



Budincich Chiropractic Clinic, Inc

Spine-A-Line

Summer 2012 • For patients and friends of Budincich Chiropractic Clinic

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SAVE THE DATES!

**Annual Toy Drive
Dec. 3–8, 2012**

**IN EXCHANGE FOR A
NEW, UNWRAPPED TOY
(\$25 VALUE):**

**Established patients will
receive a complimentary
treatment.**

**New patients will receive
a consultation, exam and
xrays, report of findings.**

QUIT WEARING THE HEEL LIFT?

By Michael N. Budincich, DC

I am always amazed at the number of my patients who return to my care after a break of months, years or even a decade or more, and find that they are *not wearing their heel lift*. When a patient is first examined and x-rayed in our office and we find they have an anatomical short leg, a heel lift is given to level the pelvis and help *correct* the cause of their pain. Patients will most always do this while under care at about a 95% rate. And most of our patients will continue to wear the lift for years in the future, even when they are checked periodically during their routine visit.

Even though the implications of constantly wearing a heel lift versus not wearing it have been explained, and patients have been *shown the correction* on follow-up x-ray taken weeks or months after the lift was given to them, *many patients still quit wearing their lifts!* I am always

amazed that a patient will invest so many weeks or months into care, (along with the money they spent), and *get well* only to stop the procedure that got them well in the first place.

Wearing a heel lift is just a simple thing, and I have personally worn a 9-mm heel lift in my right shoe for the past 32 years. Putting my heel lift in the shoes I will wear today is as routine as bathing, shaving, or putting on my socks. It is just something I *never* forget. This needs to be a routine for all of you patients who wear heel lifts as well. Failure to wear your heel lift will simply return you to the state we found you in when you first came to Budincich Chiropractic – or worse – over a long period of time.

Because of imbalance of the pelvis, the spine subluxates and compensates by curving, laterally bending, and twisting to level the pelvis. Over time this causes disc degeneration, facet joint degeneration, abnormal growth of bone spurs, and untimely permanent chronic back pain. An extensively long period of time

without a lift, will lead to such damage that back surgery may become necessary to relieve disc pressure, or to shave down bone spurs in order to relieve back and leg pain. We certainly do not want this



WITHOUT HEEL LIFT



WITH HEEL LIFT

Continued on page 2



Dr. John Casci Joins Budincich Chiropractic Team

John Casci, DC, a local Pasadena chiropractor formerly practicing in the “Playhouse District,” has relocated his practice and joined the Budincich Chiropractic clinical team as an associate doctor. Dr. Casci graduated from the Cleveland Chiropractic College in Los Angeles and has practiced here locally for the past several years. Dr. Casci has been married to his wife Allison for 15 years and they have a 4-year-old daughter. He was born and raised in

Reno, NV, and his wife was born in Las Vegas. They live in the Historic Highlands District of Pasadena.

Dr. Casci specializes in Sports injuries, biomechanics, posture, exercise rehabilitation, and other areas. He will be a full-time doctor and will cover for Dr. Budincich during trips and on Saturdays. Dr. Casci worked as a personal trainer several years, gaining invaluable knowledge he would later apply to the care of his future patients. Dr. Casci will teach our posture and exercise classes. Budincich Chiropractic welcomes him to our team. ■

Quit Wearing the Heel Lift?, *continued from front page*

to happen to any of you, when it is as easy as keeping a lift in your shoe and getting a monthly or bimonthly adjustment.

I hope that this short article has created some guilt and/or concern with many of you who have been given a heel lift at the beginning of your care here at Budincich Chiropractic but have simply stopped wearing it. Many patients are given three or four lifts at the beginning of their care and then slowly they are lost, one by one. This is easily remedied by phoning our office or dropping by to pick up additional heel lifts. If you are living out of county or state, you can certainly give our office a call and we can put as many lifts as you would like in an envelope and mail them to you, wherever you are. Shoe repair shops can also use leather and rubber sole and heel lifts to make the lift permanent in certain shoes.

When you consider that an approximate \$4 item can save you pain and suffering and even back surgery, it seems ridiculous that anyone would forget to wear their heel lift. Many do. As many as 30% to 40% of our patients initially given a lift will, regretfully, quit wearing it after a period of months or a year or more. *Because their pain has gone away, patients think they no longer need their heel lift.* The opposite is true, though. The

use of a heel lift *prevents* the mechanical pressure that over time causes pain in the first place.

So please, for your sake first, and for your doctor’s sake, put your heel lift back in your shoe and start wearing it again. You may notice a “break-in period” upon wearing the lift if you have not worn it in a long

time. *You should also be periodically adjusted chiropractically, more frequently when breaking back into the use of a heel lift until you are stabilized once again.* It is almost like beginning treatment all over again, particularly if you are in pain. If you are lucky enough to not have pain and have returned to heel lift use, just put it back in your shoe and readapt to its use. The future of your back’s health will depend on it.

Many of our patients were given an initial heel lift and when they felt good discontinued their lift use without a second x-ray to determine if the lift should be a *permanent* part of their life from that point forward. Approximately 90% to 95% of our patients wind up using the lift that we initially placed in their shoe, but a few end up not needing a permanent lift or need to have the size changed. If you are one of these patients that left our care early before a second X-ray could be

Many patients complain that they quit wearing the lift because it does not fit their shoe properly or it slides around or is sometimes painful on their heel. There are remedies for each of these circumstances.

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Heel, Arch, and Forefoot Pain Cases Increase

In the last two years, there seems to be a large increase in the number of cases being diagnosed with heel spurs, plantar fasciitis, metatarsalgia, Morton's neuroma, foot pronation, and "flat-footedness".

Most of these cases are diagnosed in our female patients because so many spend time in sandals, "chunky" heels and shoes, and pumps. Women as a general rule seem to spend more time in sandals, flip-flops, and bare footed than the average man because of shoe styles, pregnancy, and more time spent on their feet. Although there are many cases of men's heel spurs and plantar fasciitis from their long hours of work on their feet, women seem recently to be getting the majority of cases because of shoe styles.

Men as a general rule wear more "sensible" shoes, usually with no higher than 1-inch heels which are chosen more likely for comfort than for style. Foot problems in men stem basically from prior years competing in athletics, such as power sports and running, and also the wearing of shoes that have no arch support, such as old style "Vans" and "Converse All Star" shoes.

If you have been suffering with pain on the bottom of your feet, arches, or heels, **particularly in the morning when you get up and for the first few steps you take after arising from a chair**, you likely have a heel spur or it's precursor plantar fasciitis. If you suffer sharp pain in the forefoot when stepping awkwardly a certain way or when

wearing a certain pair of shoes, you might be suffering from metatarsalgia. If there is a hard callous on the bottom of your foot on the second, third, and fourth toes just outside of the ball of the foot, you are likely suffering from a dropped metatarsal head and metatarsalgia. If you have flat feet and your arches angle in, you likely suffer from foot pronation.

All of these conditions can be remedied with custom-made orthotics that are cast in our offices by Dr. Budincich. The investment in a pair of custom orthotics can give immediate and long-term relief to chronic foot problems and pain. A small investment in your feet now can pay dividends years in the future. A good pair of custom orthotics usually last between five and fifteen years, depending on the patient's activities, body weight, and materials used in orthotic fabrication. As I dictate this article, the orthotics that I am wearing are at least fifteen years old and are still working fine. The amortized cost of custom orthotics during the time of their useful wear is an average of five to fifteen cents per day during their useful lifetime.

What other investment can you make in your health that costs so little and lasts so long? Call to schedule an appointment for a foot evaluation soon with Dr. Budincich to determine if orthotic devices can remedy your arch, foot, and/or ankle pain and fatigue. ■

"DINNER WITH DOC"

Once or twice per month our office conducts a workshop called "Dinner with Doc" or in some cases "Lunch with Doc." These are informative talks about chiropractic healthcare and the differences between chiropractic, medicine, and other health care arts. We provide a healthy meal for our patients while we discuss details about how chiropractic can alter their lives. We discuss lifestyle changes you need and how to get better.

We encourage all patients to attend this program within the first one to two months of your initial care in order to have full under-

standing of what we are trying to do.

Non-patient guests are also welcome to these events and are given an opportunity to accept a complimentary exam at the end of the program, so it can be a real savings for your family and friends if they attend too.

Dr. Casci will be teaching our "Posture and Exercise Program" concurrently as well.

For the dates of our next Dinner with Doc, please call Alondra or Christie at our office at 626-792-3390 to schedule yourself, your spouse, and/or a friend for this program. ■

Chiropractic in Baja

The year of 2012 is going to be another busy year with Dr. Budincich's medical missions. His non-profit 501(c)(3), *Manos Con Alas Ministries*, has already completed three clinics so far, with at least two more scheduled in June and October this year.

Dr. Budincich carries dentists, chiropractors, nurses, medical doctors, and physician assistants as well as medical and dental assistants to minister south of the border several times each year to provide free services. For the most part, these clinics take place south of Ensenada, between Ensenada and San Quintin.



April 24, 2012 – Dr. Bud with his Baja volunteer team for that trip: Kevin Baines, Andrew Cox, Noah Swanson, Nolan Haney, Dr. Marc Haney, Maria Carvajal, Turner Haney, Dr. Alicia Bergman and Solomon Kim.



Dr. Bud with members and pilots from Flying Samaritans' El Fuerte, Sinaloa, Mexico clinic, on a side trip to "pet" California Grey Whales at Laguna San Ignacio, Baja. March 4, 2012.



Dr. Bud with the doctors of "CODET" of Tijuana, June 7, 2012.



(Left) June 9, 2012 – Dr. Bud performs a basic vision exam on a San Quintin valley resident.

(Below) Hamming it up with Dr. Bud's son, Nick Budincich, who volunteers on a regular basis for the free clinics in Baja.

The two areas we normally serve are Santo Tomas, a valley famous for vineyards and vegetables, and San Vicente, also a rich, inland agricultural valley. The free clinic services performed are mostly for migrant farm workers and their families who live within these valleys.

We care for children and formerly abused women at a women's shelter in San Vicente as part of our patient load when we serve in Baja.

Three to four single-engine airplanes comprise a typical mission team when we leave El Monte airport at 8:00 a.m. on a Friday morning and return in the late afternoon Sunday after 1½ days of clinic work.





(Left) The mobile dental clinic that Dr. Bud custom built for these medical missions will bring much-needed dental care to the population served, once completed. It is currently parked at the rear of our clinic.

(Below) Dr. Bud with one of the many needy migrant workers who received chiropractic care and a wrist support (April 28, 2012).



A typical weekend begins with serving Friday afternoon and evening in Santo Tomas at a migrant farm camp, bringing the dental, medical, and optometry services to the people there. The team then holds an all-day Saturday clinic at a permanent mission complex in the downtown area of San Vicente, again providing various services. A typical clinic weekend will include 200 patient visits for all specialties combined. Dr. Budincich also doubles as a lay optician and frequently gives out 50 to 100 pairs of prescriptive eyewear in



April 28, 2012 – A vital component of the weekend Baja medical missions is keeping all our volunteers and staff well-fed. Flying the provisions for all the meals into Mexico is a major part of the payload the planes carry. Much-needed medical supplies, eyeglasses and luggage make up the rest of the cargo.

a weekend in addition to performing chiropractic adjustments and supervising chiropractic students who come down to serve with him. Another part of Dr. Budincich's services is that of "head cook" for the weekend. He brings down quality food from the U.S. to provide the team their sustenance for serving over the weekend. This past trip was filet mignon!

You may read about these missions at www.manosconalas.org. Dr. Budincich would encourage any readers interested in serving and using their medical, dental background or just an interest in serving in any way possible to contact him regarding helping on one of the trips. Translators, cooks, handypersons, and anyone with a heart willing to serve can be included in these team trips. Although medical and dental personnel are the most important aspect of the service, frequently empty airplane seats are filled with general volunteers who round out the service in support of the team, meal preparation, and aiding patients and children they bring in any other way possible. Find out how you could be a part of this important mission. ■



Nick Budincich to Attend Stanford U

Dr. Bud is very proud to announce that his son, Nicholas Budincich, will be attending Stanford University this Fall on a Track Scholarship.

Here are some of Nick's recent track and scholastic achievements:

- USA Junior Nationals, Bloomington IN, 6-17-12
- CA State 25 lb. weight throw first place 2012
- CA State indoor shot put 2nd place 2012
- CA State discus 2011 2nd (Loyola school record)
- Loyola High School 2012 Science and Math top faculty department awards at commencement ceremonies.

Congratulations Nick!

Quit Wearing the Heel Lift?, *continued from page 2*

taken, then you need to get back into our offices for a follow-up X-ray *with the lift in your shoe* to find out what correction has been achieved and what more might be required.

Taking a lift out of your shoe or failing to wear it on a regular basis is much like going through years of orthodontic care on your teeth and then not wearing your retainers that keep the teeth straight after the dentist has already spent years correcting the teeth. Why would you throw away all the time, effort, and money of getting the teeth straight only to allow them to partially shift back to where they were because you failed to maintain the correction. This exact same analogy is true when you quit wearing your heel lift.

Many patients complain that they quit wearing the lift because it does not fit their shoe properly or it slides around or is sometimes painful on their heel. There are remedies for each of these circumstances. In an athletic shoe there is a molded rubber insert on the bottom of the shoe. This molded section can be lifted up, the heel lift attached to the sole under it, and the rubber section placed back over it, hiding the lift. This not only keeps the heel lift from slipping, but it also makes it more comfortable to wear. In open-backed sandals, the heel lift can be permanently glued to the shoe if it is worn frequently and simply removed when the sandals wear out and then placed in another shoe. A *softer* rubber lift can help with comfort.

A shoe repairman can also add lifts to the bottom of a shoe, such as our friends at NOVIS on the corner of Colorado Boulevard and Allen Avenue, Pasadena, CA,

(just behind Federico's Bakery). Cesar Lua will be happy to modify your shoes in order to make the heel lift work in whatever footwear you have. Many women who wear high heels have their "long leg shoe shortened," which has the *same effect* as lengthening the short leg. This gives a more aesthetic look and more comfort in wearing a lift. Lifts do not fit certain high heel shoes, and this is a good alternative by simply shortening the high heel of the shoe permanently and replacing the heel tip.

On your next appointment, if you have any questions about how to keep your lift in your shoe more of the time, just ask me and I will be happy to demonstrate or explain it further to you.

You are not abnormal in the fact that you may have a slight short leg. Studies have shown that as many as 50% of the adult population has this problem. And probably 30% or 40% of that number actually need to wear a lift.

If you are a parent and you have not had your *children checked* for anatomical short leg, do so before back pain starts later in life. It may also prevent athletic injuries, such as those that occur in my USC track and distance runners over time. Athletes tend to have back problems from short legs earlier in life because they place so much strain on their body and they are on their feet too much, performing their sport. In more sedentary people, it may take years before a back pain problem develops and a heel lift need is discovered, because less time is spent on their feet. My back pain started at age 14; don't let your children develop an injury like I did before the short leg is discovered. ■

Annual Spring Blood Drive: Another Success

Our annual Spring BCC Blood Drive took place on April 20, 2012, was sponsored by our office with the Blood Mobile parked at the Pasadena Conservancy of Music next door because the City of Pasadena no longer permits the Blood Mobile to be parked on the street.

One year ago we moved the Blood Mobile's parking next door to comply while our reception room was used as the donation center office. We would like to have the city allow the blood mobile

Our patients, our staff, and other friends donated about 15 pints of blood to the American Red Cross during our event.

on Hill Avenue for better visibility.

Our patients, our staff, and other friends donated about 15 pints of blood to the American Red Cross during our event. We would like to thank all of our patients who participated in this Blood Drive, and we hope that you will give

perennially, so that Los Angeles area blood supplies can be well stocked in case of surgeries and emergencies. ■

DELTA PULSE: An Amazing Addition to Our Practice

The Delta Pulse machine, which we placed in our office approximately 18 months ago, has been giving amazing results with many of our patients who have chronic pain. Delta Pulse is a Pulsed ElectroMagnetic Field generator (PEMF) and is at the cutting edge of medical technology.

One of our shoulder pain patients who suffered from chronic tendinitis and bursitis was given three treatments approximately a year ago, having had shoulder pain for three to four years running. After the third treatment, her pain completely disappeared and it has never returned.

Another patient I spoke to in April 2012 had chronic pain in her shoulder, which for over a year had made it difficult to dress, sleep, or raising her arm above her head. In one single treatment with Delta Pulse, her pain completely resolved and her range of motion was completely restored.

A gentleman patient in his early 60s was experiencing urinary frequency during the night due to chronic benign prostatic hypertrophy (BPH). He asked if the Delta Pulse could help him with this problem, and Dr. Budincich said he did not know, but they could give it a trial. After a few visits, the Delta Pulse was decreasing his need to get up at night in order to void. He also happily reported that relations with his wife had also improved, surprisingly. He received treatments over a two- to three-month period and most of his night-time urinary frequency resolved.

Several months ago, a female patient in her 50s came in with chronic symptoms of RSDS (reflex sympathetic dystrophy syndrome, also called “complex regional pain syndrome” as a new name for her condition). This pain syndrome usually occurs after a trauma and is characterized by sympathetic nervous system reacting wildly with debilitating pain in the involved region. This includes skin changes, burning sensations, and hyper-

sensitivity to touch. This woman was seeing a doctor in Santa Monica, one of the three doctors in Southern California who has a Delta Pulse machine, but she found it was too far to drive. After looking at the Delta Pulse website, she found that Budincich Chiropractic Clinic

had the machine available. She transferred her care to our office and has had a few treatments thus far, enabling her to get off or significantly decrease many of her medications she was taking prior to receiving the Delta Pulse treatments. This is an exciting discovery since there are so many RSDS sufferers with no other option but to be heavily medicated and off work.

The Delta Pulse has mainly been used in our office for low back pain, neck and shoulder nerve (radicular) pain, hip bursitis, knee arthritis, carpal tunnel syndrome and tendinitis of the elbow with great success.

If you are suffering with a chronic pain syndrome that has been unresponsive to other methods or medications, you may want to try a 10-visit course of the Delta Pulse machine here at a discounted fee available to our patients. If you have any specific questions about the Delta Pulse or about scheduling an appointment, please email Dr. Budincich at dr.bud@drbud.com and put in the subject line “Delta Pulse Question.”

We are learning much about the Delta Pulse applications as it is a relatively new modality and treatment method. It is in wide use at racetracks around the country in the rehabilitation of horses and their running injuries. Apparently, seven have been sold to trainers at our own local Santa Anita Race Track for use on horses, but it is interesting to note that only three doctors in the Southern California area have the machine for patient use. As the word gets out about the great results of this wonderful modality, more doctors will come aboard and use it. ■



Delta Pulse PEMF therapy being applied to a clinic patient's right shoulder.



Michael N. Budincich, D.C.
John Casci, D.C.
Glen Suh, L.Ac.

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ACUPUNCTURE – DRUGLESS PAIN THERAPY

As many of our patients know from having received it already, acupuncture has been available in our offices for well over four years. After Dr. Wright resigned as our acupuncturist in 2010, the past two years our patients have enjoyed the excellent services of Dr. Glen Suh. Dr. Suh is an great conversationalist. He makes patients feel very comfortable during their acupuncture treatment, despite it being a procedure that can cause some patients anxiety.

Acupuncture offers an excellent alternative to pain medication and chiropractic, by being natural and not physically traumatic. Some of our long-term Medicare patients may not be able to handle stronger chiropractic adjustments, as they reach their 80s and 90s, and acupuncture offers a good alterna-

tive if they are sensitive.

Many of our patients who have suffered industrial injuries and have exhausted their chiropractic benefits. Many times they get a great deal of relief from acupuncture while still under insurance coverage by their employers' carriers. Acupuncture is currently covered by not only the vast majority of "group insurance" carriers but also by the work injury carriers. This saves our injured workers any out-of-pocket expenses, since acupuncture does not yet have a statutory visit limit as chiropractic and physical therapy do.

Call the office and talk with Dr.



Nick Budincich receiving several Chinese medical arts treatments at once, including acupuncture with electric stimulation and cupping. See story on Nick's acceptance into Stanford University on a track scholarship on page 5.

Suh personally about how acupuncture may be able to help your chronic pain or health problems. By the way, Dr. Suh also offers discount cash fees for acupuncture services. ■