



Effectiveness Versus Efficacy: More Than a Debate Over Language

As the physical therapy profession continues the paradigm shift toward evidencebased practice, it becomes increasingly important for therapists to base clinical decisions on the best available evidence. Defining the best available evidence, however, may not be as straightforward as we assume, and will inevitably depend in part upon the perspective and values of the individual making the judgment. To some, the best evidence may be viewed as research that minimizes bias to the greatest extent possible, while others may prioritize research that is deemed most pertinent to clinical practice. The evidence most highly valued and ultimately judged to be the best may

differ based on which perspective predominates. One issue that highlights the importance of perspective in judging the evidence is the difference between efficacy and effectiveness approaches to research. These terms are frequently assumed to be synonyms and are often used incorrectly in the literature. There is actually a meaningful distinction between efficacy and effectiveness approaches to research. The distinction is not merely a pedantic concern within the lexicon of researchers, but impacts the nature of the results disseminated by a study, how the results may be applied to clinical practice, and finally how the results are

Continued on page 4

X-Ray Debate Heats Back Up

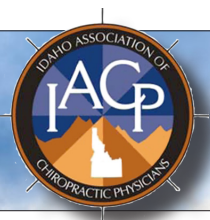
Three researchers have been at the forefront of the debate on whether spine radiography has clinical utility in chiropractic technique and practice. Over the years Dr. Deed Harrison, Dr. Joe Betz and Dr. Paul Oakley have written critical analyses, literature reviews and studies that rebut the position that X-ray use in chiropractic is unnecessary or even dangerous. The debate has recently re-ignited after a 2020 paper published in the journal *Chiropractic and Manual Therapies* titled *The clinical utility of routine spinal radiographs by chiropractors: a rapid review of the literature*, by Melissa Corso, Carol Cancelliere, Pierre Côté.

Dr. Harrison is a Life West graduate ('96), president of Chiropractic Biophysics and prolific researcher. Dr. Betz graduated from Life University ('01) and heads the research committee for the ICA. Dr. Oakley is a

Palmer College graduate ('03) and a PhD candidate in Kinesiology and Health Sciences at York University. Together they have provided perspective and analysis on this issue that is benefiting the profession as a whole, ensuring that all sides of the debate are covered and the outcomes are solidly based on the entire spectrum of published research and facts.

In the mid 1990s the debate began in the scientific literature with Dr. Don Harrison (Dr. Deed's father) on one side and researchers including Dr. Mitch Haas from Western States Chiropractic College and Dr. John Taylor from New York Chiropractic College on the other. These past exchanges in journals and at scientific conferences culminated in 2005 with the publication of the Council on Chiropractic Guidelines and Practice Parameters

Continued on page 6



IACP

The mission of the Idaho Association of Chiropractic Physicians (IACP) is to act as the unified voice, leader and stalwart supporter of the individual licensed doctors of chiropractic and supporting associates who provide exceptional health care and wellness to the patients and communities of Idaho. In supporting our Idaho chiropractic physicians, the IACP will work diligently to protect, enhance and build opportunities for the chiropractic industry and increase public access to chiropractic care.

2022-2023 IACP Board of Directors — Officers



Dr. Jeremai Hafer
President



Dr. Thomas Bench
Vice President



Dr. Scott Crawford
Treasurer



Dr. John Maltby II
Secretary

2022-2023 IACP Directors



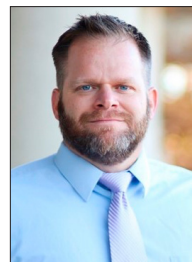
Dr. Jennifer Wells
District 1



Dr. Michael Henze
District 2



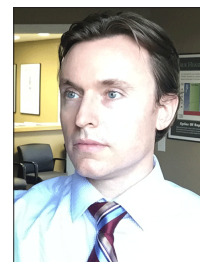
Dr. Kimball Arritt
District 3



Dr. George Fiegel
District 4



Dr. Howard "Rusty"
Arrington
District 5



Dr. Erik Thompson
District 6



Dr. Grayson Blom
District 7

Idaho Association of Chiropractic Physicians

P.O. Box 8611, Boise, ID 83707

Phone: (208) 424-8344 • FAX (888) 399-5459

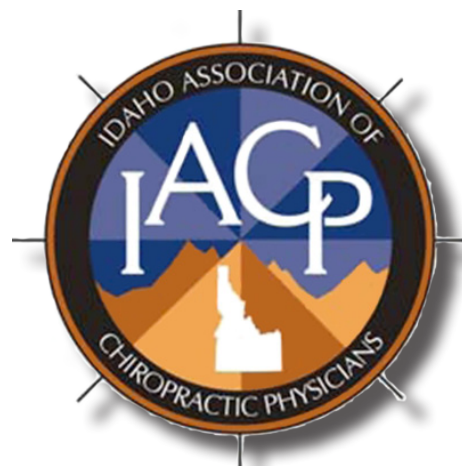
<https://iacp.wildapricot.org> • iacpcontact@gmail.com

For advertising info, email C&S Publishing at: CandSpublishing@gmail.com

In This Issue

Effectiveness versus Efficacy: More Than a Debate over Language (Continued)	Page 4
X-Ray Debate Heats Back Up (Continued)	Page 6
Avoiding soft tissue injuries	Page 8
Things most people still get wrong about sleep, according to an expert	Page 10
ChiroHealth USA: A Life of Service	Page 12
IACP Membership Application	Page 15
Chiropractic News	Page 16
Chiropractic College News	Page 18
The IACP Marketplace: Featured Businesses & Suppliers	Page 20
Classified Ads	Page 21
Office poster notice	Page 22
This month's poster: Walking touted as "wonder drug"	Page 23
IACP News Display Advertising Rates and Sizes	Page 24

This table of contents is linked for your convenience. Just click on the page you want.



Effectiveness Versus Efficacy: More Than a Debate Over Language

Continued from front page

judged by those who seek to evaluate the evidence. [5] Understanding the contrast between effectiveness and efficacy has important and very practical implications for those who seek to evaluate and apply research evidence to clinical practice.

Studies using an efficacy approach are designed to investigate the benefits of an intervention under ideal and highly controlled conditions. While this approach has many methodological advantages, efficacy studies frequently entail substantial deviations from clinical practice in the study design, including the elimination of treatment preferences and multimodal treatment programs, control of the skill levels of the clinicians delivering the intervention, and restrictive control over the study sample. [3, 13] The preferred design for efficacy studies is the randomized controlled trial, frequently employing a no-treatment or placebo group as a comparison in order to isolate the effects of 1 particular intervention. [7] Studies using an efficacy approach have high internal validity and typically score highly on scales designed by researchers to evaluate the quality of clinical trials. However, the generalizability of the results of efficacy studies to the typical practice setting has been questioned. [2] In clinical practice, therapists tend to use many different interventions within a comprehensive treatment program and, therefore, studies investigating the effects of an isolated treatment may appear less useful. In addition, clinical decision making typically entails choices between competing treatment options and, therefore, studies comparing an intervention to an alternative of no intervention (or a placebo intervention) may not seem as directly applicable to the process.

An example of a study using an efficacy approach is a randomized trial by Hides et al. [6] This study examined the effects of exercise on patients with low back pain (LBP). The study used a highly standardized exercise program specifically designed to isolate and strengthen the multifidus muscle. The patient population was restricted to patients with a first episode of unilateral LBP less than 3 weeks in duration. The exercise program was compared to a control group that received no

intervention other than medication and advice to remain active. The results of the study favored the group receiving the exercises. The study design permits the conclusion that training the multifidus is beneficial for patients with LBP (versus doing no exercise), however, the generalizability of the results might be questionable. Relatively few patients seen by physical therapists will be experiencing a first episode of LBP that is less than 3 weeks in duration. Furthermore, therapists may not be as highly trained as the authors of the study in the particular exercise techniques used. Finally, it cannot be determined if the multifidus training program would be better than an alternative exercise program. A physical therapist may choose to utilize this treatment based on the results of the study by Hides et al, [6] however, for all these reasons, the favorable results found in the study may not generalize to the therapist's own practice

Studies using an effectiveness or pragmatic approach seek to examine the outcomes of interventions under circumstances that more closely approximate the real world, employing less standardized, more multimodal treatment protocols, more heterogeneous patient samples, and delivery of the interventions in routine clinical settings. [13] Effectiveness studies may also use a randomized trial design, however, the new treatment being studied is typically compared to treatment using the standard of practice for the patient population being studied. [1] Studies using an effectiveness approach tend to sacrifice some degree of internal validity, but have high external validity and are viewed as more applicable to everyday clinical practice. [2]

The distinction between efficacy and effectiveness studies should be viewed as a spectrum, not a strict dichotomy. Many studies have characteristics of both, however, studies of treatment outcomes can generally be described as taking either an efficacy or effectiveness approach. Efficacy studies, with their more stringent control over treatment conditions, tend to be viewed more favorably by researchers and have generally been judged more favorably in the review criteria established by researchers to grade the evidence. For example, many systematic reviews and evidence-

based clinical practice guidelines (EBCPG) will include only randomized controlled trials, and some will only include studies with a comparison group that receives no treatment or a placebo intervention. [4, 8, 10]

The exclusion of effectiveness studies can impact the results and recommendations of a systematic review or EBCPG. For example, the Philadelphia Panel recently developed EBCPG for a number of interventions commonly used by physical therapists for the management of low back, neck, knee, and shoulder pain. The Panel reported that a limitation of previously developed EBCPG was the inclusion of studies that did not use a no-treatment or placebo comparison group. [10] The Panel therefore limited their review to studies with a comparison group that received “placebo, no treatment, or one of the interventions of interest.” [10]

The impact of excluding trials that utilized more of an effectiveness approach can be illustrated in the Panel’s guidelines for therapeutic exercise in the management of chronic LBP. [11] The Panel excluded a randomized trial by O’Sullivan et al [9] that compared a program of stabilizing exercises with a comparison group that received treatment as usual, including heat, ultrasound, massage, and a general exercise program. The study was excluded because the comparison group did not meet the Panel’s inclusion criteria. The results of the effectiveness study by O’Sullivan et al [9] were quite favorable to the group receiving the stabilization training in both the short and long term. From the perspective of the researchers constructing the EBCPG, the comparison group used in the study was inappropriate and threatened the internal validity of the research. From a clinical perspective, however, the use of a usual-care comparison group may have more

meaning than a no-treatment group. Demonstrating that a new intervention is superior to a standard treatment may be more likely to change practice behavior than showing that a new intervention is superior to no treatment at all.

Other systematic reviews have included the study by O’Sullivan et al [9] and graded it as a high-quality study. [12] Without the inclusion of this study, the Panel’s EBCPG recommended “stretching, strengthening, and mobility exercises” [10] for patients with chronic LBP. While these recommendations are useful and supportive of physical therapy interventions for patients with chronic LBP, it appears that the Panel may have missed an opportunity to provide more specific guidelines to therapists, such as the specific stabilizing program used by O’Sullivan et al, by excluding studies using an effectiveness approach.

Physical therapists seeking to practice in an evidence-based manner need to recognize that effectiveness and efficacy are not interchangeable terms, but have precise meanings as they apply to research. The distinction between these terms has practical implications when determining how evidence is judged. Currently, the bias leans in favor of studies using an efficacy approach, however, this may be changing in many disciplines. The clinical applicability of studies using an effectiveness approach is beginning to be considered more favorably by some who construct evidence-based guidelines. We believe this trend should continue, and is likely to improve the generalizability of guidelines and ultimately improve outcomes of everyday clinical practice.

This story is from Chiro.org and the original article can be [seen here](#).



X-Ray Debate Heats Back Up

Continued from front page

(CCGPP) series of “Guidelines” (now re-branded as the Clinical Compass). Although the profession largely refuted the validity of these guidelines, they ultimately were used by many in the insurance managed care industry. The diagnostic imaging guidelines adopted by the CCGPP/Clinical Compass were prepared by Dr. André Bussi eres, professor at McGill University and Trois-Rivi eres University college of chiropractic. They included no studies on subluxation assessment and technique nor patient outcomes regarding X-ray. Volumes of studies were ultimately ignored or excluded in their analysis of the literature. Drs. Don and Deed Harrison, Betz and Oakley responded by beginning work on a counter-guideline that looked at everything that the CCGPP red flag guidelines were not willing to look at. This project took several years and was finally published in 2009 as the Practicing Chiropractor’s Committee on Radiology Protocols (PCCRP Guidelines). Endorsed by many national and international chiropractic bodies, this document was also accepted for inclusion in the National Guideline Clearinghouse and included around 1200 research citations.

While the guideline debate was raging, the attacks in the peer-reviewed literature continued with Drs. Sanne Toftgaard Christensen and Jan Hartvigsen publishing a systematic literature review with the goal of determining whether sagittal spinal curves are associated with health in epidemiological studies. This study was published in the Journal of Manipulative & Physiological Therapeutics in 2008. This review found that the entire sagittal plane of the spine is irrelevant and meaningless to patient outcomes. Again, Drs. Harrison, Betz and Oakley teamed up to write the rebuttal. JMPT would not accept the formal critiques and the team ended up writing a major review of the Christensen and Hartvigsen paper that was published in the Annals of Vertebral Subluxation Research, Volume 2009. They found that the authors had overlooked the majority of the studies specific to their research question including seventy-four studies that were left out of their literature review. Analysis of the data provided by the authors in these missed studies combined with the studies cited in the literature review showed that 78% of the total studies found a positive

association between sagittal plane curves/posture and health disorders. Drs. Harrison, Betz and Oakley remain perplexed how Drs. Christensen and Hartvigsen could have missed nearly all of the studies showing a positive correlation between sagittal spine alignment and various health parameters, including pain.

When asked by Dr. Ron Oberstein, President of Life West, in his Leadership Lines series of webcasts, why the gap is so wide in the research, Dr. Oakley pointed out that many of the PhD/DC researchers and writers use a very academic lens and seldom if ever have been in practice. Their grasp of the practice of chiropractic was limited by this and it showed in the research outcomes. In the same interview Dr. Betz stated he felt that these researchers were trying to do what is best for the profession, but the outcomes were contrary to what has been seen in practice for over 100 years. They were trying to pigeon-hole chiropractic into a more pain-centric model of care and did not focus on the impact the spine had on overall health. Dr. Harrison commented that an agenda to make X-ray look unscientific is a flawed process and very bad for the profession.

More recently, the X-ray issue took off again in 2018 with the publication in the journal Chiropractic and Manual Therapies of the article titled Current Evidence for Spinal X-ray Use in the Chiropractic Profession. Written largely by researchers from Macquarie University in Sydney Australia, the article generated heated debate at the World Federation of Chiropractic 2018 Conference in Berlin, which resulted in the ACA adopting their often critical and controversial Choosing Wisely statement. As Dr. Harrison stated in the webcast: “then we all know what red flag X-ray is – don’t X-ray patients regularly in your practice, don’t use X-rays for safety, don’t use X-rays to change the spine, don’t ever take post X-rays.” In October 2019 Drs. Harrison and Oakley responded to the Macquarie article in the Annals of Vertebral Subluxation Research with their article titled Selective Usage of Medical Practice Data Misrepresentations and Omission of Conflicting Data to Support the ‘red flag only’ Agenda for Chiropractic Radiography Guidelines.

And then in 2020 the most recent episode of this debate

landed with the publication of the article by Melissa Corso, Carol Cancelliere, Pierre Côté noted above. This was termed a “rapid review of the literature” and was commissioned by the College of Chiropractors of British Columbia (CCBC). In February 2021, the CCBC approved amendments to the Professional Conduct Handbook (PCH) Part 2, Part 15 and Appendix L regarding diagnostic imaging in the practice of chiropractic. The changes allow the use of X-ray “only if the application of X-rays is indicated by a patient history or physical examination that identifies serious pathology or clinical reasons to suspect serious pathology.” In addition, the rules now state: “routine or repeat X-rays used as a regular protocol during the evaluation and diagnosis of patients are not clinically justified.”



It is extremely important to note that the rapid review by Dr. Côté failed to include any research papers published since 2005 and ultimately included only nine articles in their analysis. And once again, the journal that published this research article (Chiropractic and Manual Therapies) refused to publish any letters to the editor from several sources criticizing the methodology and findings of the study. The critical analysis of this research article had to be sent to an outside journal. The critique article was finally published in the journal Dose Response in November 2021 by the ICA Rapid Response Research Review Subcommittee with the title Smoke Screen to Distract From Flawed Science: A Response to Côté et. Over Criticisms to Their Deficient ‘Rapid Review’ on Chiropractic X-Ray Utility. The authors showed dozens of chiropractic studies that were missed according to the Corso article’s own strict inclusion/exclusion criteria, as well as over 100 others that showed definitive clinical utility of X-ray use in the screening, assessment, diagnosis, and follow-up of patients seen in routine chiropractic practice.

It is likely this debate will continue on as provincial and state governments take one side or another as has happened in British Columbia. Critical for these decisions is to ensure the academic and scientific integrity of the research that is being produced. Dr. Harrison, as head of Chiropractic Biophysics and a clinician, sees the largely academic approach of the anti X-ray lobby as unfortunate: “The Côté study did

not look at the thirteen randomized trials that my (Biophysics) group has done that clearly document that X-ray utilization and X-ray based care actually improves patient outcomes across the board.” In the same webcast Dr. Oakley observed that “the big elephant in the room is that X-ray exposure is no longer the cause of cancer it once was attributed to, and in the Côté responses to our letters to the editors of the journal, not once was there any mention of radiation exposure. The arguments were purely academic.” He continued: “The whole rationale of rapid literature review, inappropriate referencing with the WHO guidelines, eliminating valid studies not performed by chiropractors, missed and excluded reliability studies and clinical outcome studies, failure to include upper cervical, full spine, pelvis and leg length equality papers, failure to include studies on anomalies and pathologies that would alter manipulative treatment, failure to define red flags and eliminating valid studies based on bias, and very strong conclusions based on little and conflicting evidence, this all points to anti-imaging bias.”

Of one thing we can be certain: this debate has not ended. As Dr. Oberstein thanked Drs. Deed Harrison, Joe Betz and Paul Oakley for their contributions, he concluded that what was at stake was academic integrity in research and the highest ethics in chiropractic research, to enable the profession to come together around the many techniques that utilize imaging for better patient outcomes.

This story is from LifeWest Chiropractic Magazine. The original article can be [seen here](#).



Avoiding soft tissue injuries

Soft tissue injuries are the bane of any physically active person. They are the most common injuries in sport, can be difficult to heal and often reoccur, according to Sports Medicine Australia. Knowing how to help prevent them is key to staying healthy and active.

Your soft tissues support, connect and surround your bones and internal organs, and include muscles, tendons, ligaments, fat, skin and blood vessels. The most common soft tissue injuries occur in the muscles, tendons and ligaments. Think injuries such as hamstring strains, tennis elbow or ankle sprains. These afflictions often happen while exercising or playing sports, although sometimes they occur from unknown incidents.

Soft tissue injuries are generally traumatic or repetitive. That is, they can occur suddenly -- rolling your ankle when you step off a curb, for example -- or from overuse. While traumatic injuries are the most dramatic, repetitive injuries are more common, said Mike Matthews, a personal trainer in Ocala, Florida, and host of "Muscle for Life," a popular fitness podcast.

With repetitive injuries, small microtraumas develop within the soft tissues as a task is performed repetitively. Constant use of a hammer or screwdriver, grabbing and gripping objects, or bending and twisting in a certain direction are all examples of ways these microtraumas can develop over time.

As the body repairs the area it lays down small amounts of scar tissue to the damaged area. Over time, as the same motion or activity is performed that scar tissue starts to grow and expand and can affect other surrounding soft tissues. So now adhesions develop in and between the tissues making normal range of motion difficult to achieve. The body has to use more energy and effort and eventually the result is pain and dysfunction.

This cycle continues until something interrupts it. Techniques such as soft tissue tools or Active Release Technique are great ways to break the cycle, allowing the soft tissues to return to their normal length and range of motion, and prevent pain and dysfunction long term.

Common acute soft tissue injuries

The three most common acute soft tissue injuries are sprains, strains, and contusions.

A sprain/strain is a tear and/or stretch of a ligament/tendon often caused by a sudden twisting force. This results in pain, edema, inflammation, and oftentimes bruising.

A contusion, also known as a bruise, is caused by direct blunt trauma to a specific area, causing erythema, edema, and discoloration of the skin. The discoloration of the skin is due to bleeding into the tissues.

To prevent a repetitive injury then, you need to take a measured approach to exercise and sports. Nix the weekend warrior approach in which you're inactive all week, then run 15 miles (24 kilometers) on the weekend.

"Moderation is key," said orthopedic physical therapist Scott Cheatham, a professor of kinesiology at California State University, Dominguez Hills.

It's also important to acclimate your body slowly to a given activity. "The only proven way to reduce your risk of repetitive soft tissue injury is to gradually increase your workout volume and intensity over time," Matthews said.

A good rule of thumb: Don't increase your workout volume more than 10% per week. And every four to eight weeks, give your body a rest by significantly reducing the volume and intensity of your workouts. "This 'three steps forward, one step back' approach requires discipline and isn't always fun," Matthews said, "but it's the best way to make your body more resilient and durable."

Cross-training is another good idea, which the American Academy of Orthopaedic Surgeons endorses. Since your body's soft tissues are working in different ways or even resting when you bike versus swim or play tennis, it's an easy preventive measure.

Diet, stress, sleep may increase risk, too

Avoiding soft tissue injuries isn't necessarily all about training, however. Research suggests major changes in your

environment may affect your risk of injury, too, Cheatham said, such as poor nutrition, stress and lack of sleep. Cheatham is also a member of the National Academy of Sports Medicine Scientific Advisory Board.

If you get less than seven hours of sleep at night for more than two weeks, your risk of musculoskeletal injury rises 1.7 times, found a 2021 study published in the journal *Current Sports Medicine Reports*. So eat well, get plenty of sleep and perhaps skip tough workouts when your stress levels are high.

And what about stretching? Stretching, warm-ups, a post-workout meal and other practices have long been touted to help avoid injury, yet there is no evidence to support these moves, Matthews said. Still, developing a strong core is always helpful, said physical therapist Aime Maranan, owner of Skillz Physical Therapy in Evanston, Illinois.

"If the muscles in your core aren't strong enough to withstand hours of training, their strength will go down, then the stability of the spine will go down, and then your nerves and soft tissues will be irritated," she said. "It's a domino effect."

Core exercises such as the plank are good, she said, or holding the tabletop position, where you lie on your back with your hips and knees at a 90-degree angle. The quadruped is valuable, too. This exercise involves getting onto your hands and knees, contracting your core, then alternating an extension of your right arm and left leg with an extension of your left arm and right leg. Yet these exercises have to be performed properly, or ironically, they could cause a soft tissue injury. So consult with a professional before doing them on your own to ensure proper form. This could be your physical therapist, chiropractor, personal trainer or fitness instructor.

Soft tissue injuries involve damage to muscles, ligaments, and tendons, which can cause a lot of pain, discomfort, and restriction of movement. Take precautions when performing exercise and daily activities to avoid injuries, but even the most cautious people can get injured sometimes. Fortunately, such injuries tend to heal completely with proper rest, self-care, and treatment. Early treatment is vital in minimizing tissue damage and the associated pain and disability and in ensuring fast and complete recovery. The key is to rest the affected area without making it totally inactive. Ask your doctor of chiropractic about the appropriate exercises to keep the damaged part active, or else the muscles in the area will start wasting away, and restoring full range of motion will be difficult.



Things most people still get wrong about sleep, according to an expert

Too many of us sleep for seven to eight hours almost every night, only to feel unrested through the morning or even most of the day. Why? That was the focus of a [2015 sleep study](#) called *Sleep inertia, sleep homeostatic, and circadian influences on higher-order cognitive functions*. That study concluded:

“In summary, findings provide evidence that higher-order cognitive functions involved in goal-directed behaviors and cognitive control are influenced by circadian phase, homeostatic sleep drive, and/or sleep inertia. These tasks are relevant for safety-sensitive performance, daily activities and social behaviors. For example, visual search is critical for selecting the correct medication from a pharmacy shelf, searching for weapons in carry-on luggage, and for finding a car in a full parking lot. Cognitive control components of executive function are critical for modulation of other cognitive processes such as looking the correct direction when crossing the street while visiting a country where people drive on a different side of the road, or inhibition of inappropriate outbursts and behaviors in patients with dementia. Our findings may also have important implications for the millions of individuals working at adverse circadian phases, long work hours, and/or immediately upon awaking (Horne and Moseley, 2011), including health care professionals treating patients, with the acknowledgement that findings from laboratory studies may not directly

translate to real world performance. Lastly, our findings highlight the importance of considering how sleep inertia, hours awake and circadian processes may influence clinical assessments of cognitive impairment.”

Sleep inertia impairs more sophisticated cognitive skills such as evaluative thinking, decision-making, creativity and rule usage, and gets worse the more sleep deprived a person is.

But even if your job isn’t saving lives or driving a truck overnight, experiencing sleep inertia for hours can still affect your quality of life.

The way to address this begins with evaluating your sleep using the “two Qs,” said pulmonary and sleep specialist Dr. Raj Dasgupta, a clinical associate professor of medicine at the University of Southern California’s Keck School of Medicine. “If you’re getting the good quantity sleep, the next question is, ‘Am I getting good quality sleep?’”

Dasgupta suggested seeing a sleep specialist, who can check for an underlying or primary sleep disorder. But there are other more easily modifiable factors that could be interfering with the restoration and recovery processes -- such as memory consolidation, hormone regulation and emotional regulation or processing -- that need to happen during sleep.

Fatigue

“There are a lot of conditions that cause fatigue, but they don’t necessarily make people feel like they’re ready to fall asleep,” said Jennifer Martin, a professor of medicine at the David Geffen School of Medicine at the University of California, Los Angeles, and president of the American Academy of Sleep Medicine. These can include chronic pain conditions, metabolic or thyroid conditions, anemia, and chronic obstructive pulmonary disease. If you’re feeling inexplicable fatigue, “an important first step might just be a routine physical with your family doctor,” Martin said.

Additionally, the National Sleep Foundation has said healthy adults need seven to nine hours of sleep nightly, so you might need more than eight hours of sleep to feel energized. You could try going to sleep an hour earlier or waking an hour later than usual and see if that makes a difference, said Christopher Barnes, a professor of management at the University of Washington who studies the relationship between sleep and work.

Sedentary lifestyle

If you’re sedentary, your body can get used to only having to expend low levels of energy -- so you might feel more tired than you should when trying to do basic daily activities, Martin said. The World Health Organization has recommended that adults get at least 150 minutes (2 1/2 hours) of moderate-to-vigorous physical activity weekly, while pregnant people should do at least 150 minutes of moderate aerobic and strengthening exercises per week.

Anxiety or depression

Having anxiety or depression can be energetically taxing, Dasgupta said. These conditions can also negatively influence the time needed to fall asleep, as well as whether (and how many times) you wake up throughout the night, he added. And sometimes the medications used to treat depression or anxiety can have side effects such as insomnia or blocking deeper stages of sleep, Dasgupta said.

Inconsistent sleep

Sometimes our schedules differ on weekdays versus weekends, Barnes said. Schedules can also fluctuate for people with shift-based jobs. “A very common practice would be to say, ‘OK, well, it’s Friday night. I don’t have to work tomorrow morning, so I can stay up a bit later,’” Barnes said. Maybe you stay up even later Saturday night since you don’t have to work Sunday either, then go to bed earlier on Sunday ahead of the work week.

But by this point, you’ve already adjusted your sleep schedule back by a couple of hours in a short period of time. “This is very much analogous to jet lag,” Barnes said.

Dehydration

More than 50% of your body is made of water, which is needed for multiple functions including digesting food, creating hormones and neurotransmitters, and delivering oxygen throughout your body, according to the Cleveland Clinic. Being dehydrated has been linked to decreased alertness and increased sleepiness and fatigue. The Institute of Medicine recommends women consume 2.7 liters (91 ounces) of fluids daily, and that men have 3.7 liters (125 ounces) daily. This recommendation includes all fluids and water-rich foods such as fruits, vegetables and soups. Since the average water intake ratio of fluids to foods is around 80:20, that amounts to a daily amount of 9 cups for women and 12 ½ cups for men.

Poor sleep environment or routine

Having good sleep hygiene includes keeping your bedroom dark, quiet and cold at night -- and only using it for sleep and sex. Avoid consuming caffeinated drinks less than six hours before bedtime; and limit the consumption of alcohol and heavy or spicy foods at least two hours before bed. Alcohol can prevent deeper stages of sleep, and such foods can cause digestive issues that interfere with restorative sleep.

Sleep partner problems

“The person (or pet) with whom you share a bed has a big impact on your sleep,” Martin said. Maybe your bed partner has a sleep disorder and snores or tosses and turns. Or maybe they have a different schedule that’s disruptive to your sleep. Pets can also disrupt your sleep schedule since they don’t have the same sleep patterns as humans, she added.



A Life of Service

It is no secret that serving as the Foxworth Family Scholarship Administrator is my favorite job. It is not just managing and awarding the scholarship each year; it is getting to know each recipient. Inspired by the Chiropractic Future Strategic Plan, and looking into the future of our profession, our goal was to identify a student who demonstrated leadership in both their personal and academic lives. But, it is also someone who would demonstrate that leadership within the profession in the future. This year at the FCA National Convention in Orlando, Florida, I had the pleasure of announcing the 7th recipient of the scholarship.

Dustin Biggerstaff is our oldest recipient at almost 35 years old. A student at Life University, he is a nine-year Amphibious Reconnaissance veteran medically retired from the United States Marine Corps. "My military career was cut short due to multiple traumatic injuries and being medically retired, but I continued to have the burning desire to be of service," stated Dustin. He also told me that he had initially looked into a public service career as a police officer or firefighter, but neither were options due to his injuries. However, visiting his chiropractor helped him realize that he could still serve his community as a Doctor of Chiropractic instead of a first responder. As a result, Dustin has a strong interest in pediatric and sports chiropractic and a strong desire to provide chiropractic services to active and reserve service members, veterans, and their families. "I have seen fellow service members and veterans who have been able to stop taking pain medications because that is the only option they had before

chiropractic was introduced into their lives. I am grateful for my first adjustment while on active duty. It started me on this path and has helped shape the goals of my future practice."

He is not just a chiropractic student. While exploring career options that would allow him to serve his community, he became involved with Semper Fi & America's Fund, which provides financial and medical help and transportation for veterans injured while serving in combat or peacetime. "During my transition from active duty to medically retired, I was fortunately introduced to the Semper Fi & America's Fund (SF&AF). I immediately fell in love with the mission, how they assist the veterans and their families, and that they TRULY make an impact." Dustin has raised about \$15,000 for the nonprofit over the past two years by participating in triathlons, marathons, and other long-distance athletic events and getting donors to sponsor him by the mile or event.

Dustin was one of 12 applicants with a perfect score. The selection process involves over 20 leaders within the chiropractic profession, with the final decision made by a member of the Foxworth family. Most of what I learned about Dustin I learned while attending the FCA National Convention. Our goal was to find a future leader in our profession, and we did. He is proud of his military service and honored to join the chiropractic profession, but his most significant accomplishment is his family. He lights up when talking about his wife and children. My favorite quote from his application is, "I want nothing more in my life than to set the right example for my

children and be someone they want to emulate.” Congratulations, Dustin, on becoming this year’s CHUSA scholar; we are excited to watch your career unfold and see your impact on the profession’s future.

The Foxworth Family Scholarship would like to thank the many organizations that helped in the evaluation process of this year’s applicants. Four-hundred applications were narrowed down to 12 finalists thanks to the help of the American Black Chiropractic Association, American Chiropractic Association, ChiroCongress, Chiropractic Summit, Clinical Compass, Council on Chiropractic Education, Federation of Chiropractic Licensing Boards,

International Chiropractic Association, National Board of Chiropractic Examiners, One Chiropractic, the Foundation for Chiropractic Progress, Chiropractic Future Strategic Plan, and Women Chiropractors. Students interested in applying for the 2023 scholarship may apply at www.chusascholar.com.

Kristi Hudson is a certified professional compliance officer (CPCO). She serves as the VP of Business Relations for ChiroHealthUSA and Administrator of the Foxworth Family Scholarship. You can contact Kristi at Kristi@chirohealthusa.com, 888-719-9990 or you can visit the ChiroHealthUSA website at www.chirohealthusa.com.



“Join the Pack”

Become a member of the IACP

The IACP acts as a resource, representative and leading advocate for the chiropractic industry in Idaho. We cannot continue to properly serve the chiropractic profession without the commitment and support of exceptional industry leaders, such as yourself. The IACP Board and its members believe that membership in the Association is and should be mutually beneficial to both the Doctor and the IACP, which makes it a perfect cooperative relationship. As a member, you will have multiple opportunities to obtain learning and marketing opportunities, at a discounted rate, through membership, as well as, have an opportunity to utilize the services of the IACP team and its Board. You will also have an opportunity to get involved in important issues, from the center, along with other industry leaders and spokespeople. At the same time, the Association continues to grow and provide broader services to the industry with your support. Join now and be a part of the “pack” that will lead us into the future!

SOME DISCOUNTS ARE GOOD.
SOME DISCOUNTS ARE BAD.
SOME DISCOUNTS ARE...

ILLEGAL!

ATTACK OF THE AUDITORS?
NO NEED TO BE SCARED.

TEST YOUR KNOWLEDGE.
HAVE SOME FUN.

DISCOUNT
CHALLENGE
2.0

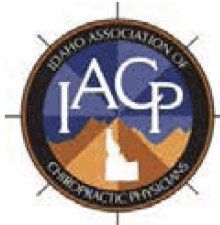
CHUSADC.COM

One lucky person
WILL WIN
\$15,024

Why that amount?
Accept the challenge
to find out!

ChiroHealthUSA®
The Network That Works for Chiropractors!

NO PURCHASE NECESSARY. Open to licensed chiropractors or those employed by a licensed chiropractor who are US residents, 18+. Ends 10/31/12. Void where prohibited. For Official Rules and complete details visit www.CHUSADC.com. Sponsor: ChiroHealthUSA.



IACP MEMBERSHIP APPLICATION

Contact Information:

Name: _____ License #: _____

Practice Name: _____

Business Address: _____ Business Address 2: _____

City, State, Zip: _____ County: _____

Phone: _____ Fax: _____

Email: _____ Website: _____

IACP Membership Categories: Types of Membership and Benefits:	<i>Full Amount</i>	<i>Monthly</i>	Payment Information:
<p><u>IACP CENTURY CLUB</u></p> <p>All Standard Membership Benefits, plus:</p> <ul style="list-style-type: none"> • FREE Convention Member Registration; • FREE Non-DC Staff Member Convention Registration; • Expanded Discounts for Member and Staff on three IACP quarterly seminars; • 25% Discount on advertising via the IACP newsletter and/or website; • 25% Discount on Bronze Level Convention Sponsorship; • Invitation to IACP PAC Dinner(s) for legislative officials targeted for IACP support; • Opportunity to write articles for IACP newsletter editions*; • Two FREE classified ad both online and printed newsletter per year; • First Call - IACP Referrals for patients seeking specific DC techniques/education; • Invitation to the IACP President's Dinner – including other Century Club members, past IACP Presidents, Idaho Legislators & Sponsors; • Portion of C.C. dues fund the IACP PAC - supportings legislative efforts/candidates. <p><small>** The IACP reserves the right to review articles and edit submissions as it deems necessary.</small></p>	[]	[]	<p>Payment Type: <input type="checkbox"/> VISA <input type="checkbox"/> MC <small>(circle one)</small></p> <p><input type="checkbox"/> Discover <input type="checkbox"/> AMEX <input type="checkbox"/> Check</p> <p>Credit Card #: _____</p> <p>CVC: _____ Exp. Date: _____</p> <p>Billing Zip Code: _____</p>
<p><u>IACP STANDARD MEMBERSHIP</u></p> <ul style="list-style-type: none"> • \$100 discount on convention registration fees • \$20 discount for each staff member on convention registration fees; • 10% Discount on Online CE Credits offered through the IACP Website; • 10% Discount on ICD Coding Books Offered by the IACP; • 10% Discount on all products, videos and materials sold by the IACP; • Earn at least 6 FREE CE credits each year at district meetings; • Discounts on Quarterly IACP Seminars for Member and Staff; • One FREE classified ad both online and printed newsletter per year; • Find A Doctor Referral Directory and access to members only information regarding Medicare, insurance & legislative insight; 	[]	[]	<p><u>Optional PAC Donation:</u></p> <p>PAC stands for Political Action Committee the fundraising arm of the IACP. All monies donated go directly to supporting campaigns, educating state representatives, and hiring watch groups to guard against harmful legislation that would curtail your right to practice.</p>
<p><u>RETIRED DC MEMBERSHIP</u></p> <ul style="list-style-type: none"> • Annual subscription to IACP Newsletter (12 issues per year); • 10% Discount on all IACP events or classes • Discounts on advertising in the IACP Newsletter or on the IACP website; • Discounts on classified ads in IACP Newsletter or on the IACP website. 	[]	[]	<p>I wish to support my profession by donating:</p>
<p><u>MULTIPLE DC HOUSEHOLD MEMBERSHIP</u></p> <ul style="list-style-type: none"> • For dual DC households where both members of the household are practicing DCs. Spouse can choose a discounted Century Club or Standard Membership. 	25% Reduction in Membership Category		<p><input type="checkbox"/> \$25/mo. <input type="checkbox"/> \$55/mo.</p> <p><input type="checkbox"/> Other: \$ _____/mo.</p>
<p><u>NEW GRADUATE MEMBERSHIP</u></p> <ul style="list-style-type: none"> • New chiropractic college graduates receive basic membership for no fee! 	FREE		

By signing this form you agree to pay for the membership type and frequency listed and the optional PAC donation indicated above. The authority you give the IACP to charge your account will remain in effect until you notify IACP in writing to terminate the authorization, after the agreed upon term has been met. This includes annual renewals. If the amount of your payment changes, we will notify you at least ten days before payment date. You also agree to notify IACP of any changes in account information.

Signing this form acknowledges an understanding that cancellation requests must be made in writing and will only be honored following fulfillment annual timeframe:

Signature: _____ Today's Date: _____

Mail to: IACP, 13601 W. McMillan Rd., Suite 102-331, Boise, ID 83713 or Fax to 888-399-5459

Chiropractic News

Northwestern Health Sciences University Announces New Chair in Biomechanics and Human Performance, Endowed by Foot Levelers

As the new chair, Dr. Andrew Klein will advance teaching and research in biomechanics.

Bloomington, MN and Roanoke, VA – May 4, 2022 – Northwestern Health Sciences University (NWHSU), headquartered in Bloomington, Minnesota, and Foot Levelers, Inc., of Roanoke, Virginia, are proud to announce the creation of a new \$500,000 endowed chair at NWHSU to advance the biomechanics field.

The Foot Levelers Chair in Biomechanics and Human Performance at NWHSU— the premier evidence-based integrative health institution of higher education— is a pioneering addition to further break into a critically important area that involves how the human spine, bones, joints, feet, and other parts of the body work efficiently and effectively together.

The chair position has been awarded to Dr. Andrew Klein, D.C., D.A.C.B.S.P., C.S.C.S., director of NWHSU's Human Performance Center (HPC) since 2020. With over three decades in the complementary and integrative healthcare field, Klein is well-positioned to spearhead this new position to advance biomechanics as the HPC specializes in integrative, evidence-based treatment to improve human movement and overall health. Chiropractic, acupuncture, and massage therapy students learn and complete internships in the HPC, working with local and national athletes and athletic teams.

ChiroCongress 2022 St. Louis Convention November 10 - 12, 2022

We can't wait to see you in St. Louis!

Stay and play beside Ballpark Village and Busch Stadium! The Hilton St. Louis at the Ballpark hotel is the destination that connects you with an innovative guest experience. Walk outside the door and you are just steps away from the Busch Stadium - home of the St. Louis Cardinals, the Gateway Arch, America's Center, Enterprise Center, the Riverfront, restaurants, and all of St. Louis, Missouri's major attractions.

The hotel is a masterful architectural design with a soaring lobby, spectacular city views of the Busch Stadium and Gateway Arch, with an oversized, state-of-the-art business center, concierge amenities, and a first-rate array of food and beverage venues, including a 360 of-St. Louis, Market Street Bistro, Ballpark Pizza, Starbucks, and outdoor patios with spectacular views of the downtown skyline. Whether traveling to Missouri on business or pleasure, guests of the Hilton hotel can escape to their own field of dreams in their guest rooms with views of the Busch Stadium and the Gateway Arch.

Convention will be held at the Hilton St. Louis at the Ballpark!

[2022 Covention Website](#)

The World Spine Day theme for 2022 will be EVERY SPINE COUNTS

The theme emphasizes diversity of spinal pain and disability as part of the global burden of disease and addresses the need for access to quality essential spinal health services worldwide. With an estimated 540 million people in the world suffering with low back pain at any one time, it remains the leading cause of years lived with disability.

Taking place on October 16 each year, World Spine Day highlights the burden of spinal pain and disability around the world. With health professionals, exercise and rehabilitation experts, public health advocates, schoolchildren and patients all taking part, World Spine Day is celebrated on every continent.

World Spine Day highlights the importance of spinal health and well being. Promotion of physical activity, good posture, responsible lifting and healthy working conditions will all feature as people are encouraged to look after their spines and stay active.

An estimated one billion people worldwide suffer with spinal pain. It affects people across the life course and is the biggest single cause of disability on the planet. Effective management and prevention is therefore key and this year's World Spine Day will be encouraging people to take steps to be kind to their spines.

This World Spine Day, we are calling for action to focus on the global burden of spinal disorders while emphasizing #EVERYSPINECOUNTS, highlighting the diverse challenges of living with low back pain in all regions, cultures, backgrounds, and across the life course; prioritizing a condition that is more prevalent than cancer, stroke, heart disease, diabetes and Alzheimer’s Disease combined.

The campaign calls for greater global commitment to tackling spinal pain and disability by governments, communities, and public health bodies.

World Spine Day also recognizes the lack of access to quality spine care and rehabilitation in under-served communities, which results in chronicity and permanent deformity. For many populations, spinal pain and disability is not just a minor inconvenience – it can mean not being able to work and provide food and sustenance.

#EVERYSPINECOUNTS will focus on highlighting ways in which all people can help their spines by staying mobile, avoiding physical inactivity, not overloading their spines, and adopting healthy habits such as weight loss and smoking cessation.

Believed to be the largest global public health event dedicated to promoting spinal health and well-being, World Spine Day is observed by health professions and public organizations concerned with spine care throughout the world. #EVERYSPINECOUNTS will focus attention on the diverse nature of spinal pain and disability at home, in the workplace, in schools and in our communities.

[Download](#) the World Spine Day 2022 Press Release

[Check out the WSD Toolkit 2021](#)

The IACP News
accepts press releases and news items.
Please email your news to
Catherine at C&S Publishing,
CandSpublishing@gmail.com

“Join the Pack”

Become a member of the IACP

The IACP acts as a resource, representative and leading advocate for the chiropractic industry in Idaho. We cannot continue to properly serve the chiropractic profession without the commitment and support of exceptional industry leaders, such as yourself. The IACP Board and its members believe that membership in the Association is and should be mutually beneficial to both the Doctor and the IACP, which makes it a perfect cooperative relationship. As a member, you will have multiple opportunities to obtain learning and marketing opportunities, at a discounted rate, through membership, as well as, have an opportunity to utilize the services of the IACP team and its Board. You will also have an opportunity to get involved in important issues, from the center, along with other industry leaders and spokespeople. At the same time, the Association continues to grow and provide broader services to the industry with your support. Join now and be a part of the “pack” that will lead us into the future!

Chiropractic College News

Palmer College of Chiropractic will celebrate the 125th anniversary of its being the first chiropractic school in the world Sept. 15-17, 2022

The three-day event will recognize Palmer's place in the history of chiropractic, and its commitment to continuing to educate the world's best chiropractors and drive the profession forward.

The 125th anniversary comes during a time of unprecedented growth at Palmer College, which has invested more than \$35 million into recently completed and upcoming building projects to support the academic and campus experience for students, all while growing scholarship opportunities for incoming students.

The event will honor and celebrate the science, art and philosophy of chiropractic through continuing-education speakers, alumni gatherings, commemorative events and a can't-miss celebration that will unveil the vision for the future of Palmer College.

To register, or for more information about the 125th anniversary celebration, visit palmer.edu/125.

Northeast Instructor Among Select Group Providing Chiropractic Care at World Games

Northeast instructor Dr. Jose Balseca served as part of the chiropractic care team at the 2022 World Games held July 7-rough the Federations of International Sports Chirom different parts of the world, hearing their experiences, and learning about their cultures," said Balseca. "I am so thankful to be among the chiropractors selected for the World Games."

Women's Health Symposium Speakers 4th Annual Women's Health Symposium Sept. 24 and 25

Logan University, in conjunction with the American Chiropractic Association Council on Women's Health, is proud to present the 4th Annual Women's Health

Symposium Sept. 24 and 25 on Logan's campus in Chesterfield, Missouri. Themed "Advances in Women's Healthcare" the symposium features expert leaders in women's health discussing timely and relevant topics.

Logan University Breaks Ground on Fuhr Science Center

Logan University broke ground on the Fuhr Science Center on its campus in Chesterfield, Missouri, yesterday and construction is officially underway. The renovation project represents a major investment in the university's continuing commitment to quality experiential learning for its chiropractic and health sciences students and to advancing education and transforming lives through evidence-based, patient-centered health care.

The building is named after Arlan W. Fuhr, DC ('61) and Mrs. Judi Fuhr, who donated a \$1 million lead gift in support of the Advancing Education, Transforming Lives campaign that will fund the renovation and expansion of the Fuhr Science Center as well as portions of the Administration Building. Dr. Fuhr is founder and chairman of Activator Methods International and co-inventor of the Activator Adjusting Instrument and the Activator Method Chiropractic Technique—the world's most widely used instrument adjusting chiropractic technique. Judi Fuhr is CEO and co-owner of Activator Methods International.

With a nearly 48,000-square-foot remodel and addition, the updated Fuhr Science Center will house anatomy labs, a simulated imaging center, technique labs, faculty offices, additional student collaboration and study areas, and anatomage tables—which are the most advanced 3D-simulation systems used by leading health care institutions throughout the world.

Guided by Logan's mission and vision, the "Advancing Education, Transforming Lives" campaign will be funded through three efforts: financing through an existing long-term relationship with the university's banking partner, a strategic spend in cash reserves and a fundraising campaign.

D'Youville Ranks as Top Private University in Western New York

For the second consecutive year, D'Youville is ranked as the top private university in Western New York in recognition of its academic excellence, according to the 2021 U.S. News and World Report rankings. It is the second-highest nationally ranked university in Western New York.

“U.S. News and World Report continues to recognize the excellent quality of D'Youville's academic programs, as well as the exceptional experience we offer our students through our updated learning spaces, latest technology, and increased scholarship opportunities,” she says. “We are gratified to once again receive this significant recognition as a national university.”

U.S. News moved D'Youville from the “Regional Universities – North” to the “National Universities” category, following its placement in the university category by the Carnegie Classification of Institutions of Higher Education. The Carnegie system, the nationally recognized source used by the U.S. Department of Education, classifies D'Youville as a National University for meeting one or more of its criteria: a full range of undergraduate majors, master's, and doctoral programs, faculty research emphasis, and awarding of professional practice doctorates.

CUKC Ruth R. Cleveland Memorial Library Receives Service Award

The Health Sciences Library Network of Kansas City (HSLNKC) presented awards to Kansas City area libraries for outstanding service to their institutions in 2020-21. The CUKC Ruth R. Cleveland Memorial Library received a 2021 Award for Outstanding Advances in Technology and Service.

Accepting the HSLN award for the University at the HSLNKC event were Simone Briand, M.S., MLS, library director; Melanie Church, library services specialist, and Andi Wall, serials manager.

The award's description noted the move to remote course delivery by Cleveland University-Kansas City due to COVID-19 “tasked the library with maintaining services while also providing a safe physical space. The library rose to the challenge by enforcing safety protocols and implementing a pick-up service while adding online resources such as free scholarly content and a chat and text service. The efforts to

better connect with users spurred initiatives in 2021 that led the library to adopt new technologies in service to their patrons.”

Cleveland Centennial & Midwest Annual Conference and Expo, October 20-23, 2022

Cleveland University-Kansas City (CUKC) is excited to commemorate a century of creating a healthier world with a celebration so big, we had to spread it over four days! Join us in Overland Park, Kansas, for world-class speakers, networking activities and a can't-miss celebration with fireworks, special performances, entertainment and so much more. This year's conference will feature multiple topics, such as Sports Chiropractic, Women in Chiropractic, Animal Chiropractic, Neuroscience, Techniques and Best Practices in Patient Care, and doctors can receive up to 20 hours of continuing education credits.

[CUKC Centennial Celebration and Midwest Annual Conference and Expo Registration](#)



IACP Marketplace

The IACP News,
this monthly newsletter of the Idaho
Association of Chiropractic Physicians,
reaches 600-800 chiropractors
across Idaho every month.
Build your business right here!



Producing modern, digital magazines and
newsletters exclusively for non-profit associations.

www.CandSpub.com



Enjoy more compliance, peace of mind, and simpler financial options that help
your patients combat rising health care costs, increasing co-payments, and skyrocketing deductibles



ChiroHealthUSA is one of the simplest and easiest solutions to counter potentially illegal dual-fee schedules and improper time-of-service discounts offered by doctors in an effort to make care more affordable for patients. The great news is that when your state association partners with ChiroHealthUSA — as IACP does — not only do you and your patients benefit, but the entire profession wins through our donation to IACP.

1-888-719-9990

www.chirohealthusa.com

info@chirohealthusa.com

**Get your display advertisement into the IACP Marketplace and save BIG!
Less than a dollar a day gets your ad going – \$29 a month.
Email Steve today at: CandSpublishing@gmail.com**



Idaho chiropractors, do you have something to sell, share, or advertise with your fellow practitioners? List it as an IACP classified ad. These ads will be listed online and included in the IACP newsletter for two months. Email your ad to: iacpcontact@gmail.com

BE SUCCESSFUL IN CHIROPRACTIC! Looking to mentor a principled, ethical, and motivated DC who loves and wants to be successful in Chiropractic. This is a golden opportunity to be paid well, while getting a great education with an option to buy. Learn how to build a dynamic high-volume, high-tech, “relief and wellness” style family practice. Associate doctors assume full duties a Doctor of Chiropractic including managing patient cases from patient acquisition to care plans and case management. Work in a multi-doctor co-operative environment. Benefits include 401k, health insurance, paid time off. Located in Beautiful Boise Idaho. Do you qualify? Call Dr Strickland at 208-989-1060. Check us out on the web at www.betterlifechiro.net

Well-Established Chiropractic Practice and Office for Sale :

A 32 year established practice and office building for sale in Grangeville, Idaho. Doctor retiring.
A free standing building of 1624 sq. ft., with a private patient parking lot, on a 10,000 sq. ft. corner lot. 3 treatment rooms, therapy bays, X-ray room, reception area, waiting room, private Dr.'s office, storage room.
Equipment includes: 2020 Imaging digital X-ray, Chattanooga adjusting tables, Zenith high-low table, intersegmental traction table, ultrasound, interferential, hot packs and ChiroTouch software.
Diversified, Thompson Drop and Activator techniques.
All office furnishings and equipment included in sale.
Average collections of \$210,000 per year, for the last 3 years, on 3.5 days a week. Low overhead.
Practice & equipment: \$185,000
Office building: \$300,000
Small town living on the beautiful Camas Prairie. Literally minutes from your door, the outdoor paradise offers: Hunting, fishing, river rafting, hiking, snowmobiling, skiing, 4 wheeling. For more information, contact me at:
Cell #: (208)983-6537, please leave a message; Email: Jazzman14@msn.com

Established Practice for Sale – Lewiston, Idaho:

Contact
Phone: 503.277.8220
Kristy.Fresh@FreshHCA.com
Price: \$450,000.00
Established chiropractic business for 30+ years. Owner is retiring. Will hand off well established, stable practice, support transition with practice panel and introduction into community. Sale includes practice equipment; PEMF, Hyperbaric Chamber, Laser Units, Massage Chairs, Digital X-Ray, Leander Tables, LSI System, Ultra Sound and Rapid Doc Software. Office building with ample parking. Long standing patient base, solid reputation in community and established insurance contracts. Practice currently is a 3 day a week, Ability to increase volume and services.

Office Posters



We have created a FREE [printable PDF](#) of the ***Walking touted as “wonder drug”*** poster on the following page, and the following posters are available online:

Ways to keep moving with joint pain

Go outside and get the benefits of Vitamin D

The drug-free approach to pain reduction

Get up and move!

STRETCHING for better joint health

Easy exercises to keep your neck healthy

Chiropractic care will help you work from home more comfortably

Were you pain free this morning when you got out of bed?

Tips for safe stretches

Don't let pain keep you from enjoying life

7 simple steps to a longer, healthier life

Please feel free to print out and use any or all of the flyers.

Or, make them available as handouts to your patients.

They are available on the website, www.IACPnews.com in an easy to print format.

Each has the following tagline:

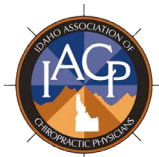


***This healthy living information is provided by
your Doctor of Chiropractic and the
Idaho Association of Chiropractic Physicians (IACP) .***

Walking now touted as “the closest thing we have to a wonder drug”

Getting exercise through walking is as easy as lacing up your sneakers and hitting the pavement or trail. Doing so is a safe way to get a workout without needing a gym, and it can boost your mental and physical health in several important ways. “Walking is the most studied form of exercise, and multiple studies have proven that it’s the best thing we can do to improve our overall health, and increase our longevity and functional years,” says Robert Sallis, MD, a family physician and sports medicine doctor with Kaiser Permanente. It’s never too late to reap the benefits of walking: A small 2013 study in the journal *Maturitas* found that seniors with an average age of 80 who walked just four times a week were much less likely to die over the study’s 10-year follow-up period than those who walked less. The many benefits of regularly walking include:

- 1. Lower body mass index (BMI):** A study from the University of Warwick in Coventry, England, published in 2017 in the *International Journal of Obesity* confirms that those who walk more and sit less have lower BMIs, which is one indicator of obesity. In the study, those who took 15,000 or more steps per day tended to have BMIs in the normal, healthy range.
- 2. Lower blood pressure and cholesterol:** The National Walkers’ Health study found that regular walking was linked to a 7 percent reduced risk of high blood pressure and high cholesterol.
- 3. Lower fasting blood sugar (glucose):** Higher blood glucose levels are a risk factor for diabetes, and the National Walkers’ Health Study also found that walkers had a 12 percent lower risk of type 2 diabetes.
- 4. Better memory and cognitive function:** A 2021 study published in the *Journal of Alzheimer’s Disease* found that when adults 55 or older with mild cognitive impairment were assigned to either stretching and toning exercises or to aerobic training—mostly walking—both groups showed some improvement on cognitive tests. But when compared with the stretching and toning group, the group that walked for fitness improved aerobic fitness more, had decreased stiffness in neck arteries, and showed increased blood flow to the brain in ways that researchers think could provide more cognitive benefits in the long term. A clinical trial of older adults in Japan published in the *Journal of the American Geriatrics Society* in 2015 found that after 12 weeks, men and women in a prescribed daily walking exercise group had significantly greater improvements in memory and executive function (the ability to pay focused attention, to switch among various tasks, and to hold multiple items in working memory) compared with those in a control group who were told just to carry on with their usual daily routine. And a study of 299 adults, published in the journal *Neurology* in 2010, found that walking was associated with a greater volume of gray matter in the brain, a measure of brain health.
- 5. Lower stress and improved mood:** Like other types of aerobic exercise, walking—especially out in nature—stimulates the production of neurotransmitters in the brain (such as endorphins) that help improve your mental state.
- 6. Longer life:** In a review of studies published in 2014 in the *International Journal of Behavioral Nutrition and Physical Activity*, researchers found that walking for roughly 3 hours a week was associated with an 11 percent reduced risk of premature death compared with those who did little or no activity.



*This healthy living information is provided by
your Doctor of Chiropractic and the
Idaho Association of Chiropractic Physicians (IACP) .*

The Idaho Association of Chiropractic Physicians

The IACP News

Display Advertising Policy, Rates and Information

The Idaho Association of Chiropractic Physician's *IACP News* is a full-color digital newsletter, published monthly and distributed to member doctors of chiropractic across Idaho as well as out-of-state members and student members.

Format: *The IACP News* is produced in a state-of-the-art digital format. It can be opened and viewed online from both the IACP website at <https://iacp.wildapricot.org/> and also from the publication site: www.IACPnews.com. The publication site has both current and back issues of *The IACP News*. Questions about the digital format, the website, or display advertising should be directed to C&S Publishing at CandSpublishing@gmail.com.

Classified Ads: IACP accepts classified ads. They are published without cost for IACP members, but can also be purchased for \$100 by non-members. For additional information about placing a classified ad, contact Caroline Merritt, IACP Executive Director at (208) 515-6263 or caroline@idahotruenorth.com.

Ad Sizes and Rates: IACP reserves the right to determine position and placement of all advertising. Special positioning may be purchased for an additional 20% if space is available. Inside Cover and Back Cover are charged additional 20% for special positioning. **15% off these rates for IACP Members.**

Ad Type	Ad Size	1 run	3 runs	6 runs	12 runs
Full page (bleed)	8 5/8" wide by 11 1/4" tall	\$450	\$414	\$378	\$330
Full page (boxed)	8" wide by 9 3/4" tall	\$450	\$414	\$378	\$330
Half page	8" wide by 4 3/4" tall	\$267	\$264	\$224	\$190
One Third (V)	2 3/8" wide by 9 3/4" tall	\$190	\$174	\$159	\$140
One Third (H)	8" wide by 3 1/8" tall	\$190	\$174	\$159	\$140
Quarter Page	3 7/8" wide by 4 3/4" tall	\$160	\$146	\$134	\$115
One Sixth	3 5/8" wide by 2 7/8" tall	\$105	\$97	\$88	\$75

Rates are for full color ads **per insertion**. Ads published under a multi-run contract can be changed for each issue at no additional cost. Flash animation (.swf files), animations (.gif format) and video clips can be added to any ad. There is no extra charge for video clips or multi-media in ads unless "assembly" of the ad is required. Some file size limitations apply. For details contact CandSpublishing@gmail.com. Email camera-ready ads in high resolution Adobe Acrobat (.pdf) format to: CandSpublishing@gmail.com. Ad creation and graphic design services are available through C&S Publishing at no additional cost.

Acceptance of Advertising: IACP reserves the right to refuse any advertisement with or without reason or explanation including any ad that, in the opinion of IACP, is unethical, makes extravagant claims, misrepresents, is unfair or harmful to other advertisers; violates postal, anti-trust or U.S. currency regulations; or is deemed inconsistent with the objectives of the IACP.

The IACP News is produced for the IACP by C&S Publishing

Phone: 916-729-5432 • Email: CandSpublishing@gmail.com