



What you need to know about knee pain and How to Avoid Costly Medications and Surgery

"It is my mission to empower patients with knowledge and care so that they can enjoy a higher quality of life." – Dr. Milo Wilcox

Do you get knee pain when you walk? Does it hurt your knees to go down or upstairs? Have you been told that the cartilage in your knees is gone and that you have bone on bone? Does your knee pain limit your lifestyle?

WE UNDERSTAND your pain, fear, frustration, disappointment, and disillusionment. You have suffered enough already. We know that some people reading this article are fearful of painful treatments that do not work. Perhaps you have already experienced painful treatments by other methods.

The information in this report is for those who have mild knee aches to severe knee pain and have been told they have bone on bone. It is also for those who've already have had knee surgery and for those who have had a knee joint replacement.

Following is an article from The New England Journal of Medicine concerning knee surgery:

"Over 600,000 patients with osteoarthritis of the knee undergo arthroscopic surgery annually...These surgeries—the most common orthopedic surgeries—have been shown to relieve pain in approximately half of the patients, yet the basis for pain relief is unclear. The authors of this study evaluated the effectiveness of arthroscopic knee surgery compared to a placebo...

Patients were followed for two years and scored on multiple scales for pain and function... Results: Neither surgery group reported less pain or increased functioning compared to the placebo group at any of the seven follow ups...Also surgery groups did not experience greater improvements in function at any point, compared to the placebo group.”

Conclusion: “These results indicate that arthroscopic knee surgery appears to provide no clinical benefits.” (The preceding quote is from the *Chiropractic Research Review*, fall 2002, Vol. 5 No 9, page 7, summarizing the article.) In summary, the authors of the original article write, “If the efficacy of arthroscopic lavage or debridement in patients with osteoarthritis of the knee is no greater than that of the placebo surgery, the billions of dollars spent on such procedures annually might be put to better use.”

It is only reasonable to think that most of the 600,000 knee surgery patients sincerely believed that the surgery would help them. It is an OUTRAGE to know hundreds of thousands of patients are getting surgeries every year that are no more effective than a placebo...yet the basis for pain relief is unclear.” *The New England Journal of Medicine*, July 11, 2002, Volume 347, pages 81-88

FAILED SURGERIES What is even more astounding to me is that some of these failed surgery victims are so deceived and opinionated that they scoff at conservative alternative care and will not even be open-minded enough to investigate the benefits that are available. I congratulate you for reading this report. Perhaps you are open-minded to keep looking for help for yourself or someone you know.

FLAT FEET AND FALLEN ARCHES It has been my clinical experience that patients who still have pain after surgery or develop knee pain months or years later can usually benefit from knee adjustments. About half of the patients who have had knee replacement surgery and still have pain can get relief with gentle instrument adjusting. It has been my experience that patients with knee replacements usually have flat feet or fallen arches. When the arch drops, the knee rotates with every step, causing excessive motion and wearing of the knee joint.

What is amazing, not one of my patients with knee replacements were aware that their fallen arches contributed to their knee problems. (Fallen arches can also cause excessive

rotation of the hip joints resulting in joint decay and arthritis of the hips.) Most people with fallen arches and knee pains will also have painful or tender hip joints. The hip joints are painful to touch with pressure and they are achy or painful when you lay on your side when sleeping or get sore and painful with long walks, resulting in trochanteric bursitis. Why let the bursitis develop into degenerative arthritis, when conservative care can resolve the problem?

One of my patients had joint replacement surgery for both of her knees and came to me with a lot of pain in her knees. After a careful examination, I demonstrated to her that she had fallen arches in her feet. She now wears custom-made, soft leather, orthotics to stabilize her feet. As long as she wears the orthotics, she does not have any pain in her knees. She now believes that if she had been prescribed proper orthotics when her knee pains started many years ago, she could have avoided the knee replacement surgery.

MOST WHO EXPERIENCE KNEE PAIN HAVE JOINT MISALIGNMENTS It has been my experience with knee pain patients that the doctors and therapists who have been treating their knees do not know how to detect painful joint misalignments. They certainly don't know how to properly adjust or manipulate the knees to reduce the painful misalignments and restore normal pain-free function. Consequentially, every day in the United States, an average of about 1640 knee surgeries are performed. Even after knee surgery, a patient can still benefit from chiropractic care.

APPROPRIATE ADJUSTMENT OF THE KNEES PRODUCES IMMEDIATE PAIN RELIEF For example, if the head of the tibia (the big bone just below the knee cap) is misaligned posterior it will be difficult or painful to walk downstairs. The knee may feel stiff. Sometimes only one treatment is needed to correct this problem. There are several variables that determine the amount of care needed.

MISALIGNMENT OF THE TIBIA The tibia is your shinbone. How does the tibia misalign posterior? It can happen from falling on one or both knees; It can be caused from crawling or working on your hands and knees; A mechanic kneeling on concrete to work on brakes or changing a tire; a housewife cleaning baseboards; a gardener kneeling to work in the flower garden; one or more sports injuries that push the tibia backwards; kneeling to pray without a kneeling pad, or hitting your knees in a motor vehicle accident can cause the tibia to misalign. The pain may be instant, or it may develop over a period of time and repeated trauma. Joint decay or osteoarthritis of the knee is certain over time if the misalignment is not corrected.

MISALIGNMENT OF THE FIBULA To locate the bone, reach down to the bottom of your kneecap, move your fingers to the outside of your knee, and feel a bump. This is the head of the fibula. The pain can range from achy soreness to touch to severe pain when stressed from overuse while misaligned.

MISALIGNMENT OF THE PATELLA (also known as the knee cap) Sometime the patella will misalign sideways or up from injury or overuse of the front thigh muscle (the quadriceps). The muscle can go into a mild or worse spasm and pull the kneecap out of alignment of the patellar groove. When adjusted, the relief in the knee is instant and the anterior thigh muscle will feel lighter and looser.

THE MEDIAL AND LATERAL MENISCUS of the knees can pop up in the joint and cause knee pain. When misaligned, the meniscus can more easily develop a tear, which may or may not need surgery to repair.

MISALIGNMENT OF THE L-3 VERTEBRA in the low back causes irritation to the nerve supply in the knees. It is my experience in treating hundreds of knees that the L-3 vertebra is usually involved. In some cases of knee pain, all that is needed is an adjustment of the vertebra to stop the knee pain and restore proper knee function.

THERE ARE OTHER KNEE MISALIGNMENTS, but the above examples demonstrate several common causes of knee pain, soreness, and stiffness. The longer a person walks on an injured knee, the more likely they are to develop more and more problems as the body

adapts to protect the knee from irritation and further injury. If the knee is not properly adjusted or realigned, the joints in the knee can decay and deteriorate causing osteoarthritis.

KNEE PAIN CAN BE AVOIDED AND CORRECTED with proper adjustments, nutritional supplementation, and in some cases, corrective orthotics to stabilize the arches of the feet, expensive, surgery, painful injections or drugs with dangerous side effects can often be avoided.

CONSERVATIVE, AFFORDABLE CARE If you or someone you know has knee pains why not try conservative affordable gentle care for relief of pain and restoration of knee function? Unless you have been examined and treated for some or all of the above misalignments in your knees, feet, and low back, you will not know if conservative care can help you. You can always consider expensive medication, painful injections, and surgery if the conservative care does not provide the desired results, but I can confidently tell you that surgery will not correct misalignments.

Please understand, I am not opposed to any necessary surgery, especially for severe injuries, trauma, torn ligaments, etc. However, conservative alternative care should at least be considered before routine knee surgery that is so frequently done for chronic pain.

DO NOT BELIEVE THE MYTH THAT YOU HAVE TO SUFFER WITH PAIN If any doctor tells you that he or she cannot help you, believe the doctor and find another doctor who is getting results. If you keep doing in the future what you have done in the past, you will get the same results. Try something different. Try conservative care.

YOU CAN BENEFIT FROM NEW TECHNOLOGY

We offer free education consultations and demonstrations of our computerized Pulstar system. You can see and learn how the Pulstar treats and adjusts painful knee joints and muscles. (The free demo visit does not include treatment.)