

Chiropractic / Back and Neck Pain/ Spine Rehabilitation & Exercise
Dr. George DeFranca, Chiropractor

FAQs

If you've never received chiropractic treatment, it's natural to ask about what to expect at the office. Our office understands and will gladly answer your questions. Below you'll find a few of the questions we often hear from patients. For more information, or to make an appointment, please call us at 508-835-2271.

Q: I don't want to be adjusted. Is this a necessary part of the treatment?

A: Every patient is unique. Chiropractic adjustments are appropriate for certain conditions, but are not absolutely necessary. Sometimes our most effective treatment is the education you will receive about the spectrum of treatment options that are recommended for you.

Q: Can you help with spinal stenosis?

A: Spinal stenosis is a common condition in the elderly where a narrow spinal canal pinches on a spinal nerve root. Non-surgical care such as exercise and physical therapy is the treatment of choice. We have helped many patients with this condition. If you are a candidate for surgery we would recommend a consultation for you.

Q: How long is the typical visit?

A: The first visit consisting of a consultation and examination can be 45-60 minutes. Treatment visits can be anywhere from 5-20 minutes depending on need.

Q: Do you offer massage therapy?

A: Soft tissue massage is an integral part of most treatment programs. We do have a massage therapist that does massage on site by appointment only.

Q: Can you help with a pinched nerve?

A: Yes. Pinched nerves in the neck or low back cause arm or leg symptoms such as numbness, tingling or weakness. We will perform the necessary examination to diagnose this condition. The first line of treatment includes ergonomic or lifting advice, physical therapy, and exercise. Often anti-inflammatory medicine prescribed by your medical physician is important too. About 20% of the time pinched nerve symptoms worsen in the first month or fail to resolve over a 1 to 3 month period. Such cases require additional testing such as with an M.R.I. and more invasive treatments such as epidural injections or surgery. We will make appropriate referrals in these instances.

Q: Can I see you for headache pain?

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A: Absolutely. Chiropractic along with postural/ergonomic advice is a proven approach for many headaches. Occasionally, multidisciplinary management with other specialists is required and a team approach is utilized.

Q: What type of treatment is used for knee problems?

A: Initially, the knee disorder is assessed and diagnosed. As an example knee tendinitis will require a thorough evaluation of the foot and hip as well as the knee. Proper foot wear and balance exercises along with a specialized patello-femoral tracking exercise program is utilized.

Q: If I can't raise my arm overhead should I see an orthopedist?

A: Typically, we will evaluate you and begin a physical therapy/pain management program. However, an orthopedic consultation and M.R.I. evaluation will be necessary if no progress is seen within a few week period. Soft tissue massage, gentle exercises, electrical muscle stimulation, and heat or ice treatments are usually quite effective.

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Q: How long does it usually take to get better from a back pain episode?

A: About 80% of people with lower back pain are 80% better within 2-4 weeks.

Q: If I have sciatica do I need surgery?

A: If your sciatica is persisting for 2-3 month then you are definitely a surgical candidate. If it is causing progressive muscle weakness you would be a surgical candidate even sooner. If you have any bowel or bladder incontinence or both legs are "giving way" then a more urgent surgical consultation is required. However, 90% of people with sciatica will improve with conservative care.

An interesting scientific study showed that in the "long term" at 2 years or 10 years there was no difference in outcome in those having surgery vs. those that did not. An eminent neurosurgeon Edward Caragee, M.D. from Stanford University wrote that the decision to operate is not a medical one, but is a social one. If you are not improving within 12 weeks then you may get better quicker with surgery. But, eventually even without surgery if you can manage the pain you will have the same result either way.

Q: If my M.R.I. shows a herniated disc can you help me?

A: Herniated discs are very common. It has been found that they are present in people who have no symptoms - even 20 year olds! Experts now say that spinal changes such as herniated discs and arthritis are related to age (like graying hair or wrinkling skin) not symptoms. It appears that the difference between a person with a herniated disc who has no symptoms and one who has symptoms has to do with how their body is coping or stabilizing their back. At LA Sports and Spine we specialize in enhancing your functional ability to stabilize your back so that the disc

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bulge is not as relevant.

Q: If I have had back or neck surgery can I see you post-operatively?

A: Yes. I have seen many patients after their surgery. I work closely with each surgeon so we can forge a team approach to the timing and intensity of your rehabilitation program.

Q: What is the most important thing I can do for myself for back pain?

A: Stay active!

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