VAN DAM CHIROPRACTIC

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SLEEP POSTURE & SPINAL RECOVERY

What Happens to Your Spine While You Sleep

Sleep is not passive. While the body is at rest, the spine is actively decompressing, rehydrating intervertebral discs, and consolidating the physical repairs initiated by daytime movement. That process works best when the spine is in a neutral position throughout the night. When it is not, the muscles, joints, and discs that are supposed to recover are instead under low-grade mechanical stress for eight hours.

The position most people default to, and the one most consistently supported by research, is side sleeping with a pillow that keeps the head and neck level with the rest of the spine. Stomach sleeping is the most problematic, forcing the cervical spine into sustained rotation and compressing the lumbar facet joints for hours. Back sleeping works well for many people but requires adequate support under the knees to prevent the lower back from arching excessively.

The Pillow and Mattress Equation

Pillow height matters more than most people realize. A pillow that is too high or too flat pushes the cervical spine out of alignment and creates the kind of sustained muscle tension that produces morning stiffness and headaches. The right height depends on shoulder width, sleep position, and individual spinal curves, which is why there is no single universal answer. Mattress firmness follows similar logic. A surface that is too soft allows the hips to sink, creating a lateral curve in the lumbar spine. Too firm, and pressure points at the shoulder and hip prevent the muscles from fully releasing. Medium-firm mattresses have the strongest support for spinal health and pain reduction in side sleepers.

How Chiropractic Fits Into the Picture

A spine that carries restriction and misalignment into the night cannot fully recover regardless of sleep position or mattress quality.

Research published in the Journal of Manipulative and Physiological Therapeutics found that patients receiving chiropractic care reported significant improvements in sleep quality, along with reductions in pain, suggesting that spinal function and sleep quality are closely linked.[1]

Chiropractors also assess posture and movement patterns to indicate how a patient sleeps, often identifying cervical or lumbar issues that trace directly back to nighttime positioning. Small adjustments to sleep habits, combined with regular spinal care, can produce meaningful improvements in how rested and mobile patients feel each morning.

DID YOU KNOW?

- May is National Posture Month in the United States, a designation supported by the American Chiropractic Association to raise awareness about spinal health and ergonomics.
- Studies show that spending just 20 minutes outdoors in natural settings measurably lowers cortisol levels, the primary stress hormone that contributes to muscle tension and spinal pain.
- Lilacs, one of May's signature blooms, have been shown in studies to have a calming effect on the nervous system when their scent is inhaled, similar to lavender.

POSTURE, CONFIDENCE & MENTAL HEALTH

The Body Shapes the Mind

Most people understand that emotions affect posture. Sadness produces slumping. Anxiety tightens the shoulders. Fear pulls the chest inward. What is less commonly understood is that the relationship runs in both directions. The body does not just express mental states; it actively influences them. Research in embodied cognition has established that physical posture sends signals back to the brain that shape mood, self-perception, and even hormonal output.

A series of studies led by social psychologist Amy Cuddy at Harvard demonstrated that individuals who held upright, expansive postures for as little as two minutes showed measurable changes in cortisol and testosterone levels compared to those who held collapsed, contracted postures. The upright group reported feeling more confident and performed better in high-pressure evaluations. The spine, it turns out, is not just a structural column. It is an active participant in how a person feels about themselves.

What Chronic Poor Posture Does to Mood

Sustained forward head posture and thoracic kyphosis, the rounded upper back common in desk workers and device users, do more than create pain. They restrict diaphragmatic breathing, reducing oxygen intake and increasing the physiological markers of stress. They limit the upward visual field, which research suggests subtly reinforces low mood. They compress the chest cavity in ways that affect heart rate variability, a key marker of nervous system resilience.

Patients who present with chronic neck and upper back pain frequently also report fatigue, low motivation, and mood disruption. Addressing the spinal component of that picture does not replace mental health support, but it removes a significant physical contributor that is often overlooked entirely.

Chiropractic's Role in the Posture-Mood Connection

Research published in Frontiers in Psychology found that upright seated posture significantly improved mood, self-esteem, and energy levels in participants with mild to moderate depression compared to a slumped posture condition.[2] Chiropractic care supports postural correction by restoring spinal mobility, reducing the muscular tension that pulls the body into collapsed positions, and improving the neurological feedback that helps the brain maintain upright alignment naturally.

Patients often report feeling lighter, more alert, and more energetic following adjustments, effects that go beyond simple pain relief. The spine and the nervous system are inseparable, and caring for one inevitably influences the other.

SHOULDER & NECK TENSION IN DESK WORKERS

Somewhere between the morning commute, eight hours at a desk, and an evening on the couch with a phone, the average adult spends the majority of their waking hours in a forward-flexed position. The head drifts forward, the shoulders round inward, and the upper back curves into a gentle hunch. This pattern has a clinical name: upper crossed syndrome. It describes the predictable combination of tight, overactive muscles in the chest and neck paired with weak, inhibited muscles in the deep neck flexors and mid-back.

The consequences are not limited to cosmetic concerns about posture. Every inch the head moves forward from its neutral position adds roughly 10 pounds of effective load on the cervical spine. A head that sits three inches forward is placing the equivalent of 40 pounds of stress on the structures designed to support 10 to 12. Over time, that load accelerates disc compression, facet joint wear, and the chronic muscular tension that most desk workers accept as a normal part of their week.

What Chiropractic Addresses

Upper crossed syndrome does not resolve on its own, and stretching the chest or strengthening the back in isolation rarely produces lasting change if the underlying spinal restrictions are not corrected. Restricted segments in the cervical and thoracic spine alter the muscle activation patterns that create and maintain the problem. Chiropractic adjustments to those segments restore normal joint motion, reduce nerve irritation, and give the muscular system a better foundation to work with.

A study published in the Journal of Electromyography and Kinesiology found that spinal manipulation produced immediate changes in muscle activation patterns in patients with neck pain, supporting the case that joint function and muscular function are tightly linked.[3] Patients who combine chiropractic care with targeted postural exercises tend to see faster and more durable improvements than those who address only one side of the equation.

Practical Steps That Make a Difference

Screen height, chair position, and screen distance all contribute to the amount of postural stress that accumulates throughout the day. A screen positioned at or just below eye level, a chair that supports the lumbar curve, and brief movement breaks every 45 to 60 minutes significantly reduce cumulative load. These changes do not require an expensive ergonomic overhaul. Most of the benefit comes from awareness and small, consistent adjustments made over time.

RESEARCH AND CHIROPRACTIC

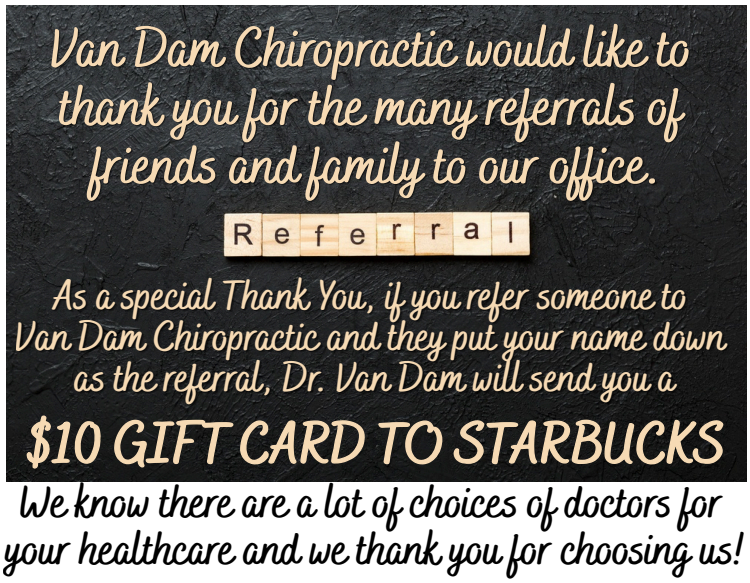
THERE SEEMS TO BE NO END TO THE CONDITIONS THAT RESPOND TO CHIROPRACTIC CARE – PHYSICAL AS WELL AS PSYCHOLOGICAL CONDITIONS. THAT IS BECAUSE CHIROPRACTIC DOES NOT "TREAT" A PARTICULAR CONDITION. CHIROPRACTIC CARE "TREATS" OR MORE ACCURATELY "CORRECTS" A SERIOUS INTERFERENCE TO BRAIN, NERVOUS SYSTEM AND ENERGY FUNCTION KNOWN AS THE SUBLUXATION. NO MATTER WHAT CONDITION YOU OR A LOVED ONE MAY HAVE, YOU WILL ALWAYS FUNCTION BETTER WHEN FREE FROM SUBLUXATIONS. CHIROPRACTORS ARE UNIQUELY TRAINED TO LOCATE AND CORRECT SUBLUXATIONS. ENJOY THIS MONTH'S CASES AND SEE MORE NEXT MONTH.

Balance, Falls & the Aging Nervous System

Nobody likes to think about fall risk, but for older adults, it is one of the most serious health concerns. A single fall can change everything. Research published in the Journal of Manipulative and Physiological Therapeutics[4] followed older adults receiving chiropractic care and found significant improvements in balance, coordination, and the nervous system's ability to accurately sense body position in space. Those are not small gains. They translate directly into steadier footing, faster reflexes, and a reduced likelihood of the kind of fall that leads to a fracture or a hospital stay. The spine is the central highway of the nervous system and keeping it moving well keeps the whole system sharp. That matters at every age, and it matters more with every passing year.

Spinal Manipulation & Low Back Pain

Most people who wake up with acute low back pain head straight to the medicine cabinet. It is an understandable response, but a study published in the Annals of Internal Medicine[5] suggests there is a better option worth knowing about. Researchers compared spinal manipulative therapy directly against prescription medication and found that chiropractic care matched medication for pain reduction, produced fewer side effects, and left patients significantly more satisfied with their care over the long term. The difference makes sense when you consider that most low back pain has a mechanical origin. Adjusting the structure addresses the source. Medication manages the sensation. Patients who made that distinction reported a significantly better overall experience.



We know there are a lot of choices of doctors for your healthcare and we thank you for choosing us!

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