



Healthy Neurology

How Chiropractic Can Play a Role

Dr. Enrico Dolcecere

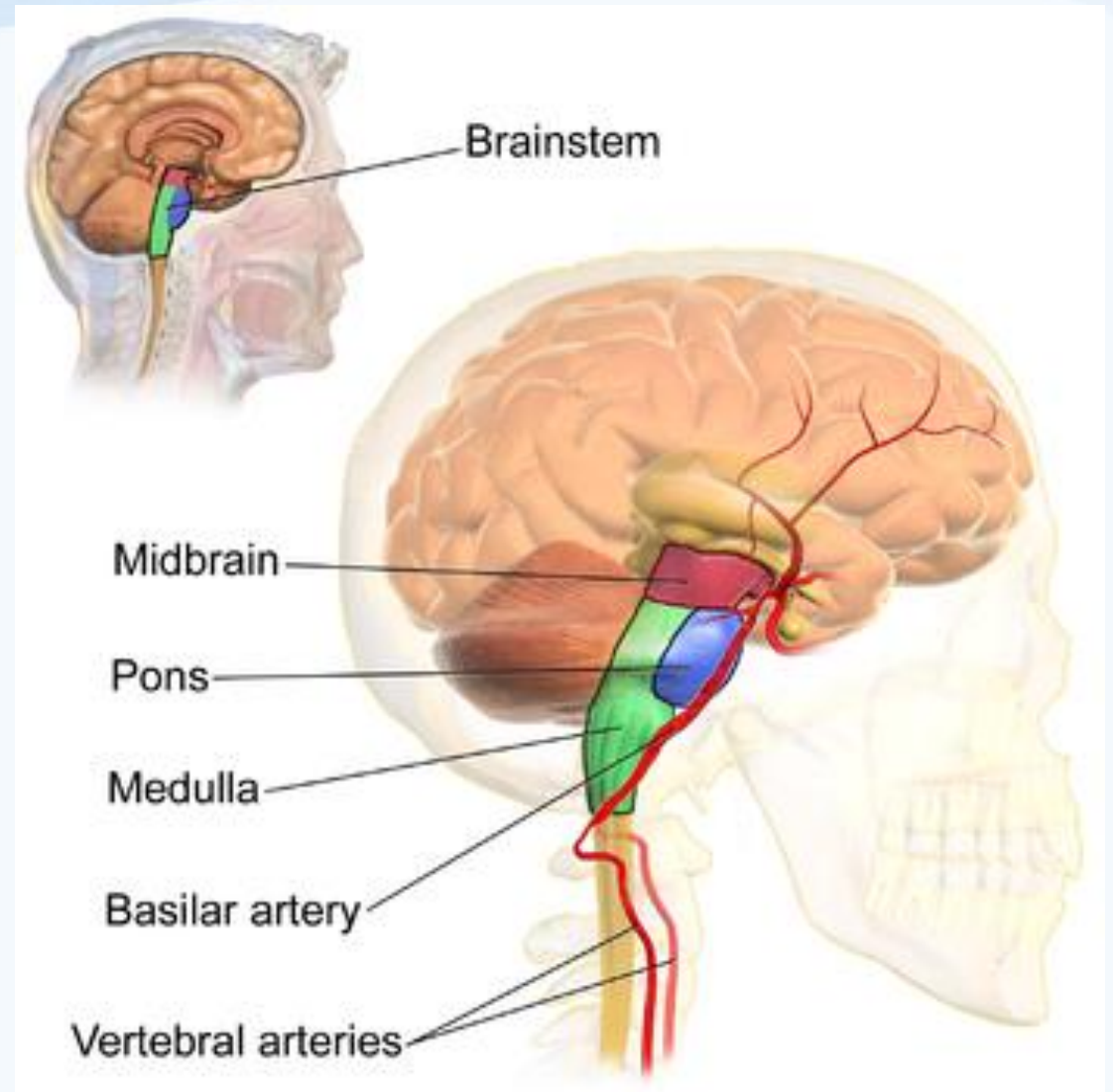
- *Neurological Chiropractor @ Full Life Chiropractic in Lutz, FL*
- *Pediatric Practice from 2008 -2017 in Calgary, Canada.*
- *Member of the International Chiropractic Pediatric Assoc.*
- *Member of the Blair Upper Cervical Society*
- *Member of the Florida Chiropractic Association*
- *Canada MS Society*
- *Autism Foundation*
- *Canada Minor Hockey*
- *Cleveland Clinic C3 post concussion group*

Moebius Syndrome

- Cranial Nerve underdevelopment (6th & 7th nerve)
- First signs are inability to suck and hold held up
- Clubfeet and other deformities can exist
- Upper body muscle development lacks as children grow
- Many develop scoliosis as a result of altered muscle development
- Autonomic Dystonia is the focus!

The Brainstem?

- Provides the main motor and sensory to the face and neck.
- 10/12 of the cranial nerves
- Fibers connect main part of the brain to the body.
- Motor, sensory, sleep, cardiac and respiratory control.





Childhood Development

*Raising healthy kids in the 21st
century*

Understanding Health

- Nerve health is no different than overall health
- A healthy brain and nervous system responds optimally
- Optimal output results in optimal function
- Function is the expression
- It requires fuel, rest, integration/sensory, and expression
- Downloading happens in stages

Childhood Development Milestones

Facial
Expressions

Eye Tracking

Babble

Laugh

Mirror/Vision

Copy Sounds

CRAWL

Response

Speak/Draw

Point

Build Blocks

WALK

Join words

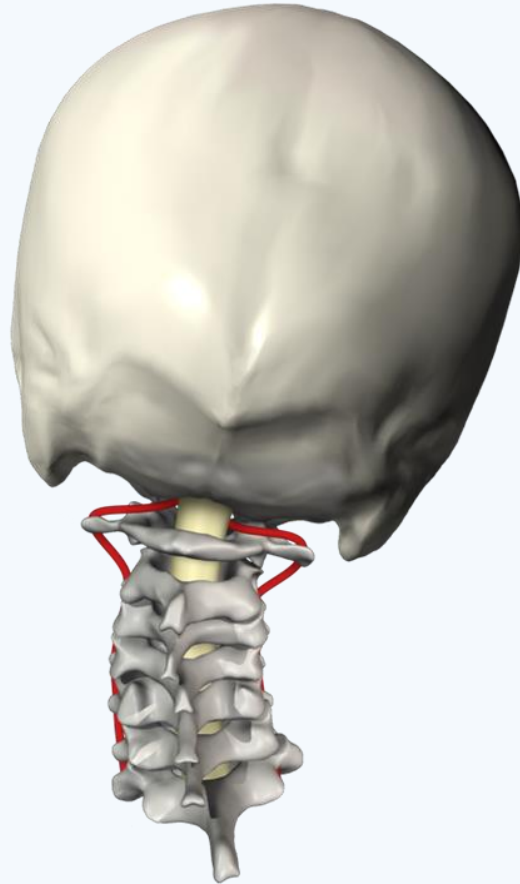
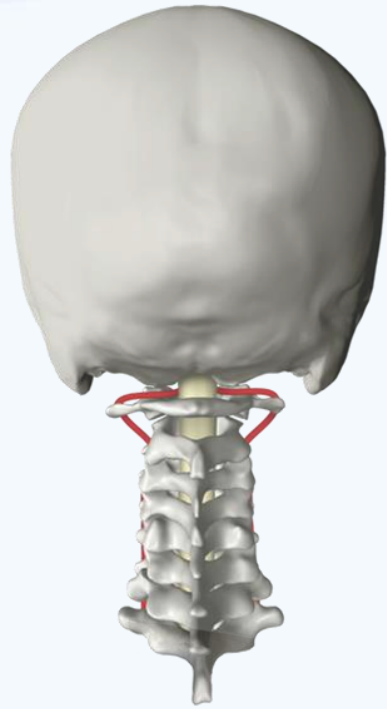
Independence

Talking

Imagine



WHERE'S THE
DISCONNECT?



How Chiropractic Can Help

- Chiropractic adjustments help stimulate neurological response
- Can increase brainstem and/or brain blood flow
- Cerebrospinal Fluid alterations
- Reduce mechanical spinal cord tension
- All by removing subluxations

Subluxation & Dysafferentation



Clinical Neurophysiology

Volume 118, Issue 2, February 2007, Pages 391–402



Cervical spine manipulation alters sensorimotor integration: A somatosensory evoked potential study

Heidi Haavik-Taylor  , Bernadette Murphy

1

Spinal dysfunction alters afferent input to the central nervous system. (dysafferentation)

2

Altered afferent input to the central nervous system leads to plastic changes. (Functional pathological processes.)

3

Neural plastic changes take place both following increased and decreased afferent input

SUBLUXATION & NEUROPLASTICITY

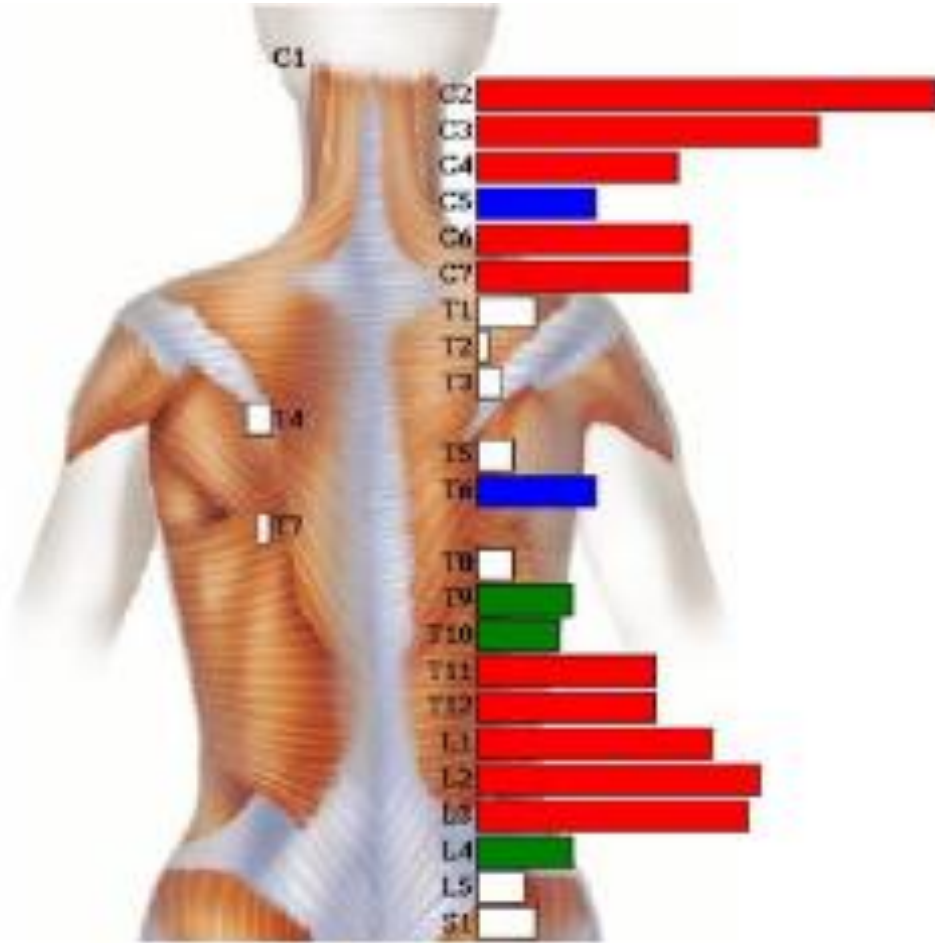


Exploring the Neuromodulatory Effects of the Vertebral Subluxation and Chiropractic Care.

Heidi Haavik Taylor, Kelly Holt and Bernadette Murphy

“
Vertebral subluxation creates neuroplastic changes (i.e. lasting functional neurophysiological changes) in the central nervous system due to altered afferent input.

SUBLUXATION & AUTONOMIC BALANCE



“

Autonomic dystonia may be evaluated by measuring skin temperature differentials.

Uematsu, et al., determined normative values for skin temperature differences based upon asymptomatic "normal" individuals.

The authors stated, "These values can be used as a standard in assessment of sympathetic nerve function, and **the degree of asymmetry is a quantifiable indicator of dysfunction** ... Deviations from the normal values will allow suspicion of neurological pathology to be quantitated and therefore can improve assessment and lead to proper clinical management." **Skin temperature differentials are associated with vertebral subluxation.**

A Four-Dimensional Model of Vertebral Subluxation
By Christopher Kent, DC, Esq.

HOW COMMON IS VERTEBRAL SUBLUXATION?

1000 infants were checked in the first month of life. **80%** were found to have **vertebral misalignment** of the upper neck.

Blocked atlantal nerve syndrome in babies and infants. Gutman G. Manuelle Medizin (1987) 25:5-10.

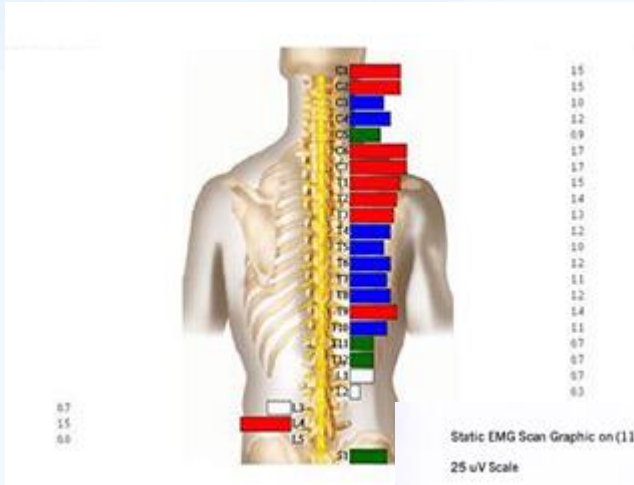


HOW COMMON IS VERTEBRAL SUBLUXATION?

1250 infants were evaluated during the first five days of life. It was found that **90% had suffered birth trauma and strain through the neck and cranial areas**, with 10% suffering severe trauma.

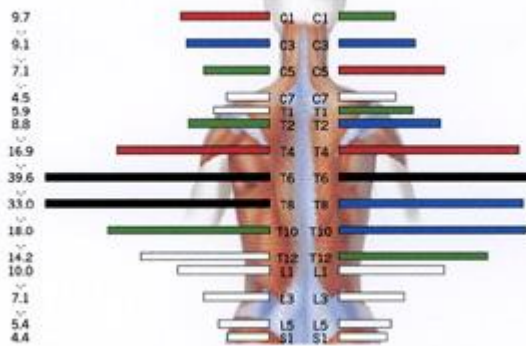
Frymann, V. Relation disturbances craniosacral mechanisms to symptomatology of the newborn: Study of 1,250 infants. JAOA. 1966. 65:1059-1075.

Assessment



Static EMG Scan Graphic on (11/17/2004 05:40 PM)

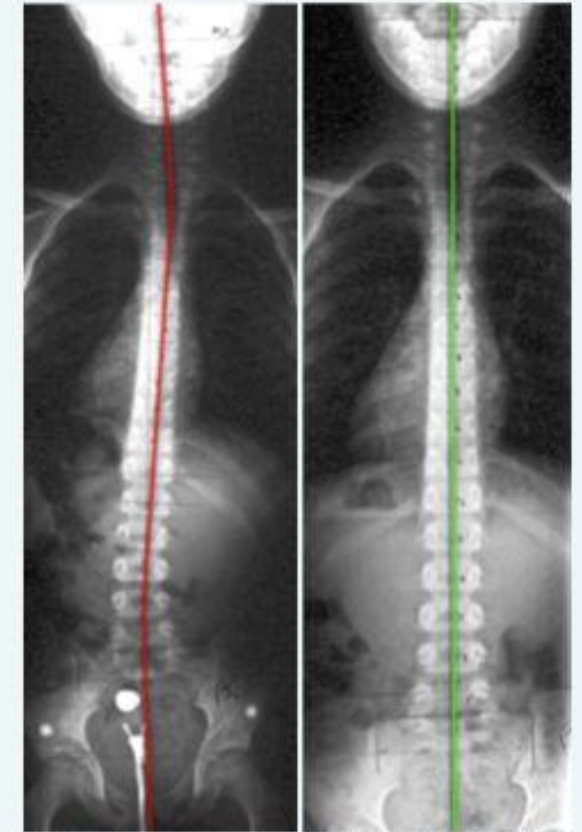
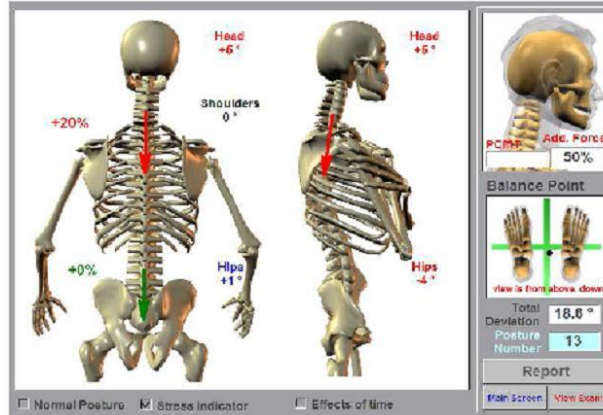
25 uV Scale



Posture Pro V Report *** Performed By Dr Nick Hodgson Of Super Healthy P/L
Sample Patient: 11/05/11 16:44

A posture exam was performed on Sample Patient on 11/05/11 16:44 using the Posture Pro 8 posture analysis system. Anatomical landmarks were selected bilaterally on the head, torso, hips (ankles and knees if indicated) on the AP-view, and head, shoulder and hip, on the lateral view. Lines were drawn through these landmarks to create angles. Normal posture profiles would be zero degrees for all indicators. The results follow.

BWR: BWL: CT Comp. - Off;
Nonzero offsets: AP-Hd=5 ° AP-H=1 ° AP-K=2 ° AP-A=1 ° LAT-Hd=5 ° LAT-P=4 °
CF=50%; PDv=18.6 ° BP=-0.008 -0.011; Q-Angles N/A; LOH=0 cm (0 %)



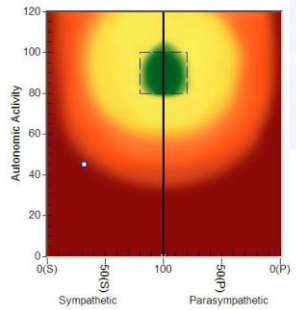
BEFORE

AFTER | 9 MONTHS

Analysis on (06/30/2008 11:01 PM)

Autonomic Activity Diagram

Autonomic Activity Index: 44.
Autonomic Balance Index: 32.01



Contact us

- Email us a INFO@FullLifeTampa.com or call
- Mention you were at the Moebius Conference
- Get a FULL assessment for your child
- See if chiropractic can be a health tool
- Open Saturday's
- If you don't live in the Tampa area contact us to find you a chiropractic clinic close to you that can help