was what I typically hear from such athletes after surgery.

The word "arthritis" as used by our culture refers to the pain of "wear-and-tear" that is considered progressive and irreversible. When doctors use the word "arthritis", the hidden message usually is "there is nothing more I can do, just take your pills and get out of my office". Couple that with obesity, senility, depression, GERD and heart disease, and we have the picture of aging in America.

A Paradigm Shift Regarding Pain

But is all of this true? Do you have to give up your sport? Is arthritis truly irreversible? Over twenty years ago, I began to develop a different way of looking at this problem, synthesized a new theory ("model") and from that a new approach. The positive results were faster and greater than I ever expected. In fact, they were so amazing that I began to

apply this approach to many medical conditions that were considered "chronic", "surgical" or irreversible, such as carpal tunnel syndrome, chronic pain of the back, neck and shoulder, and fibromyalgia.

This new approach involves what is called a "paradigm shift", which means looking at things from a different perspective. The new approach involved the following assumptions: 1) the body has inherent healing mechanisms that, though not working effectively, can be facilitated or un-blocked; 2) that pain is not a bad thing to be killed with pain killers, but is a good thing that is giving us critical information about what we need to do to protect our bodies and joints; 3) that a problem in one region, such as a knee or low back, requires that we look at other regions, just like an overworked employee may not reflect that employee's inability, but a weak partner that is not doing his/her share of the work; 4) that we must take a multi-dimensional approach to such problems, that include nutrition, energy (as conceived in Chinese or Ayurvedic medicine), and mind-body phenomena. and 5) the user of the body must take an active involvement in their healing--just like the fact that we cannot fully depend on our dentists to take care of our teeth, we must brush them twice a day.

This new approach was based on my personal experience with dance, yoga, and other movement methods such as Feldenkrais. Sharing my patients's desperation, I began to offer yoga poses to such patients, at first not calling them yoga (due to my own fears) and then adding acupuncture and nutrition. Though not being as "quick fix" as a pill or surgery, the results were profound and lasting. This is because we were finally getting to the "root" cause of the problem. The reason "health" rhymes with "wealth" is that they are very similar--they both are resources that we must invest in at first, and then later see compounded return.

As an example of such a root cause situation, I discovered that the most common

cause of low back pain is the "joints" above or below the low back--which are the upper (thoracic) spine and hips. If these two regions are not working well, and for most of us they are not, then the low back has to do far more work than it was designed to do. All the exercises, massage, manipulation, and medical procedures aimed solely at the back are destined to fail in the long-term, as the root problems in the hips and upper spine are not addressed. The advantage and efficiency of practices such as yoga enable one to work with the body as a whole, relearning the use of each region in the context of a natural movement, not a machine-based movement.

In addition, we need to look at an athlete's biochemical environment. Increased physical activity generates increased free radicals, which are a main cause of tissue damage. While many of my patients take a multi-vitamin, plus some extra stuff such as Vitamin E or C, their supplement regimens, like their exercise routines, are often imbalances, excessively emphasizing certain supplements and lacking other critical ones such as Selenium, Zinc, Magnesium or Vitamin D. If the athlete is on medications, has a medical condition, or has other demanding lifestyle features, then additional supplements (and often special tests) are necessary to obtain optimal biochemical health.

We have only begun to understand the amazing healing powers of the body. Using this approach, I have seen hundreds of people, even into their 70's and 80s, be able to resume and enjoy the sports and activities that they love.

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