

Guide To Understanding Your Pain.

Understand your pain and get back to living your life!

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What will you learn from this guide?

This guide will help you to understand the root causes of pain, provide information on why pain sometimes persists long-term despite medical treatment, and finally, describe approaches to managing pain long-term.

The guide is broken out into the below eight sections. Feel free to click on each section to jump directly to it, however I do recommend reading the entire guide in order to get the most complete picture of pain & pain management.

Section #1: What is Causing Your Pain?

Understand the potential root causes of your pain.

Section #2: Why Your Current Treatment Might Be Falling Short

Learn about traditional methods for treating and/or managing pain and understand more about why they may not be working for you.

Section #3: The Emotional Part of Pain Treatment

Hear how the emotional component of pain can help in your treatment.

Section #4: Pain Management Strategies

Get proven strategies to help manage your pain.

Section #5: Origins of Pain

Understand the potential causes of head, neck & shoulder pain.

Section #6: Pain From Aggravated Nerves

Learn the important role that nerves play in the pain treatment process.

Section #7: Why Pain Persists

Often pain can feel like it lasts a lifetime. Learn more about why some types of pain persist even over long periods of time.

Section #8: The Holistic Approach to Pain Management

Get rid of your pain and on with your life using Dr. Ho's holistic approach to pain management.





Live pain free & get your life back.

Pain, when suffered over a period longer than a couple weeks, or when experienced repeatedly, can lead to depression, isolation and an inability to enjoy life as normal.

As someone showing an interest in this guide, it's likely that you or someone you know suffers from headaches, neck pain or shoulder pain — three of the most common conditions I have treated during my nineteen years of practice as a chiropractor and acupuncturist.

Among the thousands of patients I treat in my practice, a disproportionately large number complain of varying forms of head, neck, shoulder and limb pain. For every patient seeking treatment, however, there are many who are not, either because they lack the time, are adopting a "wait and see" approach to their pain, lack the insurance or financial resources, or are simply cynical about the effectiveness of treatment.

When faced with recurrent neck, shoulder or headache problems, the goal is to treat the source of the pain, avoid unnecessary treatments (that don't address the root problem) and learn how to keep these problems from returning.

This guide aims to provide simple solutions for even the worst of conditions, ending the mystery of chronic pain and offering sound advice on medication, lifestyle, body mechanics, and the need for integrated physical and emotional support to help you avoid injury and suffering; both now - and more importantly - for the rest of your life.

Pain management is ongoing. Make sure you're getting regular advice by subscribing to our blog, <u>"Living Pain Free with DR-HO"</u>, and by following us on the below social channels:

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Section #1: What is Causing Your Pain?

Stress is a key driver of pain for many people.

The demands of modern life are more intense than ever before — we work longer hours, produce more per hour and have more demands placed on us than our parents or grandparents did.

People have less time to relax, to enjoy leisure activities and to engage in the types of exercise that were once considered a normal part of life, like taking a stroll or gardening — simple acts that keep the body and mind loose and fluid.

Our physical and emotional stressors are immense, our time is tapped and there is no end in sight. For many of us the only enjoyable part of



the week is the weekend, but even then we find ourselves so exhausted that we spend it collapsed on the couch.

From car to desk, to car to couch and very often with a cell phone cradled against one's neck, it is not a healthy way to live, but it has become the norm for many of us. And there in the backs of our minds is that ever-present push to do more, to produce more and to achieve more. No wonder we're feeling squeezed and drained both emotionally and physically.

Mental & emotional stress can result in physical pain.

Frequently, this begins to feel normal to people and the physical symptoms that come attached with such a stressful environment also begin to become part of your day. It starts with knots in the upper back or stiffness in the neck itself and gradually pain in a wrist or elbow becomes just another part of the day.

In order to demonstrate what muscles *should* feel like, let's look at an example of a muscle that in most people remains in a healthy state: the biceps. If you take your relaxed left bicep muscle and squeeze it with your right hand, you'll notice that it's smooth and supple — no knots, no rigidity.

This is what a healthy muscle feels like, firm but not tight. If, however, you held a five-pound weight absolutely still in your right hand with your elbow bent for even half an hour every day for a week, you'd notice that your right bicep would be tight because you've taught it to stay





contracted. Imagine if you held that weight for months, even years: this muscle would become rock hard, even at rest.

Healthy muscle is hard when flexed and firm but supple when relaxed — unhealthy muscle never relaxes and may be simultaneously weak *and* hard. All of this from only five pounds - half the weight of the average human head.

So now you have an idea of what's been happening to your neck — it constantly supports weight and gets little rest or proper exercise. This ongoing *isometric contraction*, as described in the biceps example, invites muscle stiffness and pain. And the modern workplace, as we now know it, creates a perfect environment for dysfunction within the neck.

CASE STUDY: POTENTIAL LONG-TERM EFFECTS OF ISOLATED INCIDENTS.

I recently treated an eighty-year-old mother and her forty-year-old daughter, both of whom had been involved in a car accident.

The mother had never experienced any neck problems in the past, but the daughter reported that she'd had neck stiffness for years. After X-raying both, I found that the eighty-year-old mother showed no degeneration of her joints: they were smooth, her discs were well-rounded and situated perfectly between the vertebrae and her spine was in correct alignment.

However, her forty-year-old daughter's discs showed significant deterioration: they had changed shape and become narrow. Her joints were rough and arthritic and my analysis of her X-ray indicated that degeneration had begun in her twenties. Upon questioning her, I discovered that the daughter had been involved in two previous car accidents, one fifteen years before and another eight years ago.

In all three accident cases, her car was rear-ended by another while she was stopped at a red light. Our interview also revealed that the daughter worked long hours doing computer-related work that she found quite stressful and that she engaged in no regular exercise program.

The multiple injuries combined with a sedentary lifestyle had caused her neck and shoulder muscles to become tense and shortened. Those constantly contracted muscles in turn, created a loss of joint movement in her neck that led to premature degeneration of her cervical discs.

The mother, on the other hand, had been lucky enough to have never been in a car accident until the one that brought her into my clinic. During most of her life she'd been a stay-at-home mom whose work looking after three children involved duties that kept her naturally active and mobile. The physical demands of tending to domestic work, combined with her accident-free history had kept her muscles and joints in shape and her discs free of measurable degeneration.





Movement encourages health; inactivity invites dysfunction.

Disc degeneration, also known as osteoarthritis, can strike anyone at any age, and is caused by the ongoing dysfunction of the neck and spine. This dysfunction causes a breakdown of the cartilage that protects and cushions the joints. Continued degeneration of the cartilage can actually allow the bones that it previously protected to rub against each other and create serious discomfort.

Osteoarthritis can affect anyone whose muscles tighten so much that they disallow the spine from working correctly and limits his or her range of motion. Those constantly contracted muscles in turn created a loss of joint movement in the daughter's neck that led to premature degeneration of her cervical discs.

The long and short of it is - movement encourages health; inactivity invites dysfunction.





Section #2: Why Your Current Treatment Might Be Falling Short

Treatment of pain is ongoing & can be hard to pinpoint.

The reasons why standard medicine is so often ineffective in treating common pain conditions are several and most are probably not the direct fault of your doctor.

Most have been trained to first investigate possible pathology and infection, which is good medicine, but when neither of those situations turns up, they often decide the disorder isn't serious and fail to give it their full attention, which is bad medicine.

Another reason is that treatment of pain is usually an ongoing process, one the healthcare establishment places very low on its list of priorities because it can be potentially expensive to treat. It may be one reason why so little attention is paid to musculoskeletal medicine in their education.

In 2006, Stockard *et al* found that 82% of medical graduates *"failed to demonstrate basic competency in musculoskeletal medicine."* (Stockard AR, 2006)

This is a disturbing finding, considering these are the specialists many of us see in the course of our pain treatment.

QUICK FACTS ON MEDICINE:

- Non-steroidal anti-inflammatory drugs (NSAID) have accounted for more than 70 million prescriptions and 30 billion over-the-counter purchases
- NSAIDs are also among the most common medications prescribed inappropriately to older Americans

Success of treatment methods is partially in your own hands.

Another reason for this failing, however, is the impatience of patients themselves. At times patients feel as if their pain condition should be fixed immediately by a doctor and that the patient bears no role in his or her own recovery.







One of the missions of this guide is to help you to understand how to assist your healthcare provider so that he or she can properly diagnose and treat your pain disorder, as well as enable you to treat it yourself at home and prevent its return. How do I know how to do this? Simple. I've learned it from my own patients.

The truth is, the more control you take over your own care, the better your result and the less

money and time you will spend on it. This guide is by no means a substitute for appropriate health care, but rather an important addition to it.

Only a *qualified healthcare practitioner* can diagnose any medical condition and it is important to have your doctor perform the proper diagnostic examination before your treatment begins, to rule out less common but very serious possible causes of headaches and neck and shoulder pain, such as meningitis and even heart disease.





Section #3: The Emotional Part of Pain Treatment

Attitude can influence your pain treatment process.

Many greet this concept with a great deal of skepticism, even anger, at the suggestion that their agony is "all in their head." Let me state again that whatever the source of your muscular tension, whether it's physical or emotional (or a combination of both), your pain is real and absolutely valid. Pain caused from emotional sources is no less horrible, or even different, from the kind suffered with an injury.



In some cases, it is worse because injuries typically heal and sufferers can allow themselves to have a positive outlook regarding recovery, while people whose tension stems from emotional causes are often unaware of the true origin of their pain — making their recovery that much more elusive.

The disorder, called Tension Myositis Syndrome (TMS), creates an ongoing playground of serious tension and genuine physical suffering that is every bit as excruciating as whiplash, arthritis or any other physical malady.

CASE STUDY: TREATING MARIA'S LONG TERM PAIN WITH TENS TECHNOLOGY.

Now think of the last time you narrowly avoided a collision in your car. The tension you collected instantly from that experience probably stayed with you for quite awhile: many minutes, hours or even days. Both examples describe a physical reaction to an emotional source, fear, but in one scenario the reaction passed instantly and in the other it didn't. As an example, let's look at the case of a recent patient of mine:

Maria was sixty-two years old when she came to my clinic with recurrent headaches and neck pain. She also suffered from tension in her upper shoulders and mid-back area. She told me that she'd been diagnosed with high blood pressure, which she managed with medication. Otherwise, tests showed her to be in good health and she reported no injuries that might account for her pain conditions.

During her regular visits to my clinic, Maria often spoke in earnest about the stress of her job, where she had worked for over thirty years. She disliked her job but thought there was no alternative work that would be suitable for her due to her age, lack of education and a slight





language barrier because she spoke English as a second language. She also talked of her constant worries about her two adult children's work and personal lives.

Although it seemed apparent that Maria's pain was caused by muscle tension brought on by emotional sources, my treatment of her muscle tension was the same as if she suffered from a physical problem. She responded very well to chiropractic treatment at the clinic, but I knew that would not help her ease her tension over the long-term, so I prescribed regular home treatment with the transcutaneous electrical nerve stimulation (TENS) device I had developed. Initially she reported that the DR-HO'S Pain Therapy System would completely alleviate her symptoms within twenty minutes of application — however on stressful days she continued to experience immediate and severe pain in her neck and shoulders that could bring on a debilitating headache.

Because emotional stress is often ongoing and unpredictable, I recommended that Maria use the TENS system on her neck and shoulders every day, whether she was experiencing stress or not. By stimulating the tense muscles in her neck and shoulders daily, she was able to keep the muscles relaxed. Naturally, on days when she felt especially stressed, her muscles reacted by tensing (which is typical of TMS patients), but her regular TENS therapy prevented the tension from becoming bad enough to create pain. Her daily use of the system was able to prevent the recurrent headache, neck and shoulder pain that she'd been plagued with for years.

Be sure to address your mental state when managing pain.

Stories like Maria's show how very powerful the mere concept of an unpleasant situation can be on your physical well-being. In syndromes like TMS, however, the sufferer typically has no idea that their suppressed emotions are causing them physical problems.

Of course there is no way for this guide to identify if you are someone who suffers from TMS — that would require some emotional soul-searching on your part and perhaps some type of therapeutic assistance, from a professional or even a trusted friend. But if you suspect that you are someone who "stuffs" your emotions, or if you are under a great amount of personal stress, it is well-worth investigating stress as a possible contributor to your neck tension and any problems associated with it. If you suffer from chronic pain it is important to note that even if your pain is not from emotional origins, your emotions will influence your recovery.





Section #4: Pain Management Strategies

Electrical stimulation.

Transcutaneous electrical nerve stimulation or TENS, is the most common form of electrical stimulation used in pain management. TENS is a technique that uses a small, battery-operated device to stimulate nerve fibers through the skin. Other implants for pain control use medicine, heat or chemicals.

Relaxation techniques

Mental health professionals can teach you self-help techniques such as relaxation training or biofeedback to reduce stress and relieve pain.

Acupuncture

This ancient Chinese practice involves inserting very thin needles at specific points on the skin to relieve pain.

Physical & aquatic therapy

A physical therapist may prescribe a exercise program to increase function and decrease pain. Other physical therapy options at pain clinics may include whirlpool therapy, ultrasound, and deep-muscle massage.





Section #5: Origins of Pain

Pain can be a complex problem.

There are many possible causes of headaches and neck and shoulder pain — disc degeneration, arthritis, tendinitis, repetitive stress disorder and fibromyalgia, to name a few — all of which result in muscle tension and irritation of the affected ligaments and nerves. Whatever the cause, the ultimate result is pain. Gaining the most from your treatment is easier when you understand how and why your body creates pain in the first place.

All the muscles involved in an act of movement will contract and then, ideally, relax again. This is normal muscle function. Problems begin when the muscle contraction is caused by undue stress, the type we often associate with unpleasant or unhealthy conditions: emotional stress, physical trauma, repetitive strain, hormonal imbalance, poor spinal posture, bad diet, or any situation that is uncomfortable for the body. These conditions cause the related muscles to contract and stay contracted, as if the body were in a constant state of alarm. This instinctive muscular reaction is most likely a product of the body's fight or flight reflex — something is wrong and the body is preparing for battle.

Sources of stress over time can manifest into long-term pain.

If the source of stress is sustained or repeated over time, the nerves will tell the muscles to stay contracted. After a period of prolonged muscle contraction, the tensed muscles will not relax even with rest. Without proper treatment to relax it, the muscle will continue to contract and will eventually cause pain, from mild to excruciating.



Without the regular opportunity to relax, contracted muscles then irritate the nerves located beside or inside the muscle fibers, causing local nerve pain. Pressure on a nerve can also cause something known as "referred pain," in which pain travels a nerve pathway from its source the neck, to an affected area of the head or upper body.

The brain is often poor at interpreting the exact location of a pain source when it exists inside the body and instead ascribes it to a convenient nearby location — pain in the heart is interpreted as pain in the shoulder or left arm, and pain in your kidneys can be felt as a terrible burning in your back.





A stiff neck can cause headaches, migraines & much more.

People describe how their migraines keep them up at night, how their repetitive stress injuries won't go away, that their muscles ache as if they were on fire. Most have tried the conventional medicine route and have left with a bottle of pills, still in pain and without any clue as to the actual reason for their condition.

I'm going to suggest a cause that will sound so simple that you may be skeptical of it. The source of almost all migraine headache, neck and shoulder pain is contracted muscles and the inflammation of associated nerves in the neck.

Yes, the neck — the small structure that supports the ten-pound globe of your head and encases the top part of your spine, along with a very complicated system of nerves — is the hub of most of your pain problems.

Nineteen years of treating patients has demonstrated time and again that migraine headache, dizziness, tennis elbow, carpal tunnel syndrome, arthritis of the hands and many other very common maladies have their root cause in contracted muscles in the neck. A stiff neck is more than an annoyance, it is usually the sign that something is wrong and left untreated, and unfortunately, it will only get worse over time.

Your neck acts as the housing for the upper spinal cord and the vertebral column. It also contains the eight sets of nerves that control your head and neck, your diaphragm and the muscles of your shoulders, arms, wrists and hands. In other words, its influence on your body as a whole is *massive*.



When nerves are under constant pressure from compromised muscle tissues they can become chronically irritated and cause pain and stiffness to persist even after the inflammation is gone.

For this reason, the benefits of NSAIDs like Aspirin, ibuprofen (Advil) and naproxen sodium (Aleve) are far more limited than most people believe.





QUICK FACTS ON RISKS OF NSAIDS:

- As with all drugs, there is the potential for an allergic reaction to NSAIDs. Symptoms might include hives, facial swelling, wheezing and skin rash.
- There is the potential for gastrointestinal bleeding (bleeding in the stomach or elsewhere in the digestive tract) associated with all NSAIDs.
- People who have cardiovascular disease—particularly those who recently had a heart attack, cardiac bypass surgery or stroke—are at the highest risk for adverse events.

While they can be an effective part of treatment during the initial stages of injury by aiding in the reduction of swelling, once the body conquers the inflammation the meds act only to mask the pain and do nothing further to assist the body's natural defenses.

In the meantime, the medication takes its toll on your internal organs, like the stomach, liver and kidneys. Over time such medications have actually been shown to produce certain pains they are meant to alleviate, such as headaches. Therefore, the best ways to relieve pain are ones that allow your body's own defenses to take over and heal itself.





Section #6: Pain From Aggravated Nerves

More wear and tear than repair equals injuries.

What many people don't realize is that the nerves that supply power to your muscles also supply the energy and nourishment necessary for healing. If you remove a nerve's connection to a muscle, the muscle will die completely. If you remove or restrict a nerve's innervation to a joint, that joint will become arthritic in only a few weeks.

Imagine throwing this process off-balance by decreasing the level of healing because a particular nerve or set of nerves is not able to completely restore itself, or the muscles it supplies, due to constant pressure and poor circulation. When the wear that is inflicted on the body is greater than what it can naturally heal, you leave yourself prone to problems. It is a simple formula: more wear and tear than repair equals injuries.

Spinal muscle tension

One of the most dramatic syndromes of muscular tension involves a neurological process of the muscles and nerves along the spine called *segmental facilitation*.



Segmental facilitation involves either a violent muscle spasm, similar to he knee-jerk reflex, or a slower but excessive contraction of muscles along the spine.

One of the most trying facts about segmental facilitation is that once the spasm occurs it can become increasingly worse even if you experience no additional stress or stimulation.





Section #7: Why Pain Persists

Pain will often persist even without any ongoing stimulus.

One of the most trying facts about segmental facilitation is that once the spasm occurs it can become increasingly worse even if you experience no additional stress or stimulation.

Muscle tension along the spine places pressure on the nerves located beside and/or inside the contracted muscle fibers. These nerves then become irritated and hyperactive, causing a reflex reaction within the spinal cord that in turn causes hyperactivity in the motor nerves that control muscle contraction.

When the motor nerves are overexcited, they cause the already-tense muscles to contract even more, creating a terrible, agonizing cycle. Over time, this chain reaction will produce more muscle tension, pain and stiffness, so that the spasm reaction is triggered by even small amounts of stress — whether emotional or physical.

CASE STUDY: DEBRA'S STIFF NECK & SEVERE MIGRAINES.

Recently, I met a forty-two year-old woman named Debra who described her experience with this syndrome. She noted that lately she'd been waking up every morning with a stiff neck and severe migraine headaches. During our interview, I discovered that she'd had no history of having migraine headaches as a child, but had begun suffering from them only about three years before.

They had first been mild and infrequent but had gotten progressively worse to the point where they were diminishing her quality of life. Her general health was excellent, though she reported feeling fatigued even with adequate amounts of sleep. She also noted that about five years before our meeting her car had been rear-ended.

She did not sustain any major injuries but her neck felt tender and tight for a couple of months and she'd had some headaches and mild dizziness for a few weeks afterward. She went to her doctor, who examined her head and neck, ordered X-rays and prescribed anti-inflammatory medication and muscle relaxants.

She took the meds for a few weeks, felt better, and presumed that her neck problem was resolved. From time to time, however, she noticed that her neck still felt tense and that she suffered from occasional headaches. When discussing these concerns with her doctor, they both agreed that it was related to her stressful job as a legal assistant.





The fact, however, was that Debra, like countless other patients I've treated, was not diagnosed or treated properly. Complete and correct treatment would have eliminated her recurrent headaches, fatigue and stiff neck, even during times when she experienced emotional stress. Debra's neck muscles were tense and inflamed from the minor whiplash injury she sustained from the car accident. The meds that her doctor prescribed relieved the symptoms, but did not address her abnormally contracted neck muscles and therefore lent nothing to curing the problem.

Over time, her muscle tension created a state of adaptation to a new norm, the condition of being tense, and her muscles fought to maintain their contracted state even during rest. Once this process of segmental facilitation was underway, every source of stress — whether physical or emotional — increased Debra's level of the muscular contraction. Eventually the muscle tension increased to a level where the nerves in her upper neck became so irritated that they caused her to experience headaches.

As the muscle tension in her neck increased, so did the frequency, duration and severity of her migraines. Debra's headaches occurred more frequently in the mornings — after a night of motionless sleep allowed her neck muscles to stiffen even more.

If her doctor had recognized and diagnosed her as having segmental facilitation, he probably would have prescribed a course of treatment involving deep tissue massage and functionrestoring exercises, and included an effective at-home treatment program utilizing transcutaneous electrical nerve stimulation, or TENS. Learn more about devices like this here. Had she received the proper diagnosis and treatment, I am convinced that her recovery would have been faster, more complete and shown a great reduction in her immediate and long-term suffering.

Not only do chronically contracted muscles remain stiff for days, weeks or even months, they can produce any or all of the following symptoms:

Muscular Aches and Pains

Muscles that are clenched from overuse are the most common cause of aches and pain. These contracted muscles release noxious chemicals that irritate surrounding tissues and create an unwelcome burning sensation. "Overuse injuries" run the entire gamut of repetitive stress disorders, any of which can leave the associated muscles irritated and inflamed even though no obvious injury occurred. Examples of overuse injuries include bursitis, tendinitis (including carpal tunnel), shin splints and stress fractures.





Joint Stiffness and Pain



Sore, stiff joints can be caused by injuries and arthritis, but more commonly they are the result of supporting muscles tightening due to lack of movement. Tight muscles prevent the joint from achieving its full range of motion, interfere with proper joint lubrication and nourishment, and cause joint pain and degeneration. A joint that doesn't move properly will degenerate rapidly; even a young person can develop degenerative joint disease or osteoarthritis from long periods of inactivity.

Poor Circulation

The rate of blood flow through veins and arteries depends upon the diameter of the blood vessel, blood pressure and the pressure exerted from outside the blood vessel wall. Tight muscles around a blood vessel will restrict flow and encourage an accumulation within the muscles of noxious chemicals created by the metabolism of lactic acid.

The buildup of these waste chemicals increases tension and pain. Poor circulation also decreases the oxygen to muscles and this deprivation in turn can generate spontaneous muscular spasm. When the blood flow remains constricted by action of the autonomic nerves, the abnormal constriction of the muscle tissue persists, sometimes for agonizingly long periods. Muscles that are deprived of oxygen are not only prone to spasm and pain-producing waste storage, they create trigger points — spots that are painful when pressed or manipulated.

Touch the rear sides of your neck from the base of your skull down to your upper back. Are there tender spots? Now trace your fingers outward to where your neck meets your shoulder. Do you feel knots that hurt when you apply pressure? These are trigger points, areas where oxygen absorption is limited due to constant tension. They may not always cause noticeable pain, but the goal is to get rid of any tenderness altogether by increasing circulation and oxygen to those areas.

Nerve Pain and Numbness

Nerves that are irritated or pinched can become numb, tingly or painful along the nerve branches. Tight muscles along the spine frequently irritate nerves, and pinched nerves in the neck can cause headaches, neck pain, shoulder pain and radiating aches down the arms into the hands. A nerve under constant pressure from conditions such as a herniated disc or multiple sclerosis can lose its conductivity.





Section #8: Holistic Approach to Pain Management

You must look at your mind and body as harmonious entities.

Regardless of whether your pain stems from injury, disease or emotional tension, it is imperative to look at your body and mind as harmonious entities. Your physical condition works on your emotional well-being and vice-versa; the two are always interconnected.

This connection is reflected in what I call, the *Four Pillars of Health*:

1. The Physical Pillar

The Physical Pillar is your basic anatomy — your skeletal and muscular system. How well is your spine aligned? How well are your joints moving? Are your muscles the appropriate strength and length? This pillar is concerned with minimizing the physical stress on your body.

2. The Neuro-energetic Pillar

The neuro-energetic pillar looks after how well your nervous system is flowing, how efficiently your energy travels through your body.

3. The Chemical Pillar

The third pillar is the chemical and nutritional aspect. How well are you eating? Do your exercise and sleep patterns support your brain's own chemical balance? How are you eliminating? What types of toxins are you exposed to? All will have an impact on your physical and emotional health.

4. The Psycho-emotional Pillar

As the name would indicate, pillar four is your spiritual side. How much stress are you under? What kinds of emotional trauma do you face now or have you endured in the past? Your attitude toward yourself and your health has a powerful influence on your ability to heal and feel good.

The "Common-Sense" Approach to pain management.

The four pillars above are the foundation of my integrated *Common-Sense Approach* to your recovery and continued wellness. This approach includes the following:

Contemplating all four pillars is what I refer to "looking at the whole body." When I examine patients it is my primary goal to determine what they need — what they can do to help themselves and what I can do as a health professional to assist their recovery. Obviously, the





more tools and facts that are at my disposal, the higher the chance that I'll be able to meet a patient's specific needs and provide faster and more complete therapy.

The same is true of your healthcare practitioner or team of providers: the more in tune you are with your body and your feelings, the better you'll be able to assist in your own treatment. Not only can you lend a hand in your own recovery but you'll also be able to use your understanding during your care at home and during your normal routines.

These four pillars are the foundation of my integrated *Common-Sense Approach* to your recovery and continued wellness. This approach includes the following:

- Discovering the root cause of your ailment.
- Treatment that zeroes in on the cause(s).
- A routine of specialized, easy exercises.
- Proper rest and correct ergonomics to maximize productivity while reducing fatigue, discomfort and wear and tear on the body.



Combining clinical treatment with at-home care provides faster and more complete relief than passive involvement, where you rely solely on your healthcare provider to determine the cause and try different "shot in the dark" treatments until you feel better or give up.

Equipping yourself with the knowledge to aid in your recovery is one of the most important elements to the success of your care. Without

active knowledge and participation in your own care, the healing process may start to drag and prolong your pain. When it comes to your own body, it is crucial to never stop educating yourself. Pain is never easy to deal with, but actively being apart of the solution can make the difference between a lifetime full of dreadful appointments and a revealing, self-fulfilling process.





Now, time to get back to living pain free.

Thank you for reading. I sincerely hope to have helped on your road back toward living pain free.

As you will have learned by now, living pain free is a journey not easily completed with a single treatment or even necessarily within a limited time period. I would encourage you to follow us at all of the below channels as we publish ongoing information about living pain free:

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