

Chiropractic care is a health care approach based upon the body's natural ability to heal itself and is a very important step in a commitment to optimal health.

Optimal health is one of our most valuable possessions. We should value ourselves enough to strive for the highest level of health. When we take responsibility for the choices we make regarding health, we give ourselves the best opportunity to achieve all of our health goals.

Chiropractic care can help give us the natural health we deserve when we commit to learning more about our bodies and take all of the necessary steps to stay well.

Hope deferred makes the heart sick, but a longing fulfilled is the Tree of Life.

Proverbs 13:12

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Dear Patient and Friend,

If you are a procrastinator, now may be the time to consider the health price you may be paying for this habit. Procrastination may be the worst enemy of optimal health. We think about exercising and eating healthy foods, however postponing these changes is much easier than actually performing them.

When this attitude dominates our behavior, we have turned into an "after" person, dealing with health issues after they arise. This is reactive habit and we will make health decisions based on pain or fear. Pain will actually make the decisions for us at times. However, pain is a signal that something is already wrong. Our health is already compromised, sometimes seriously.



Our health is already compromised, sometimes seriously.

Fear is another reactive motivator that may also convince us to change our health habits. Unfortunately, fear brings with it a certain level of anxiety that may damage the good health we are striving for.

Fear develops when we read newspaper ads and hear advertising on television describing various health problems. Often the fear instilled by these ads may lead us to ask for prescription medications we may not really need.

Fear and pain are negative motivators, and they depend on negative reactions as motivators for good health habits. If we wait for fear or pain to motivate us, we may suffer pain and/or serious health problems.

When we make a decision to act, rather than react in the area of health habits, you are improving your chances for a healthy life. This decision means you will be a "before" person, because you build health before problems begin, rather than treating problems after they arise.

Medicine's Secret Stat

Thursday, Feb. 15, 2007 By [MICHAEL D. LEMONICK](#)

Researchers can gather all the hard-nosed evidence they want about the effectiveness of a particular drug or treatment. But there's one figure doctors don't much talk about despite its importance. It's called number needed to treat, or NNT, a new measure developed in the past 20 years that's one of the best-kept statistical secrets in medicine.



The idea of NNT is simple enough. Most clinical trials look at how much better people do on a particular medicine compared with how they would do without it or whether they should be on a different medicine. Take statins, drugs that aim to reduce bad cholesterol. A typical trial might give one group of men a statin for, say, five years and give a second group a placebo, or fake pill. Generally, you will see fewer heart attacks in the statin group (about 30% fewer in one real-world trial). Reducing the risk by a third sounds like a lot, which is one reason many hundreds of thousands of men with no sign of heart disease take statins. But that number is meaningless unless you take into account the percentage of men in both groups who have heart attacks in the first place. If those people represent only a tiny fraction of the two populations, an improvement of 30% isn't much--maybe one heart attack fewer in a group of thousands.

The effort to handicap those odds is where NNT comes in. It answers the question, How many people have to take this drug to avoid one heart attack? The same principle can be applied to avoiding one recurrence of cancer or stroke or whatever end point you choose to measure. In healthy men, the NNT for statins is about 50 (depending on which of dozens of statins is taken, age, family history, lifestyle and so on). So 50 men have to take these drugs in order to prevent a single--not necessarily fatal, heart attack.

Presented that way, taking statins sounds like less of a no-brainer--especially given that the drugs cost hundreds of dollars a year, side effects could include liver and muscle damage and you have to take twice-yearly blood tests just in case. Still, factored out over the entire U.S. population, even a 1-in-50 figure means many thousands of heart attacks are avoided every year.

Since public-health officials want to save lives, they focus on the thousands and avoid the NNT. Since pharmaceutical companies are in business to sell drugs, they do the same. Those two forces have kept NNT from being a big part of medical education. We could all help change that by doing nothing more than asking for the number up front the next time we're handed a prescription.



Most discussions about the rising cost of health care emphasize the need to get more people insured. The assumption seems to be that insurance – rather than the service delivered by doctor to patient – is the important commodity. But perhaps the solution to much of what currently plagues us in health care – rising costs and bureaucracy, diminishing levels of service – rests on a radically different approach: *fewer* people insured.

You don't need to be an economist to understand that any middleman interposed between seller and buyer raises the price of a given service or product. Some intermediaries justify this by providing benefits, such as salesmanship, advertising or transport. Others offer physical facilities, such as warehouses. A third group, organized crime, utilizes fear and intimidation to muscle its way into the provider-consumer chain, raking in hefty profits and bloating cost, without providing any benefit at all.

The health insurance model is closest to the parasitic relationship imposed by the Mafia and the like. Insurance companies provide nothing other than an ambiguous, shifty notion of "protection." But even the Mafia doesn't stick its nose into the process; once the monthly skim is set, Don Whoever stays out of the picture, but for occasional "cost of doing business" increases. When insurance companies insinuate themselves into the system, their first step is figuring out how to increase the skim by harming the people they are allegedly protecting through reduced service.

Insurance is all about betting against negative consequences and the insurance business model is unique in that profits depend upon goods and services *not* being provided. Using actuarial tables, insurers place their bets. Sometimes even the canniest MIT grads can't help: Property and casualty insurers have collapsed in the wake of natural disasters. Health insurers have taken steps to avoid that level of surprise: Once they affix themselves to the host – in this case dual hosts, both doctor and patient – they systematically suck the lifeblood out of the supply chain with obstructive strategies. For that reason, the consequences of any insurance-based health-care model, be it privately run, or a government entitlement, are painfully easy to predict. There will be progressively draconian rationing using denial of authorization and steadily rising co-payments on the patient end; massive paperwork and other bureaucratic hurdles, and steadily diminishing fee-recovery on the doctor end.

Some of us are old enough to remember visiting the doctor and paying him/her directly by check or cash. You had a pretty good idea going in what the service was going to cost. And because the doctor had to look you in the eye – and didn't need to share a rising chunk of his profits with an insurer – the cost was likely to be reasonable. The same went for hospitals: no \$20 aspirins due to insurance-company delay tactics and other shenanigans. Few physicians became millionaires, but they lived comfortably, took responsibility for their own business model, and enjoyed their work more.

Several years ago, I suffered a sports injury that necessitated an MRI. The "fee" for a 20-minute procedure was over \$3,000. My insurance company refused to pay, so I informed the radiologist that I'd be footing the bill myself. Immediately, the "fee" was cut by two thirds. And the doctor was tickled to get it.

A few highly technical and complex procedures that need to amortize the purchase of extremely expensive hardware will be out of reach for any but the wealthiest patient. For that extremely limited category, insurance might work. A small percentage of indigent individuals won't be able to afford even low-cost procedures. For them, government-funded county facilities are the answer, because any decent society takes care of the weakest among us. But a hefty proportion of health-care services – office visits, minor surgeries – would be affordable to most Americans if the slice of the health-care dollar that currently ends up in the coffers of insurance companies was eliminated.

When I was in practice as a psychologist, I discussed fees up front with prospective patients, prior to their initial visit. People appreciated knowing what to expect and my bad debt rate was less than 1%. That allowed me to keep my charges reasonable and, on occasion, to lower them for less fortunate patients. And I loved my job because I was free to concentrate on what I went to school for: helping people, rather than filling out incomprehensible forms designed to discourage me from filing them in the first place.

Physicians and other providers need to liberate themselves from the Faustian bargain they've cut with the Mephistophelian suits who now run their professional lives. Because many doctors are loath to talk about money, they allowed themselves to perpetuate the fantasy that "insurance is paying." It isn't. There is no free lunch and no free physical exam. If substantial numbers of health-care providers shook off the insurance monkey on their back, en masse, and the supply of providers was substantially increased by opening more medical schools, the result would be a more honest, cost-effective system benefiting everyone. Except the insurance companies.

Boost your IQ by Choosing your Exercise Wisely

Wired Magazine, April 21, 2008

Studies have shown that some forms of exercise may actually help you think better, while others have little or no impact on your brain matter.

Here's a sampling of what works and what doesn't.

Aerobic Training

In 2006, Arthur Kramer of the University of Illinois used MRIs to prove that aerobic exercise builds gray and white matter in the brains of older adults. Later studies found that more aerobically fit grade-schoolers also perform better on cognitive tests.

Impact on intelligence: Strong

Lifting Weights

When weight lifters talk about getting huge, they aren't referring to their hippocampus. Researchers have found only the most tenuous link between heavy resistance training and improved cognitive function.

Impact on intelligence: Negligible

Yoga

When facing a stressful situation or even a scary email, people often hold their breath. Yoga can break that habit.

Under pressure, "most people breathe incorrectly," says Frank Lawlis, a fellow of the American Psychological Association and author of *The IQ Answer*. The result: more stress and less oxygen to your brain. "So the first thing that goes is your memory."

Impact on intelligence: Possibly strong

Studying on the StairMaster

A spinning class may rev up your mental muscle, but that doesn't mean you should study while huffing and puffing on the StairMaster.

Research shows you'll just confuse yourself. "It's like doing something while you're driving," says Charles Hillman, a kinesiology professor at the University of Illinois. In other words, you won't do either task well.

Impact on intelligence: Negligible

[Other research](#) not mentioned in this *Wired* article also confirms that aerobic exercise is indeed one of the best things you can do to [stay mentally agile into old age](#).

For example, older people who exercise three or more times a week were found to have a significantly reduced risk of developing Alzheimer's and other types of dementia. Healthy people who reported exercising regularly had a 30 to 40 percent lower risk of dementia, but even those who devoted as little as 15 minutes to exercise, three days a week, cut their risk significantly. Even a short, brisk walk every day, the researchers said, can make a difference.

The trick about exercise is treating it like a drug that needs to be prescribed precisely so you can achieve the maximum benefit. There are a number of excellent resources out there for exercise; search online or in your book store for further resources.



Please join us in welcoming all of our new patients. Thank you for choosing Tree of Life Chiropractic for your chiropractic needs!

Marla A
Randy C
Shannon C
Stacia C
Travis C
Chris H
Gus K
Helen K
Norbert L
John M
Eric P
Mya S
Chris W
Joshua W

Many thanks to all of our practice members that have referred their friends and family into our practice. It is the commitment from you to promote health that will benefit the world one person at a time.

*Thank you,
Drs. Heath & Cindy*

Mission:

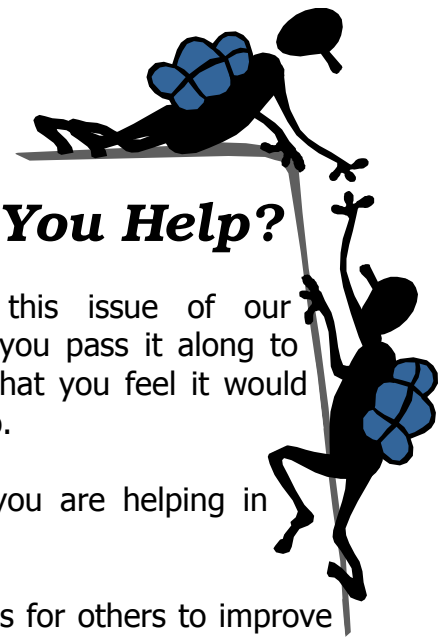
To be a premier community-based upper cervical healthcare facility giving the love and compassion our members need while serving as an example influencing and assisting the profession as God has directed us to do.

We sincerely thank you for being part of our practice.

Friends (Cont. from pg 1)

Chiropractic care is a natural health care tool not only to correct problems after they arise, but also to help prevent problems from developing in the first place. Chiropractic, which focuses on the body's ability to heal itself, focuses on the spine as the avenue of communication between the brain and every cell and organ in the body. When this natural communication system is disrupted by displaced spinal vertebrae, health problems can result.

Chiropractors help prevent health problems by identifying and correcting spinal misalignments, even before health problems occur. Regular chiropractic care can be your best health habit now and for years to come. Don't be a health care "after" person. Instead, choose the natural way to prevent problems and create a lifetime of optimal health through regular chiropractic care



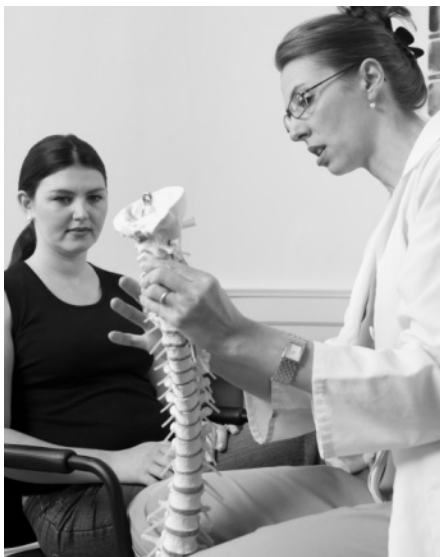
Will You Help?

After reading this issue of our newsletter will you pass it along to someone else that you feel it would be of interest to.

By doing this you are helping in many ways:

- Sharing ways for others to improve their lives.
- Introducing others to an alternative noninvasive approach to healthcare.
- Increasing the worlds energy expression by having more people be interference-free.
- Utilizing this information for the goodness of humanity before it ends up in the recycle bin.

And by doing this we THANK YOU!



Basic Truth...

Pain ... any pain - emotional, physical, mental has a message. Once we get this message and follow its advice, the pain goes away. A problem is an opportunity to discover your best effort.

Chiropractic ... puts nothing in the body ... takes nothing out of the body ... treats no disease or symptoms of the body ... makes no claim to heal ... gives nature the credit ... aligns the spine to restore vital nerve flow ... gives nature a higher potential to heal the body!

Study: Over half of Americans on chronic medicines

By LINDA A. JOHNSON, AP Business
WriterWed May 14, 12:01 AM ET

For the first time, it appears that more than half of all insured Americans are taking prescription medicines regularly for chronic health problems, a study shows.

The most widely used drugs are those to lower high blood pressure and cholesterol — problems often linked to heart disease, obesity and diabetes.

The numbers were gathered last year by Medco Health Solutions Inc., which manages prescription benefits for about one in five Americans. Experts say the data reflect not just worsening public health but better medicines for chronic conditions and more aggressive treatment by doctors. For example, more people are now taking blood pressure and cholesterol-lowering medicines because they need them, said Dr. Daniel W. Jones, president of the American Heart Association.

In addition, there is the pharmaceutical industry's relentless advertising. With those factors unlikely to change, doctors say the proportion of Americans on chronic medications can only grow.

"Unless we do things to change the way we're managing health in this country ... things will get worse instead of getting better," predicted Jones, a heart specialist and dean of the University of Mississippi's medical school.

Americans buy much more medicine per person than any other country. But it was unclear how their prescriptions compare to those of insured people elsewhere. Comparable data were not available for Europe, for instance.

Medco's data show that last year, 51 percent of American children and adults were taking one or more prescription drugs for a chronic condition, up from 50 percent the previous four years and 47 percent in 2001. Most of the drugs are taken daily, although some are needed less often.

The company examined prescription records from 2001 to 2007 of a representative sample of 2.5 million customers, from newborns to the elderly.

Medication use for chronic problems was seen in all demographics:

- Almost two-thirds of women 20 and older.
- One in four children and teenagers.
- 52 percent of adult men.
- Three out of four people 65 or older.

Among seniors, 28 percent of women and nearly 22 percent of men take five or more medicines regularly.

Karen Walker of Paterson, N.J., takes 18 prescription medicines daily for high blood pressure, diabetes, chronic back and shoulder pain, asthma and the painful muscle disorder fibromyalgia.

"The only way I can do it and keep my sanity ... is I use pill boxes" to organize pills for each morning and night, said Walker, 57, a full-time nurse at an HIV clinic. Her 69-year-old husband, Charles, keeps his medicines lined up on his bureau: four pills for arthritis and heart

disease, plus two inhalers for lung problems.

Dr. Robert Epstein, chief medical officer at Franklin Lakes, N.J.-based Medco, said he sees both bad news and good in the findings.

"Honestly, a lot of it is related to obesity," he said. "We've become a couch potato culture (and) it's a lot easier to pop a pill" than to exercise regularly or diet.

On the good side, he said, researchers have turned what used to be fatal diseases into chronic ones, including AIDS, some cancers, hemophilia and sickle-cell disease.

Yet Epstein noted the biggest jump in use of chronic medications was in the 20- to 44-year-old age group — adults in the prime of life — where it rose 20 percent over the six years. That was mainly due to more use of drugs for depression, diabetes, asthma, attention-deficit disorder and seizures.

Antidepressant use in particular jumped among teens and working-age women. Doctors attributed that to more stress in daily life and to family doctors, including pediatricians, being more comfortable prescribing newer antidepressants.

Dr. Sidney Wolfe of Public Citizen's Health Research Group said the increased use of medications is partly because the most heavily advertised drugs are for chronic conditions, so most patients will take them for a long time. He also blames doctors for not spending the time to help patients lose weight and make other healthy changes before writing a prescription.

The study highlights a surge in children's use of medicines to treat weight-related problems and other illnesses previously considered adult problems. Medco estimates about 1.2 million American children now are taking pills for Type 2 diabetes, sleeping troubles and gastrointestinal problems such as heartburn.

"A scarier problem is that body weights are so much higher in children in general, and so we're going to have larger numbers of adults who develop high blood pressure or abnormal cholesterol or diabetes at an earlier age," said Jones, of the heart association.

Dr. Richard Gorman, an American Academy of Pediatrics expert on children's medicines, said more children are taking medicines for "adult conditions" partly because manufacturers now provide pediatric doses, liquid versions or at least information to determine the right amount for a child.

The Medco study found that among boys and girls under age 10, the most widely used medication switched from allergy drugs to asthma medicines between 2001 and 2007. Gorman said that's because over the last decade, asthma care has gone from treating flare-ups to using inhaled steroids regularly to prevent flare-ups and hospitalizations.

Closing Thoughts...

The Healing Benefits of Hugging!



Hugging is healthy: It helps the body's immune system, it keeps you healthier, it cures depression, it reduces stress, it induces sleep, it's invigorating, it's rejuvenating,
it has no unpleasant side effects,
and hugging is nothing less than a miracle drug.

Hugging is all natural: It is organic, naturally sweet, no pesticides, no preservatives, no artificial ingredients and 100% wholesome



Hugging is practically perfect: There are no moving parts, no batteries to wear out, no periodic check-ups, low energy consumption, high energy yield, inflation-proof,
non-fattening, no monthly payments, no insurance requirements, theft proof, non-taxable, non-polluting...
And, of course, fully returnable.

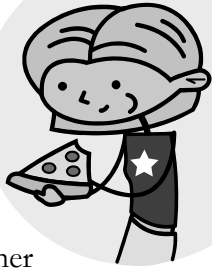
Calendar of Events

'Dinner with Doc'

When: June 2nd @ 6:30pm
Where: Huckleberry's Pizza
Why: Ways to improve your life
—and free food

The next dinner will be on the topic of 'Health, Wealth and Happiness'. Dr. Heath will be discussing how to get more out of life by one simple change in your life, but you will have to come to find out what this valuable key is.

This event will again be at our hometown Pizzeria right around the corner from the office. We will be opening up the doors at 6:15pm with appetizers and with a short presentation following with dinner provided.



Every Other Tuesday at 6:15pm

TLC 'Well'Shop. This is an informational session designed to help you understand the benefits of NUCCA care. This is open to all patients and non-patients alike. Call to reserve your seat.

Tuesday, June 2nd at 6:30

'Dinner with Doc' The topic of the evening will be Health, Wealth and Happiness. Plan on bringing your guest to this event to hear more about how you can be richer by simply being healthier.

Saturday, July 12 at 1:00pm

Hopscotch to Health This program will be at the Scott County Library in Eldridge and will focus on the need to have our children be more active and proactive ways to have them be healthier.

Dr. Heath Treharne

Dr. Cindy Treharne

Office Hours

Mon., Tues., Thurs., & Fri.

9:00-12:00 & 1:30-5:30

(309)786-TREE (8733)



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