

# **BACK PAIN SOLUTIONS**

## **RESEARCH PROJECT**

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### **INTRODUCTION**

According to the National Institutes of Health (NIH), back pain is the second most common neurological disorder in the United States, headaches being number one. However back pain is the most common cause of job related disability and missed work and Americans spend over \$50 billion each year on back related problems. More than 65 million Americans suffer from lower back pain each year and back aches are the second most common reason for doctor visits. Fifty percent of patients who suffer a back problem will have another experience within one year. Fifty percent of all Americans report having some back symptoms within any given year and some experts estimate that 80% of the population will experience a back related problem within their lifetime. Back pain and back related problems therefore become one of the single most costly healthcare issues for society, and the most costly component of employer's health coverage. In addition the indirect costs and loss of productivity on the workforce is incalculable, with approximately 175 million workdays being lost each year.

### **THE BACK AND BACK PAIN**

The back is a uniquely specialized area of the body consisting of the hard spine which supports the body as well as providing a conduit for the spinal nerves that provide sensory, motor, and autonomic function to all below the head structures; the soft discs that insulate and allow for lubricated movement of the vertebrae; and the muscles that support, stabilize, and provide movement of the spinal area. Pain is a very important biological signaling system that alerts us to a problem and causes us to react through avoidance and restriction of activity for our protection and repair. Pain can occur through the direct irritation or injury to a nerve root near the spine, fluid swelling and inflammation of any surrounding structure including lymphatic stagnation, or muscle strain or injury. Pain can either be acute, short term pain lasting a few days to a few weeks, usually brought on by trauma, accident, injury, or excessive utilization of muscle groups; or chronic, long term pain which persists after the perceived, identified causation is treated or persists longer than the expected recovery time with no observable, identifiable explanation.

### **CURRENT MODEL OF CARE**

Standard treatment protocols consist of:

Level One Treatment Options include pain relief through medications and rest from physical activity. While pain relief often occurs within a few days, lingering low level discomfort and altered functional ability persist.

Level Two Treatment Options are usually sought when the pain or dysfunction persists longer than a few days and the patient seeks professional help. Examination, x-rays, MRI, and other diagnostic tests are often performed to help identify the cause of the persistent pain. Stronger prescription pain relief, muscle relaxants, physical therapy, chiropractic, acupuncture and other mainstream and alternative therapeutic modalities are utilized in an attempt to get rid of the pain. In most cases these continue to escalate the costs while merely masking the pain, treating the symptoms, and helping the patient tolerate the pain and dysfunction.

Level Three Treatment Options usually are utilized when the pain or dysfunction persists longer than four weeks in spite of all the appropriate care and therapy and the patient is incapable or unwilling to live with the persistent limitations to their quality of life. Unable to identify or solve the underlying causation and provide adequate healing, more aggressive tests and treatment options are recommended including long term therapy, continued medications, and surgeries. The consequences of these options beyond just the direct costs are that they may alter normal function forever, set the pathway in motion for other breakdown and disease, and may lead to permanent disability.

## **RESEARCH REQUIREMENTS**

Due to the ever escalating, massive costs, both in direct expense and lost productivity, on American business and their health care plans attributed to back pain and injury, a pilot study was conducted by Becker Health Solutions in Minnesota. The pilot study involved taking ten patients with chronic back pain and dysfunction that were recommended back surgery as their final treatment option and treat each with a customized, novel program to eliminate the pain, regenerate the degenerative disease process, and normalize back function. After one year all ten are pain free with nearly 90% normal function without drugs, surgery or ongoing physical therapy. The total costs for the year averaged about \$3000, a very small fraction of what the conventional treatment options would involve and with far superior health outcomes. What is now needed is to reproduce this pilot study at multi-site locations with a sample size of 100 patients. If this is as successful as anticipated, the program could be incorporated into corporation wellness programs saving vast amounts of direct and indirect employee expenses associated with the ever rising costs of corporate health care. This study would be conducted as a formal research project to be published and offered to any corporation interested in curbing health care expenditure as well as providing life changing, quality of life enhancing benefits to their employees. The timing for this study is critical as corporate health expenses are spiraling out of control with many employers being forced to scale back or eliminate on their benefit packages. With back related expense comprising the single largest of these expenses this research may provide a cost effective alternative to drugs, surgery, and poor health outcomes. Unfortunately almost all research being funded today is drug based provided by the pharmaceutical industry. Private individuals, corporations, and foundations are urgently needed to explore other solutions. We and the health of corporate America and their employees are counting on your vision, your desire to effect positive change for society, and your support.

## **RESEARCH TEAM**

Dr. Richard T. Hansen, D.M.D – Study Director – Dr. Hansen has helped pioneer many advanced techniques in healthcare including the clinical trials for the FDA clearance for hard tissue applications for lasers in dentistry. Dr. Hansen is the director of research at the Advanced Health Research Institute and has been on faculty at UCLA School of Dentistry.

Dr. Kurt Woeller, D.O. - is an osteopathic physician specializing in natural medicine and is medical director for Biohealth Diagnostics. Dr. Woeller has an extensive as a researcher and educator the many alternative and complementary therapies available to treat and prevent disease.

Dr. Daniel Bivens, D.C. – a graduate of Life Chiropractic College West, where he continued to perform much clinical research and is a frequent lecturer on health issues, clinical nutrition, and natural medicine. He is a physician consultant for Biohealth Diagnostics and is a Chiropractic continuing education provider for the State of California.

Dr. Jonathan Beck, D.C. – Dr. Beck has been the director of corporate health for Becker Furniture world, Courtyard Health, and the Becker Health Foundation in Minneapolis, Minnesota. With over 400 employees to keep healthy Becker has been a model of cost effective corporate wellness.

## **BUDGET**

Our goal is to raise \$495,000 to fund the costs of patient care, follow up, and supervision of this clinical outcome research project. The clinical care for each patient is anticipated to be about \$3000 and should be completed within a one year period of time. Subsequent treatment has consisted of follow up and monitoring for an additional three years at an anticipated cost of about \$250 per patient per year. We are hoping to treat about 25 patients per year in the research program.

Please see the “How You Can Help” section to help with this study  
**Your help is urgently needed!!**