

Chicago Study Documents Effectiveness of Upper Cervical Adjustment in Reducing Blood Pressure in Hypertensive Patients

A pilot study by the University of Chicago has documented that one chiropractic adjustment of a misaligned Atlas vertebra significantly reduces blood pressure in people with hypertension. The study was published in the March 2, 2007 issue of the online *Journal of Human Hypertension*.

According to lead author George Bakris, MD, director of the hypertension center at the University of Chicago Medical Center, anecdotal reports have linked blood pressure and neck pain for years. After being approached by a family practitioner, he and his team, with the help of lead chiropractic clinician, Marshall Dikholtz, DC, decided to put this theory to the test.

The study included 50 hypertensive patients. Half the patients received specific atlas adjustments and the other half received a "sham intervention" designed to be indistinguishable to the patients from an authentic adjustment. Patients were assessed immediately after, as well as at the end of eight weeks of treatment.

Patients who received the chiropractic adjustment saw an average 14 mm Hg greater drop in systolic blood pressure and an average 8mm Hg greater drop in diastolic blood pressure than

patients who were in the sham group and did not get the chiropractic adjustments. None of the patients took blood pressure medications during the eight-week study.

In commenting on the study's results Dr. Bakris said, "We were shocked to find out that we got more than double what we expected in blood pressure reduction." Patients who received the chiropractic adjustments in this study, he said, did not need to resume taking blood pressure medicine as the effect lasted for months.

These findings are significant as they further demonstrate the benefits of chiropractic care which go beyond back pain, neck pain and headaches.

(See Dr. Murphy's review and analysis of this study on Page 6).

Cough/Cold Medications Cause 3 Infant Deaths: FDA Warns of Risk

The United States Food and Drug Administration has asked all health care professionals to warn their patients of the risks of administering cough and cold medications to infants younger than two years of age. The warning follows the deaths of three infants ranging from one to 6 months of age. According to the medical examiners who conducted the autopsies of the three infants, cough/cold medications were the cause of their deaths.

The case was reported in the Centers for Disease Control and Prevention's *Mortality and Morbidity Weekly Report*. Autopsies of the infants revealed that all three infants had high levels of pseudoephedrin, which according to the CDC, were 9 to 14 times higher than they should be for recommended doses to children from 2 years to 12 years. Further examination also

showed that two of the infants had detectable blood levels of dextromethorphan and acetaminophen. Though it was not detectable, two of the infants had been given prescription medication containing carbinoxamine.

In 2006 the American College of Chest Physicians had released clinical practice guidelines advising health care professionals not to recommend cough suppressants and other OTC cough medications in young children because of associated morbidity and mortality. Additionally, according to the Centers for Disease Control (CDC), systemic reviews of controlled trials have concluded that OTC cough and cold medications are not more effective than placebo for reduction of acute cough and other symptoms of upper respiratory tract infection in children younger than 2 years.

MedWatch Sends Out Alert on RotaTeq Vaccine

The US Food and Drug Administration (FDA) has issued a public health notification following 28 postmarketing reports of intussusception in pediatric patients who received a live, oral pentavalent rotavirus vaccine.

MedWatch, the FDA's safety information and adverse event reporting program, noted in an alert that they did not know for certain that these cases were caused by the vaccine, but they did advise parents that they should see their health professionals if after vaccination the child had stomach pain, vomiting, diarrhea, blood in the stool or change in their bowel movements.

The live, oral pentavalent rotavirus vaccine, manufactured by Merck & Co., Inc. is administered for the prevention of rotavirus gastroenteritis in infants and children and is given orally as a 3-dose series to infants between the ages of 6 to 32 weeks.


The 28 cases occurred after each of the 3 doses in the vaccine regimen and almost half occurred within 1-21 days of vaccination. Although no deaths resulted, 16 infants required hospitalization and intestinal surgery; the remaining 12 had reduction of the intussusception by contrast or air enema.

The FDA admitted that additional cases may have occurred that were not reported.


Another rotavirus (Rotashield) manufactured by Wyeth had been previously approved and later withdrawn.

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