

What is Cooperative Spinecare?

Cooperative spinecare refers to two or more healthcare professionals, who work together to preserve or restore spinal integrity while prioritizing the patient's well-being. This is sometimes referred to as collaborative or integrated care. Some spinal conditions best require a team approach.

Benefits of Cooperative Spinecare

- Reduced likelihood of unnecessary testing
- Broaden the scope of therapeutic options
- Efficient continuity of care
- Early detection and timely intervention
- Improved potential for patient recovery
- Greater potential for reduced cost

Spinehealth and Educational Resources

The spine is a critically important part of the body, without which you could not stand up, move around or have trunk flexibility. The spine is designed to protect your spinal cord and spinal nerves, which carry nerve fibers to and from the brain. This nerve function controls movements and regulates other bodily functions. It is important to keep your spine healthy if you want to live an active healthy life.

To learn more about spinehealth and available spinecare go to www.spineinformation.org. This will bring you to the Public Information Center, a database provided by the International Spine Association (ISA), which provides need-to-know information about the spine, spine disorders, diagnostic tests and available spinecare in a multimedia format. The website offers numerous resources including downloadable fact sheets, videos and brochures.

The AASP is one of the primary content providers for the online Public Information Center (PIC) offered by the ISA.

ACADEMY COUNCIL

Edward C. Benzel, M.D.
Neurosurgeon
Cleveland Clinic

Donald S. Corenman, M.D., D.C.
Orthopedic Surgeon and Chiropractic Orthopedist
Steadman Clinic

George J. Dohrmann, M.D., Ph.D.
Neurosurgeon
University of Chicago

David H. Durrant, D.C., Ph.D.(c)
Chiropractic Neurologist
Chicago Neuroscience Institute

Barth A. Green, M.D.
Neurosurgeon
Miami Project to Cure Paralysis

Vincent P. Lucido, D.C.
Chiropractic Physician
Past President, American Chiropractic Association

Stephen L. Ondra, M.D.
Neurosurgeon
formerly of Northwestern University

John V. Prunskis, M.D.
Pain Management
Illinois Pain Institute

Ruth G. Ramsey, M.D.
Neuroradiologist
formerly of Rush University

Steven Vanni, D.O., D.C.
Neurosurgeon and Chiropractic Physician
University of Miami

SCIENTIFIC CONSULTANTS

Scott Haldeman, D.C., M.D., Ph.D.
Clinical Neuroscience
UCLA

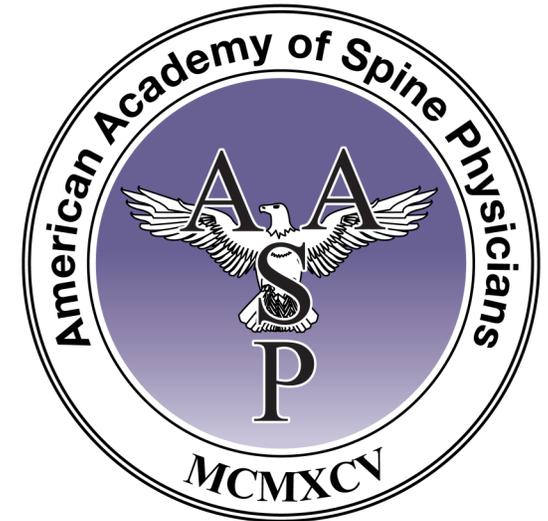
Manohar M. Panjabi, Ph.D., D. Tech.
Clinical Biomechanics
Yale University



Member Services Office
American Academy of Spine Physicians
1795 Grandstand Place
Elgin, Illinois 60123

www.spinephysicians.org

Cooperative Spinecare



American Academy of Spine Physicians

An organization of health professionals
dedicated to excellence in spinecare

www.spinephysicians.org

The AASP

The American Academy of Spine Physicians (AASP), is an organization comprised of spinecare professionals of various disciplines committed to excellence in spinecare. The primary mission of the AASP is to facilitate advancement and cooperation in spinecare by providing physicians, patients and the public with educational opportunities and resources. The AASP is an advocate of patient rights, including the patient's right to be informed about available conservative, diagnostic and therapeutic options.



Evaluation of the Spine

An initial spine evaluation typically consists of a thorough history and physical examination of the spine and extremities. Lab work may be recommended. Assessment of chronic or complicated problems may require additional testing such as x-rays, computerized tomography (CT), magnetic resonance imaging (MRI) or nuclear studies.

If persistent or progressive neurological compromise is suspected, diagnostic assessment may require specialized electrical testing of the nerves and muscles referred to as an EMG/NCV study. Evaluation of the spine may include gait evaluation to assess the biomechanics and neurological control of walking, as well as, isolated extremity muscle assessment to evaluate the integrity of the spinal cord and spinal nerves. Examination findings are used to develop and implement an individualized treatment plan.

The Order of Spinecare

The order of spinecare is quite simple and should follow a basic premise. It should begin with the most appropriate level of conservative care. The level of care should only become more aggressive if the condition requires this level of intervention. Surgery should be a last resort. The attending physician should always attempt to use the approach which offers the greatest potential for gain with the least exposure to risk.

Drugless, Non-Operative Approaches to Spinecare

There are many effective forms of non-operative spinecare. Some of the approaches are more effective when combined in a treatment program. Non-operative approaches include:

- Physical therapy
- Spinal manipulation/mobilization
- Acupuncture
- Intersegmental traction
- Axial decompression therapy
- Massage therapy
- Clinical nutrition
- Exercise therapy/physical rehabilitation
- Balance and postural training
- TENS application

Goals of Non-Operative Spinecare Include

- Reducing inflammation and pain
- Limiting scar tissue formation
- Facilitating tissue recovery
- Increasing spinal flexibility
- Promoting optimal spinal segment mobility
- Stabilizing the spine through exercise
- Restoring and protecting neurological integrity
- Improving posture and gait

Complicating Conditions

The evaluation process should include assessing for conditions or factors which could contribute to or complicate spine problems. There are many conditions which can contribute to or complicate spinal complaints. These conditions include osteoarthritis, rheumatoid arthritis, autoimmune disease, diabetes, infection, primary tumors, metastatic disease, blood-related disorders, peripheral vascular disease, hormonal imbalances and postural influences, obesity and muscular deconditioning.



SURGERY SHOULD ALWAYS BE A LAST RESORT.

Why Consider a Spine Specialist for Spinecare?

The spine is very intricate and complex. It requires the coordinated function of many nerves and muscles to perform even the most basic tasks. There are many neurological and orthopedic conditions, which can affect the spine and develop as the result of a spine disorder.

A spine physician refers to a physician of any discipline, who is trained and experienced in the evaluation and care of the spine and related conditions. A spine specialist in this context is used to refer to a non-physician, who cares for the spine. The majority of individuals will respond favorably to non-operative approaches.