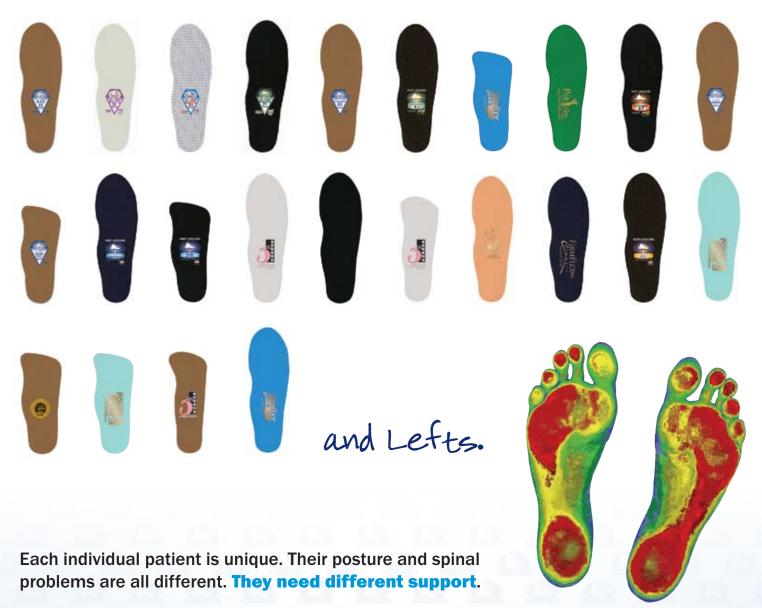


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Transitions May June 2009

New York Chiropractic College

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TRANSITIONS is published six times a year.

Errata: In the "NYCC Library Offers Unmatched Wealth of Resources" article on page 16 in the March/April issue, the telephone number for the library is 315-568-3244.

Transitions surveys current literature and reports items bearing relevance to featured *Transitions* topics. Our staff makes every effort to relate the information in a relaxed and unencumbered style. We therefore, in many cases, dispense with citations that might otherwise detract from the magazine's overall readability. While we attempt to ensure that the information provided is accurate, timely and useful, we nevertheless acknowledge the possibility of human error and changes in medical sciences. The authors and New York Chiropractic College consequently cannot warrant that the information is in every respect accurate or complete, nor is the College responsible for any errors or omissions or for the results obtained from the use of such information. Rather, readers are encouraged to confirm the information with other sources. The information herein is for educational purposes only and is presented in summary form in order to impart general knowledge relating to certain clinical trials diseases, ailments, physical conditions and their treatments. The data should not be used for diagnosing or treating a health problem or a disease, nor is it a substitute for sound medical advice. Content herein does not replace the advice and care of a qualified health-care provider. Note also that rapid advances in the medical field may cause this information to become outdated, incomplete, or subject to debate. New York Chiropractic College does not recommend or endorse any specific tests, products, procedures, opinions, or other information that may be mentioned herein. Reliance on any such information provided is solely at your own risk. Finally, practitioners are encouraged to acquaint themselves with their states' rules and regulations relating to professional practice.

Chairman's Message

NYCC Celebrating 90 Years of Excellence

Unity Day and Homecoming - A Great Opportunity to Reconnect



Dr. Robert E. Daley, Chairman of the Board of Trustees

In July, New York Chiropractic College proudly celebrated ninety years of excellence – an amazing achievement!

Homecoming Weekend included well-attended postgraduate educational instruction, a golf outing at the Seneca Falls Country Club, and an exhibitor fair complete with healthcare vendors anxious to introduce and demonstrate their latest products and services. Unity Day was jam-packed with activities for the whole family, including an Alumni Dinner Dance enjoyed by many at the beautiful Canandaigua Inn on the Lake.

Add to that a Student-Alumni mixer and a fireworks display for the whole community!

Many of our alumni made it a special point this year to visit NYCC's beautiful campus in Seneca Falls, reconnecting with fellow alumni and reminiscing with old friends. Aside from getting to catch up with old classmates, this year's Homecoming celebration provided a wonderful opportunity to relax and share ideas likely to contribute to the success of all who attended.



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In Memoriam

NYCC Trustee Emeritus, Nathan D. Novick, DC, Dies at 94

New York Chiropractic College Trustee Emeritus and longtime College supporter died recently after having served the chiropractic profession since before World War II.

Nathan D. Novick, DC, age 94, of Sarasota, Fla., formerly of New York City, died on May 12, 2009. Dr. Novak graduated from the Columbia Institute of Chiropractic (now NYCC) in June 1936 and was hired as a faculty member. In 1943, he was appointed to NYCC's Board of Trustees, serving until 1959. He returned to the board in 1973 and remained until June 1989. Throughout, he maintained a private practice in New York City.

When asked, NYCC President Frank Nicchi, DC, MS, recalled Dr. Novick's wisdom, his intelligence and unerring memory, adding, "Perhaps even more striking was Nate's profound sense of humility. He will truly be missed here at the College, and throughout the chiropractic community."

President Nicchi (NYCC '78) was a faculty member of NYCC during much



Dr. Nathan Novick

of Novick's time at NYCC. "A '36 graduate of Columbia Institute of Chiropractic, Nathan was a significant asset to his *alma mater*, sharing his extensive expertise as a faculty member with today's finest chiropractors. His selfless service on our board speaks not only to his efforts on behalf of chiropractic education, but more specifically to his commitment to excellence

here at NYCC," he said.

Dr. Richard E. Carnival, NYCC Trustee Emeritus, lauded Dr. Novick as a great supporter of NYCC as well as "the finest gentleman you'd ever want to meet," describing him as an "intellectual giant." "He was a kind man with a vast knowledge and loyalty to the college," said Carnival.

Dr. Novick was actively involved with his profession. He actively participated with the Chiropractic Association of New York, the New York State Board for Chiropractic, the Peer Review Board of New York, National College of Chiropractic, the International Chiropractors Association, the American College of Chiropractors and participated as a charter member of the American Chiropractic Association. In addition, Dr. Novick was a recipient of numerous awards throughout his distinguished career.

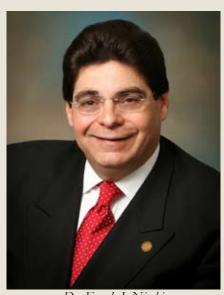
Survivors include Dr. Novick's wife of 70 years, Gladyce, daughter, Miriam S. Sweet, and grandson, Austin.

NYCC President Dr. Frank Nicchi Named ACC President

New York Chiropractic College President Frank J. Nicchi, DC, MS, was recently elected president of the Association of Chiropractic Colleges (ACC), a consortium of some nineteen chiropractic colleges located in the United States, Canada and New Zealand.

According to David O'Bryon, JD, the association's executive director since 1996, the organization assists its member institutions by providing leadership in chiropractic education, research and service.

Nicchi's election took place during the 2009 Association of Chiropractic Colleges-Research Agenda Conference (ACC-RAC) held in Las Vegas on March 12th. Nicchi has been a member of the ACC Board of Directors since September 2000 and was previously the organization's vice president, treasurer and chair of the institutional statistics committee. "I am honored to be the president of the ACC," Nicchi said. "It's a vital organization that advances scholarly activity within the chiropractic academic community and promotes high standards throughout the profession." Dr. Nicchi also serves on the Board of the Academic Consortium for Complementary and Alternative Health Care (ACCAHC) as the ACC representative.



Dr. Frank J. Nicchi

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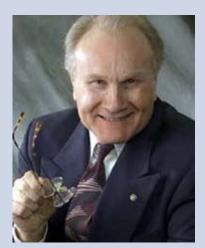
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Headaches

Nine out of ten people in the United States suffer from headaches. There are many alternative treatment options available. Which is right for you?



What is a headache?

Headaches are pain which manifests above the eyes or the ears, behind the forehead, or in the back of the upper neck. They can be classified into two categories: primary, including migraine, tension, and cluster headaches and secondary, such as sinus headaches. Ten-

sion headaches are the most common and like migraines are more prevalent in women. Men are more likely to suffer from rare cluster headaches which usually occur in adults 28-30 years old.

Causes

Migraines affect 28 million people in

the United States – children as well as adults – and occur when the temporal artery enlarges, stretching the nerves that coil around the artery causing a release of chemicals that enlarge the artery even more and cause inflammation and pain. There is evidence that tension headaches work the same way, but are often caused

by stress. Cluster headaches do not have a clear cause; however alcohol and cigarettes have been known to trigger attacks.

Secondary headaches are caused by associated diseases ranging from minor to



serious or even life threatening. Causes include withdrawal from caffeine, brain tumors, strokes, meningitis, and subarachnoid hemorrhages. Sinus headaches occur when the sinuses produce mucus that drains out of the channels of the nose and the air-filled cavities in the forehead, cheekbones, and behind the bridge of

the nose, become inflamed, preventing the outflow of mucus and causing pain. Allergic reactions, tumors or an infection can cause inflammation. In some people, a tension or secondary headache may trigger a migraine. This is called a "mixed" headache disorder.

Symptoms

Tension headache will often cause a band-like tightness or pressure above the eyebrows, in the back of the head or the upper neck with mild pain that affects both sides of the head. They are infrequent and occur without a pattern, but some people have them every day.

Migraines

Migraines trigger the sympathetic nervous system, which controls the body's "fight or flight" response, and can lead to nausea, vomiting and diarrhea. They also impair the absorption of oral medications, often making medications ineffective in treating migraines. The sympathetic activity also decreases blood circulation and increases sensitivity to light and sound. Migraine sufferers may see an aura about 10 to 30 minutes before the migraine occurs, which can appear as flashing lights, silver streaks, or blurred vision and numbness and tingling in the fingers and may be caused by constricting blood vessels or an electrical phenomenon in the brain. Often relief is found by lying down in a quiet, dark room until the attack is over.

Clusters

Cluster headaches may last weeks or months and are separated by pain-free periods of months or even years. Pain typically occurs once or twice daily lasting 30 minutes to an hour and a half. They are usually excruciatingly painful and occur around or behind one eye which can become red, inflamed and watery, and the nose on the affected side can become congested. They can cause people to be very restless.

Sinus headaches often cause deep, constant pain that intensifies with sudden head movement or straining. They can be especially uncomfortable, as they are usually accompanied by nasal discharge, feeling of fullness in the ears, and facial swelling.

Diagnoses and Treatment

People who occasionally suffer from tension or mild migraine headaches usually diagnose themselves and use over-the-counter (OTC) pain relievers (analgesics), which are safe and effective for short-term relief. The two classes of OTC analgesics are acetaminophen (Tylenol) and non-steroidal anti-inflammatory drugs (NSAIDs). There are also two types of NSAIDs: aspirin and nonaspirin. Ibuprofen (Advil, Nuprin, Motrin IB, and Medpren) and naproxen (Aleve) are non-aspirin NSAIDs. Prescription NSAIDs contain more of the active ingredient in each pill than OTC NSAIDs. Acetaminophen is easier on the stomach than NSAIDs; however it can cause severe liver damage in high doses. NSAIDs reduce the inflammation that causes pain. Aspirin NSAIDs prevent platelets, the small particles in the blood, from forming blood clots. Non-aspirin NSAIDs have a similar effect but do not last as long.

Topicals

Topical products used to relieve headaches have had little outside testing and often contain a very diluted amount of any "active" ingredient. Although one company claims its product works through the nerves, skeptics say any relief is most likely a result of the placebo effect. The placebo effect occurs when patients assume the medication they are taking will make them feel better and trick their bodies into getting better. The change in health is not caused by the substance, but is due to the patient's desire to get better or a pure coincidence.

For people with severe migraine headaches, migraine-specific abortive medications may be prescribed. Triptans and ergot preparations are examples of these medications that counteract the cause of the headache by narrowing the arteries. Migraine sufferers may also use prophylactic treatment, which is used to

Continued on next page

Headaches

Continued from previous page

shorten the cycle of headaches.

If you get headaches frequently, it may be a sign of a more serious problem. Your doctor may perform special blood tests, brain scans, or a lumbar puncture. Doctors can determine if these tests are necessary through a physical examination and by learning the mode of onset and location of the headache, the age of the patient, or if the patient has suffered any recent head trauma, fever, neck stiffness, seizures or mental deterioration.

Alternative Treatments

Instead of OTC drugs, sufferers often turn to alternative treatments such as chiropractic or acupuncture. Chiropractic has been shown to be effective in treating tension headaches and those in the neck. Spinal manipulation can be especially helpful to people who spend most of their day in one fixed position, such as sitting in front of a computer, which can

cause joint irritation and muscle tension, leading to a headache.

Acupuncture has been proven effective in migraine prevention, and according to Tim Tanaka, PhD, DAc, director of The Pacific Wellness Institute in Toronto, it may also be helpful during a migraine attack. Tanaka says he minimizes activity of the blood vessels in the head and neck by limiting the acupuncture points to those in the arms and legs. Since emotional stress can be a cause of headaches, Tanaka uses acupuncture needles to manually stimulate the subepidermal space just below the surface of the skin. This technique has positive physiological effects because it activates the parasympathetic nervous system, which helps people relax.

Aromatherapy is another way to alleviate milder headaches. Peppermint, lavender, chamomile or eucalyptus oil can be rubbed into the skin at the temples, neck or shoulders or added to a bath.

Prevention

Migraine headaches often have triggers that are different for each individual. Some may be affected by red wine, nitrates in lunch meat, monosodium glutamate (MSG), hormone changes during menses, fasting, bright lights, odors, cigarette smoke, alcohol, caffeine, or just a stressful day. By keeping a diary and tracking diet, activity, mood and the occurrence of headaches, individuals may be able to discover what triggers their headaches. In order to prevent the onset of these headaches, it is recommended to go to sleep and wake up at the same time each day, exercise regularly and avoid fasting. On its website, the American Chiropractic Association (ACA) suggests that people who spend most of their day in the same position take a break and stretch every 30 minutes. The ACA also says to avoid clenching teeth and dehydration to help avoid headaches.

A few additions to one's diet may also reduce headaches. A well balanced diet and a clinical nutritionist can help.

The Bright Side of Headaches

Though many people would prefer never to get headaches, it's been shown that people who have a sensitive nervous system often succeed in school and artistic endeavors. Typically they are conscientious, organized and aware of others' feelings. Many famous artists and musicians lived with migraines. It may not ease the pain, but it helps to know you're not alone. For more information on headaches visit the National Headache Foundation at www.headaches.org.



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Chiropractic Care for Headaches

Joseph Pfeifer, DC (NYCC '84), Chief of Staff at NYCC's Levittown Health Center and Dean of Chiropractic Clinical Education; and Assistant Professor Christopher A. Marchese, DC (NYCC '93), contributed to this article

Scientific studies now back up what chiropractors and their patients have known for decades: Chiropractic is an effective treatment for headaches. Chiropractors can provide relief to those suffering from benign headaches, which make up more than 98 percent of all headaches. In fact, headaches account for 5 to 10 percent of new chiropractic patients.

Common benign headaches include migraine, tension-type headaches (TTH), and cervicogenic headaches, which originate in the neck. Most headache diagnosis is based on a thorough history, including details relating to headache location, onset and clinical course, and such provoking factors as mechanical or environmental triggers. Sufferers of cervicogenic headaches are often unaware of neck symptoms because the pain in the head is so intense. The true cause is discovered only after the chiropractor palpates the upper cervical spine. Patients often respond well to cervical adjustments, myofascial treatment, stretching, and therapeutic modalities including heat, ultrasound and transcutaneous electrical nerve stimulation (TENS). Postural and ergonomic modifications and relaxation techniques are also helpful.

Migraine and TTH are less understood and are often linked to neck pain and certain triggering factors such as stress, hormonal fluctuations, and certain types of food. Because sensory systems that transmit painful sensations from the upper neck and head intermingle in the spinal cord, it is thought that neck pain can actually trigger migraine and TTH, and vice versa. Spinal manipulation has been found to reduce headache activity and severity. Because migraine, TTH and cervical spine dysfunction each have different causes, they can co-exist in the same patient, and can be triggers for each other, a multifaceted approach - including addressing trigger factors, chiropractic treatment, rehabilitation exercises, nutritional and herbal remedies, behavior therapy,



acupuncture and medical management - is more likely to be effective.

Research

In 2001, researchers at the Duke University Evidence-Based Practice Center in Durham, N.C., completed a study begun six years earlier by an Agency for Health Care Policy and Research (AHCPR) panel. Researchers focused on treating tension and cervicogenic headaches. When compared to an attention-placebo control group, patients who received cervical spinal manipulation for cervicogenic headaches saw immediate improvement in severity as well as sustained improvement in frequency and severity compared to those given soft-tissue therapies (massage).

Researchers also compared the effects of chiropractic on tension headaches with the effects of amitriptyline, a commonly prescribed drug for headaches. Of the patients receiving a low dose of the drug for four weeks, 82 percent reported adverse side effects. Only 4 percent of those who received manipulation reported adverse side effects, and they also saw a reduction

in headache frequency and severity.

A similar study conducted at Northwestern College of Chiropractic and funded by the Foundation for Chiropractic Education and Research (FCER) corroborated these results. Researchers divided 126 patients, ages 18 to 70, into two groups randomly assigned to receive spinal manipulation or amitriptyline for six weeks. Both reported similar improvements. However, four weeks later the spinal manipulation group reported reductions of 32 percent in headache intensity, 42 percent in headache frequency, 30 percent in over-the-counter medication usage, and 16 percent improvement in functional health status. Those in the amitriptyline group reverted to their original levels reported at the beginning of the study. As in the Duke University study, 82.1 percent of the amitriptyline group suffered side effects such as drowsiness, dry mouth, and weight gain, compared to only 4.3 percent of the spinal manipulation group.

Continued on page 34

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An Oriental Medicine Approach to Headaches

By Colleen LoFaro-O'Neill, MAc, LAc

According to Oriental medicine, headaches arise from many factors including emotions, overwork, excessive sexual activity, diet, local trauma/accidents, childbirth, and external influences such as wind and dampness.

Oriental Medicine will consider the type and location of the pain, combined with all of the other information gathered during the initial interview to determine the diagnosis and the appropriate treatment. Each of the following types of headaches would receive a different diagnosis and therefore utilize different points for treatment.

- Throbbing, distending, pulsating or bursting pain that tends to be in a fixed location, often behind one or both eyes or bilaterally located along the temples and side of the head, and is frequently accompanied by nausea or vomiting. It is worse in the afternoon, and there may be visual disturbances such as flashing lights, auras or blurred vision.
- Dull pain along the forehead or temples that moves from one side to the other.
- Chronic headaches with intense, very severe pain that is described as drilling, stabbing or boring in a fixed location. The pain is often worse at night.
- Acute onset with the potential for severe pain, but the duration is short. Depending on whether the external influence is

heat, cold or damp, the location and description of the pain will vary.

Treatment

Acupuncture treatment involves using points located distally, not on the head, as well as locally, at the site of pain. The points used will address both the overall diagnosis as well as the specific symptoms. Adjunctive techniques involve heat



treatments with the herb Artemisia vulgaris (moxibustion, "moxa") or a conventional heat lamp. Additionally, practitioners use massage technique gua sha or suction "cupping," both of which promote the circulation of qi (energy) through the meridians. Therapeutic effects may be

enhanced with specially designed tiny interdermal needles or magnets or through Chinese herbal medicines.

Patients often prefer acupuncture since it does not involve the potential side effects of prescription and/or overthe-counter medicines. In addition to correcting the body's energetic imbalances, research suggests there are four physiological ways that acupuncture may work to address headaches. One is by regulating pain centers in our brains to change the way we perceive pain. The second is by stimulating the release of neurotransmitters, which relax the body and decrease pain. Acupuncture relaxes the muscles, which tend to tense up because of pain and thereby decrease blood flow to and from the skull, causing migraines. Finally, acupuncture relaxes the mind and increases one's ability to deal with stress.

A Multidisciplinary Approach

Nutrition and chiropractic are also effective in the treatment of headaches. Eating too little or too much, or the consumption of troublesome foods, can produce headaches. Food intolerances are common and typically require an elimination diet to determine whether they exist. Structural imbalances can best be addressed through chiropractic and muscular therapy. Poor stress-management can also impede improvement; therefore, it is essential to work on stress-relief techniques. One suggestion is to take 15 minutes a day for relaxation and selfcare. This is a challenging task for many and will require follow-up support from the healthcare provider. Appropriate multidisciplinary approaches can result in significant improvement.

"One suggestion is to take 15 minutes a day for relaxation and self-care."

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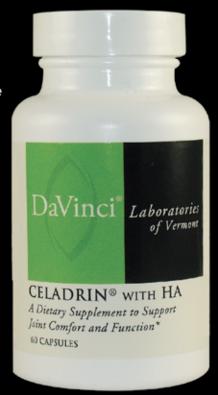
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Meet the New Director of NYCC's School of Applied Clinical Nutrition...Anna R. Kelles, PhD

Anna Kelles grew up in Trumansburg, N.Y., not far from the campus of NYCC. Her interest in nutrition began at an early age when, during her junior year of high school, her father became ill and the family traveled to the Kushi Institute in Beckett, Mass., to learn about macrobiotics. Raised vegetarian, Kelles and her family became macrobiotic – a holistic lifestyle that recognizes diet quality as a fundamental building block to physical health as well as mental, emotional and spiritual well-being.

Education

Kelles earned dual bachelor's degrees from Binghamton University (BU) in 1997 – one in biology and the other in environmental studies, with a focus on tropical ecology

and nutritional biochemistry. She did an independent study of macrobiotics at the Kushi Institute, culminating in a thesis paper in 1993 entitled "Bridging the gap between Eastern and Western medicine." During her junior year she worked as a teaching assistant for a course entitled, "Biochemistry: Metabolic Aspects." Kelles received the Rosefsky Abroad Studies Scholarship and the David L. Boren National Security Education Program Scholarship and spent her final undergraduate year studying in Ecuador, South America. During her study abroad she explored the nutrition and health of low-income and indigenous populations, sustainable agricultural techniques as a means of providing long term nutrition, and women's health issues. In the second half of her study abroad she organized and executed an independent project in the small village of El Chota, in the Valle de Chota ("Chota Valley"), a poor, isolated area predominantly populated by decedents of the slave trade who settled the area after emancipation. Through the assistance of a local women's group called the Club de Almas de Casa (Club of the Souls of the Home), she performed in-depth interviews with women in the community with one or more children living at home. Kelles investigated the negative health impact of poor diet on the health status of children and developed an action plan to improve their nutritional status. Her studies helped confirm the belief that small-scale agricultural stability, nutrition and health are intrinsically linked.

Following graduation she returned to Ecuador and spent more than a year volunteering as an ecological guide in the Amazon jungle and designing a study-abroad program for a local foundation. She recalls an instance where local villagers followed ant-eater birds to ant colonies where, once a year, flying ants leave the nest to form new colonies. The villagers placed a lamp outside the nest to mimic the sun. Ants left the nest, flew towards the artificial sunlight and were captured, roasted and eaten by the villagers. A pot of the roasted ants was then taken to the lodge, where tourists



Anna R. Kelles, PhD

were challenged to try the delicacy. One of the tourists popped a handful into his mouth and declared, "Mmmm...just like popcorn!" Kelles declined the offer. "As a lover of adventure, I'm embarrassed to admit, that I draw my line at bugs!" she said.

During her final year in Ecuador, Kelles taught biology in a private, bilingual high school. Upon returning to the U.S., she began a doctoral program in the Department of Nutrition, which is part of the Gillings Global School of Public Health, at the University of North Carolina at Chapel Hill. She served in a number of roles at the university, including teaching assistant for a Maternal and Child Health Nutrition graduate course, research assistant for the Russia Longitudinal Health and Monitoring Survey, and research assistant for

the Cebu Longitudinal Health and Nutrition Survey. She earned her PhD in Nutritional Epidemiology in May 2008. Her dissertation research explored intergenerational differences in the impact of urbanization and improved economic standing on obesogenic dietary and physical activity patterns over time among a sample of Filipino mothers and children.

NYCC

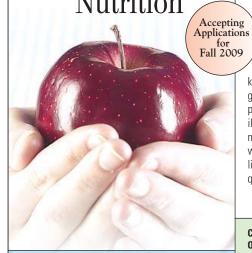
Dr. Kelles was part of the adjunct faculty at Ithaca College when she learned of an opening for a director of the School of Applied Clinical Nutrition at NYCC. Having had a lifelong relationship with both chiropractic and acupuncture healthcare, Kelles was immediately drawn to the opportunity to work at NYCC. "It is second nature for me to see nutrition as a fundamental building block for all successful healthcare plans," she said. She envisions collaboration between nutrition and other holistic healthcare as a necessary direction for preventative medicine in the United States. "Over the long term, a person's healthcare plan will not be sustainable unless that individual is nutritionally stable. Acupuncture treatment and chiropractic adjustments are more likely to stick if a person is nutritionally sufficient," she says, noting that often, nutritional deficiencies aid in the initial physiological breakdown leading a patient to seek care. As she tells her students, "Your health is only as good as the nutritional building blocks provided."

Whole Foods or Synthetic Supplements?

When asked her thoughts on the nutritional advantages of whole foods, Dr. Kelles had this to say: "I feel that maintaining proper nutrition is indispensible to attaining optimal health. This is the case to a large extent because micronutrient deficiencies will likely sabotage even the most meticulously prescribed and managed

Continued on page 27





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Alumni Spotlight

Justin Whittaker, DC (NYCC '99)

Justin Whittaker, DC (NYCC '99), had the great fortune to attend the Olympics in Beijing, where he treated track and field athletes as a member of the medical staff. His path leading to this opportunity is one worth reading.

Background

Prior to attending New York Chiropractic College, Whittaker completed a two-year college program, credentialing as a paramedic and earned a Bachelor of Science degree from the University of Waterloo, in Ontario, Canada. After 12 years of working as a paramedic, he suffered an on-the-job injury that did not respond to conventional medicine. Faced with surgery, he looked for alternatives. Two weeks of chiropractic care and he was fully recovered and bound for a new career. He enrolled at NYCC and completed a second bachelor's degree (in kinesiology) from the University of Waterloo. Graduating cum laude from NYCC Whittaker received the Distinguished Service Award in recognition of his leadership as a teaching assistant in the anatomy lab.

NYCC

Justin says he chose NYCC because he respected the College's science-based philosophy. "I was, and still am, an anatomy junky," he confessed, lauding NYCC's pro-section labs and level of instruction. While matriculating at NYCC, Whittaker learned chiropractic sports therapy from Dale Buchburger, DC, an associate professor at the time. Dr. Buchburger treated Whittaker's shoulder with a combination of techniques. The treatment demonstrated that chiropractic benefited more areas of the body than simply the neck and spine. "That experience set me on a path which ultimately shaped my practice as a CCSP [certified chiropractic sports physician] working with elite athletes," Whittaker recalls.

The Next Step

After graduating, Whittaker continued



Justin Whittaker, DC, and Shalane Flannagan, Womens 10,000 meter Bronze medal winner at the 2008 Olympic Games in Beijing

his education in Active Release Technique (which he now teaches and serves on the association's board of governors), Graston, Cox flexion distraction, Thompson technique, Gonzales rehabilitation technique, and CCSP. He is currently in private practice and owner of the Whittaker Wellness and Performance Center LLC in Portland, Ore., with his wife of 16 years, Barbara, a naturopathic physician. The clinic focuses on sports injury and biomechanical evaluation.

An avid windsurfer, runner and marathoner, Whittaker has strong ties to the running community and, for the last five years, has contracted with Nike to provide treatment for athletes in their Elite Running Program. Clearly, Justin has made his mark. "We have developed a reputation of working hard to sort out complex biomechanical running deficiencies and utilize chiropractic, ART, biomechanical evaluation, and rehabilitation to restore normal bodily function," he explains. This relationship has resulted in travels to Asia,

Europe, and all corners of the USA, where he has provided medical support to Olympic and World Championship athletes.

Beijing

During the build-up before the Beijing Olympics Whittaker's office was treating four or five Olympic athletes weekly from throughout the U.S. "I was fortunate to follow these athletes to China, and watched in awe as 15 of our patients achieved their dream of winning an Olympic medal!" He treated many of the winning athletes moments before their races. "I would look up and see the Olympic Torch burning overhead. It still gives me goose bumps."

Words of Wisdom

To students, Whittaker counsels, "Stay hungry to learn! We are fortunate to work in a profession that is rich and diverse and opportunities for growth are readily available." He claims that doctors who stay engaged in their personal and professional growth will remain excited about their practices and their patients. Remain humble. "As soon as you think too much of yourself, you have stopped growing and have missed another exciting opportunity," he adds.

Dr. Whittaker credits his wife, Barbara, for helping him to understand the value of his clinical expertise and all he could provide for patients. She stressed how placing a fair market value on one's service ensures professional longevity. "I think all students leave college a little naïve to the rigors of the business world. We love what we do and would provide treatment for free if we could, just to help out our fellow man," she admits. Nonetheless, such sentiments do not translate into a profitable business model. "A new doc who places a low value on their service is, in essence, telling patients that the service they are providing isn't worth that much, and nothing could be further from the truth," Justin adds.

Faculty Spotlight

Christopher A. Marchese, DC (NYCC '93)

Chris Marchese thought, when he graduated with his Doctor of Chiropractic degree from New York Chiropractic College in 1993, "Wouldn't it be great to come back some day and teach?" Well, sixteen years later that thought became reality.

Dr. Marchese, salutatorian of his NYCC class and graduating magna cum laude, earned his Bachelor of Science in Chemical Engineering from the New Jersey Institute of Technology in 1982. After College, he worked for Stauffer Chemical Company, a Fortune 300 company, for several years and lived in California and Connecticut. Though employed, he was not happy with his job. He entertained the thought of a chiropractic career due to the relief he got from neck pain and headaches while in college.

His chiropractor, it turned out, was an NYCC graduate who spoke very highly of the College. Upon taking a look, Marchese found that NYCC "really measured up." At the age of 30 he found himself going back to school, attending an academic institution he felt was "top notch." After graduation, Marchese engaged himself in private practice in Somerville, N.J., from 1994 until 2008.

Teaching

Born in the Bronx, N.Y., and raised in northern New Jersey, Marchese long held an interest in teaching. A couple of years after returning to the classroom to earn a diplomate from the International Board of



Dr. Christoher Marchese

Chiropractic Neurology in 2006, he taught anatomy and physiology at Middlesex County College in Edison, N.J.

Marchese kept an eye out for opportunities at NYCC over the years and contacted John DeCicco, DC, his former instructor, to see whether there were any teaching positions available. When an opening did become available, he jumped at the opportunity and, in 2009, became a member of the NYCC faculty as an assistant professor in the Chiropractic Clinical Sciences department. He serves as lead instructor in the Upper Extremities class and assists in several chiropractic technique and diagnosis classes.

Advice

Marchese offers these words of advice for current students: "Learn as much as you can, strive for constant improvement in all areas of patient care, and keep a patient-centered approach." He encourages people: "be true to your personality," adding, "People can tell if you are not comfortable with what you are doing." He also urges students to collaborate with other providers. One way to do that is to send well written, concise reports that are easily understood by other practitioners outside the profession.

Headaches

Headaches are something Marchese has successfully treated: "Cervicogenic headaches respond very well to chiropractic treatment," he says. He adds that neck pain and tenderness are common in patients with migraine and tension-type headaches and these patients tend to have better outcomes when the musculoskeletal component is addressed. He favors a multifaceted approach for these patients that may include chiropractic, nutrition, acupuncture and herbal remedies, behavioral therapy, and medical referral.

Favorites

Dr. Marchese enjoys exercising and golf. He joins his wife of three years, Tracey, in the enjoyment of outdoor activities, attending live theater, and exploring the Finger Lakes region.

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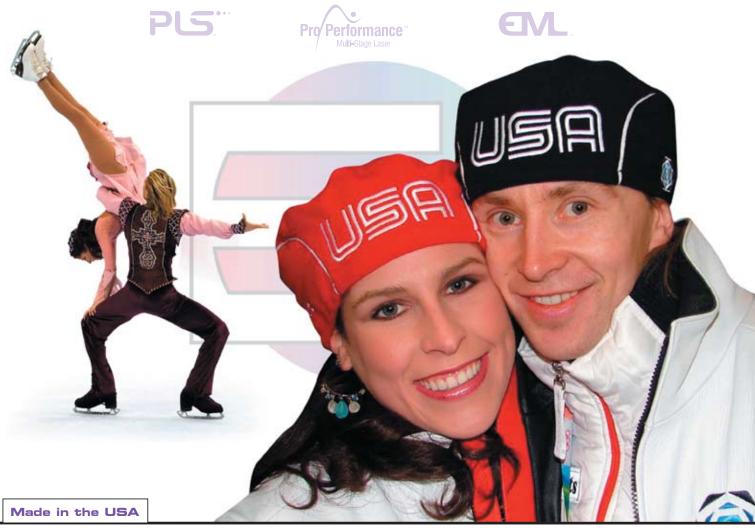


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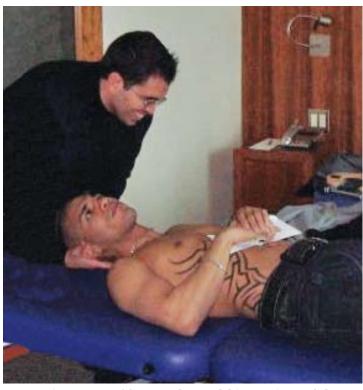
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News Briefs

Ricardo J. Ferreras Olivieri, DC (NYCC '08) - Treating Puerto Rican Boxer Miguel Cotto



Ricardo J. Ferreras Olivieri, DC, (NYCC '08) and Miguel Cotto

What chiropractor wouldn't want to be treating World Boxing Organization (WBO) welterweight division champion Miguel Cotto — considered by some to be the best "pound-for-pound" fighter around. The honor to do so goes to Ricardo J. Ferreras Olivieri, DC, (NYCC'08), who runs a private practice in San Juan, Puerto Rico. During Cotto's strenuous training regimen two months prior to the main event, Olivieri attends training sessions and sparring matches to give the boxer regular chiropractic adjustments (diversified) at least three times a week. "I am a part of his team of healthcare professionals that also include a massage therapist and an athletic trainer," said Dr. Olivieri.

The Boxer

The famous boxer represented Puerto Rico as an amateur in the lightweight and light welterweight divisions for several international events including the 2000 Olympic summer games; 1999 Pan American Games; and 1998 Junior World Championships, where he won a silver medal. He began his professional career in 2001, during which time he defended the title of WBO Junior Welterweight Champion successfully a total of six times. After ascending to the welterweight division, he defeated Carlos Quintana for the vacant WBO welterweight championship. Cotto successfully defended this title against Oktay Urkal, Zab Judah, Shane Mosley and Alfonso Gómez before losing it to Antonio Margarito. On February 21, 2009, he defeated Michael Jennings with a technical knockout to win the current WBO welterweight championship. Cotto's overall career boxing record is 34 fights -

33 wins with 27 of the wins by technical knockouts.

The Doctor

Ricardo J. Ferreras Olivieri completed his undergraduate studies at University of Central Florida, majoring in business administration, and thereafter worked as office manager for his father, a well-known cosmetic dentist in Puerto Rico. The young office manager yearned for a more handson approach with patients and discovered chiropractic. Chiropractic's philosophy intrigued him - it was the only practice where "the doctors do not seem stressed out, patients are not nervous to see their doctors, and the atmosphere is perfect." What's more, patients return to health without the use of drugs or surgery! He attended both Universidad Sagrado Corazon and Universidad InterAmericana in Puerto Rico for the necessary undergraduate course work to enter chiropractic college. A doctor Olivieri shadowed in Puerto Rico recommended New York Chiropractic College because she, too, was a graduate and had a positive experience - referring to NYCC as "The Harvard" of chiropractic. The College appealed to Olivieri because of its stellar reputation and its multidisciplinary approach to chiropractic.

Curiously, Olivieri did not focus on treating sports injuries at NYCC. After treating Cotto, however, he has a newfound interest in this area and has made it his goal to achieve certification as a chiropractic sports physician. His practice is family-based and he works in conjunction with his father's dental practice. He gets many referrals from the dental patients who are also in need of chiropractic care. Father and son plan to expand into a multidisciplinary practice in the future.



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News Briefs

Integrative Healthcare: Working Together for Optimal Patient Care

The Student Appreciation Event is part of NYCC's continuing Ernest G. Napolitano Lecture Series — established in an effort to bring to life NYCC's commitment to diversity, tolerance, inclusiveness, and excellence in education and research. By presenting students with various, diverse viewpoints, we ensure that their ultimate choices will be well-informed, thoroughly considered and self-determined.

In an effort to help integrate the various disciplines taught at NYCC or, as the College's Postgraduate Continuing Education Director Thomas Ventimiglia, DC, put it, "to help clarify our common mission to advance the health and well-being of those we serve," NYCC assembled a panel discussion.

Healthcare in the United States is undergoing a metamorphosis. According to Ven-

timiglia, the natural healthcare professions have never been in a better position to integrate into the emerging healthcare system. He urged students "to participate not only as team members, but also as team leaders."

The panelists*, representing nutrition, chiropractic and acupuncture, offered insight into their respective professions and



(L to R) Executive Vice President of Academic Affairs Michael Mestan, BS, DC; NYCC President Frank Nicchi, DC, MS; *Panelists: Paul Dougherty, DC, assistant professor and principal investigator on two federally funded research projects at NYCC; Colleen LaFaro-O'Neill, MAc, LAc, assistant professor at the Finger Lakes School of Acupuncture and Oriental Medicine of NYCC; Mary Balliett, DC, MSACN, former acting dean of the School of Applied Clinical Nutrition and currently an assistant professor at NYCC; director of Postgraduate and Continuing Education and event facilitator Thomas Ventimiglia, AA, DC.

counseled treatment and referrals from their respective professional standpoints. Although their management protocols differ, all acknowledged a common challenge in being able to communicate effectively with healthcare professionals not versed in the languages of nutrition, chiropractic, or acupuncture and Oriental medicine.

So, how can practitioners effectively treat patients without conflicting with other healthcare providers? "We can all play nice," said AOM's Ms. Colleen LoFaro-O'Neill. Chiropractic's Paul Dougherty, DC, explained that although there may be a desire to work together with other professionals, the expenses of life and the need to pay bills can sometimes drive unethical practices. Long treatment plans and unnecessary modalities may

bring in money, but "results are what matters," said Nutrition's Mary Balliett, DC, MSACN. The panel also stressed the importance of taking a thorough health history. "Every work-up of every profession requires a proper history," Dougherty stated. "If the ultimate goal is patient wellness, refer out," added O'Neill. Balliett concurred, stating, "What's best for the patient is best for [us]."

Meet the New Director of NYCC's School of Applied Clinical Nutrition...Anna R. Kelles, PhD

Continued from page 18

healthcare treatment plan. Until recently, the mainstream healthcare community has supported the consumption of synthetic supplements as an acceptable vehicle to improve nutritional status. Although healthcare policy change is painfully slow, the tipping point towards whole-foods nutrition may come from the growing evidence identifying non-nutrients in whole foods as critical players in the metabolism of many micronutrients. In the end, substantial investments have been made to research, which has ultimately verified the axiom: moderation, variety, and simplicity are the keys to optimal nutrition and health."

The Future of the Nutrition Program

Dr. Kelles envisions several top priority goals for the Master of Science in Applied Clinical Nutrition (MSACN) program at NYCC. Among them is a smooth transition to an online program that expands the offerings beyond the acupuncture and Oriental medicine (AOM) and chiropractic audience. She plans to nurture a strong collaboration between chiropractic and AOM, while reaching out to medical, nursing, and public health audiences. She states, "Casting our net wide will encourage dialogue between holistic and allopathic healthcare."

Personal Favorites

Dr. Kelles lives in Ithaca, N.Y. with her two cats, Chai and Bug. She enjoys sports, especially "Ultimate Frisbee," and loves music, dancing and singing. She makes homemade soaps and mosaic art, and loves to cook.

News Briefs

Three from NYCC Run from Rim to Rim to Rim - Sullivan, Lynch and Ellis Conquer the Grand Canyon

The Team

Who would brave dehydration, snakes, coyotes and wild animals - running 48 miles through dangerous, ankle testing terrain along the rim of one of the world's largest canyons throughout the night, just for sport?

Look to NYCC's Edward Sullivan, DC, assistant professor of technique in Chiropractic Clinical Sciences, and Mike Lynch, director of admissions. The two have been running together for 10 years and have completed several marathons and ultra-marathons. Nic Ellis, DC, an August 2008 NYCC alumnus currently living in Idaho, frequently joined the two on these runs when he was a student at the College.

After graduating from college and no longer participating in organized sports (hockey and baseball), Lynch wanted to stay active and compete. He has been running competitively for about 25 years. Dr. Sullivan has been running since high school, participating in cross country and track, and did marathons while a chiropractic student at Northwestern Health Sciences University in Minnesota. Sullivan completed several ultra-marathons, most notably the Bull Run 50 Trail Race in Virginia. Dr. Ellis began running at age 17 and has completed 13 marathons and an Ironman triathlon. He met the other two during his first trimester at NYCC.

The three share a passion of testing their limits. Sullivan came up with the idea of running from the South Rim of the Grand Canyon to the North Rim and back in less than a day, something he had wanted to do for quite some time. Based on research done by him and Ellis, they estimated that this feat has been accomplished by fewer than 200 people.



Nic Ellis, DC and NYCC's Director of Admissions Mike Lynch

The Preparation

Lynch says he typically runs 35 to 40 miles a week, but to prepare for this run he added in several longer runs of two hours or more. About three weeks before going to Arizona, the three did a 15-mile run at Mendon Ponds, outside of Rochester. They began training in earnest in early January, but really didn't have the opportunity to acclimate to the heat they would encounter, which was a concern.

Having hiked from the South Rim of the Canyon to the Colorado River several years ago, Ellis knew that it would be tough to double the distance as a run. To prepare, he ran on trails in the western foothills of the Rocky Mountains – sometimes in the morning before daylight with a headlamp to simulate running at night in the Grand Canyon. "Training in the mountains definitely helped," said Ellis, "but nothing could compare fully to the trails in the Grand Canyon."

The Challenge

The day of reckoning! The trio met in Las Vegas on Tuesday, May 5, and drove approximately four hours to the South Rim in Grand Canyon National Park the next day. Wanting to start as early as possible, and to avoid some of the glaring heat, and ensure that they wouldn't wind up running past dark the next day, they left the South Rim at midnight on Thursday, May 7. The three "ran" from the South Rim of the Grand Canyon on the Bright

Angel Trail to the Colorado River and then picked up the North Kaibab Trail and ran to the Cottonwood Campground and up to the North Rim (24 miles one way). Then back to the South Rim – in total, 19 hours. The trail was very rugged. Some places dropped more than 1,000 feet. They ran in darkness for the first 15 miles. When daylight came so did the heat. Temperatures on the canyon floor at midday shot well past 100 degrees.

Traversing down 9.5 miles of trail to the Colorado River, they crossed over to the floor of the canyon and climbed another 14 miles up to the North Rim, arriving at approximately 9:00 a.m. A brief 10-minute rest and they started back. A pipeline provided water at six locations. They each kept an eye on one another to ensure they were eating, hydrating, and taking salt tablets. Though physically tired, they remained in good spirits as they "headed for home." The last nine miles were the hardest, said Ellis. The trail was too steep, the sun too hot, and they were too tired to run another step. They relied heavily on each other for support and safety.

Critters

"We saw a few interesting creatures



(L to R) Nic Ellis, DC (NYCC '08), NYCC's Assistant Professor of Technique in Chiropractic Clinical Sciences Edward Sullivan, DC, and Director of Admissions Mike Lynch



Mike Lynch and Nic Ellis, DC

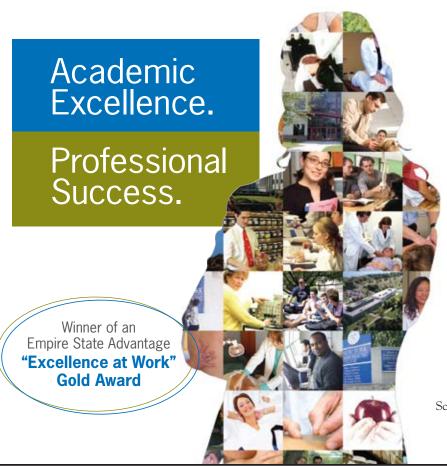
including a scorpion, a rattle snake, and something that looked like a raccoon that was tearing into a backpack he found searching for food," Lynch said. "Outside of the heat, our biggest challenge was staying hydrated, fueled with salt and other energy products, and motivated to keep moving." There are no aid stations

or vehicles of any sort on the trail, so if the three ran into a problem, they were on their own. Overall, none had any real issues physically other than a few blisters.

The Victory

Checking their watches and calculating the time it had taken to cover distances and the time remaining, as they got closer to the finish the 19-hour goal became a hypnotic motivational force. They emerged from the trail at 7:00 p.m. Thursday night - 18 hours, 57 minutes, and 6 seconds later, having covered 48 miles from rim to rim to tim. They were sore and tired, to say the least, but extremely proud of their accomplishment. "Our reward was returning to Las Vegas for two days of relaxation and a bit of slots and blackjack," Lynch quipped.

While on the trail, they were certain they would never attempt this again; but just a few short hours after completing the journey, they were planning another trek. Dr. Ellis plans to chronicle the trip in an Internet blog so that others may refer to it in the future, and it seems that Dr. Sullivan has already started looking for their next challenge.



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News Briefs

Spring Trimester DC Orientation John L. DeCicco, DC (NYCC '82)



Dr. John DeCicco

In April, NYCC Associate Professor Dr. John DeCicco spoke to the incoming class of approximately 30 DC students regarding their "expectations and motivations."

"Life has a way of smacking around your expectations," said DeCicco, calling to mind the role NYCC will play in instilling new expectations in students minds. He began with students' expectation that NYCC will educate them. "Wrong!" he said, "We don't educate you – you educate yourselves while NYCC provides the environment." Referring to education as an active process, DeCicco encouraged the students not to think of themselves as students, but rather as lifelong learners. He explained that it now becomes their job to learn and, as long as they are

chiropractors, to pass along what they have learned. NYCC *will* have a distinct impact on students – changing them, their thoughts about health and illness, about their fellow human beings, and about their roles in the grand scheme of things.

As for motivations, he encouraged his audience to think about the reasons why they enrolled at NYCC. Motivations are important in that they will always be reflected in one's actions. What's more, they are not as easily changed as expectations. Dr. DeCicco closed with, "Motive is everything. Objectives determine outcomes. Life proceeds out of intention. Your true intention is revealed by your actions, and your actions are determined by your true intention."





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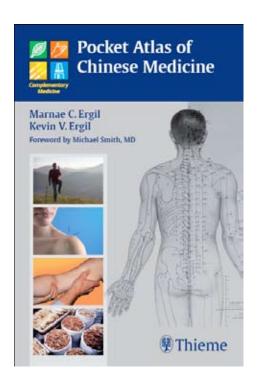
NYCC Faculty Couple Release New Book: Pocket Atlas of Chinese Medicine

Kevin and Marnae Ergil, both associate professors at the Finger Lakes School of Acupuncture and Oriental Medicine of NYCC just released a new book. "Pocket Atlas of Chinese Medicine was an international collaborative effort," said Kevin Ergil, MA, MS, LAc, citing the book's contributors from France, Germany, the Netherlands, United Kingdom, Australia, and the United States."

This is not their first joint effort; 19 years ago they were married. Marnae Ergil, MA, MS, LAc, recalled, "We were both graduate students in anthropology at the University of Washington in Seattle." Kevin had been doing his research on the education of practitioners of Chinese medicine in the United States as she was doing hers on the education of practitioners of Chinese medicine in China.



Marnae Ergil, MA, MS, LAc and Kevin Ergil, MA, MS, LAc



The Book

Both Ergils are editors of the book and authored four of its chapters. Another chapter was coauthored by Kevin Ergil with an additional contributor. Publisher, Thieme Medical Publishing Group, asked the Ergils to undertake the project: "It's easy to be inspired," Kevin said. "This is our life work."

To help make this book interesting they included lots of photos and diagrams. Several NYCC faculty and students posed for illustrations. Though the amount of effort related to illustrations was immense, 185 pages of the 403-page book bear illustrations, it paid off in clarity and aesthetics. The Ergils developed their own charts and tables for their chapters, prepared diagrams, and found illustrations on the Web for which their publisher busily sought permissions. Kevin personally took about 90 new photos specifically for the piece, while

both contributed additional photos from their travels and study. Others provided illustrations, as did the publisher.

Asked whether they have a favorite part in the book, they respond that they particularly enjoy the case studies from Marnae's practice which are used throughout three chapters to illustrate core concepts in diagnosis and treatment. "We thought this was a really good idea," she said of using personal experiences from work.

Currently, the Ergils are working on a textbook for Elsevier, another major international medical publisher, to which a number of Finger Lakes School of Acupuncture and Oriental Medicine faculty members will contribute.

The Ergils dedicate *Pocket Atlas of Chinese Medicine* to their parents, teachers, patients, students, and children; "all of whom have given us so much," they said.

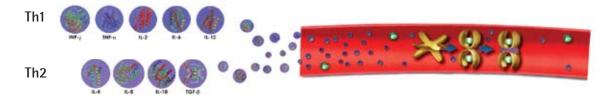
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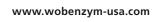
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News Briefs

State Chiropractic Associations Speak With **NYCC Students Encouraging Unity**

Chiropractic associations representing jurisdictions throughout North America were on the New York Chiropractic College campus promoting their services and attracting adherents.

Mr. Gene Veno, executive vice president of the Pennsylvania Chiropractic Association, said that chiropractic groups and associations offer practitioners and patients alike valuable benefits. Attempts to decrease medical-care costs can begin with chiropractic. An effective way to get the message out is by promoting the profession through organized groups. "Wake up," he said, "It's time to get involved in your profession. You have the training. You have the education. That's your heritage. The challenge is the greatest thing to confront you." Veno added that the approximately 60,000 American chiropractors can make a difference in the future of chiropractic. Their message must be an organized one clearly delivered by professional chiropractic groups.

Thomas Ventimiglia, DC (NYCC '80), director of Postgraduate and Continuing Education at NYCC and a member of the Northeast Chiropractic Council, pointed out that chiropractic associations are designed to help doctors become aware of what is available, to foster collaboration, and to address issues related to the profession. "These associations are the place to go," he said.



(Left to Right) James Juenger, DC; Robert Brown, DC; Marc Persson, DC (NYCC '04); Emily Swonguer, DC (NYCC '05); NYCC President Frank Nicchi, DC, MS (NYCC '78); Mr. Gene Veno; Sheridan Mish, DC (NYCC '99); NYCC Director of Postgraduate and Continuing Education Thomas Ventimiglia, DC (NYCC '80); Peter Lombardi, DC (NYCC '95)

Peter Lombardi, DC (NYCC '95), has an office in Oneida, N.Y., where he treats patients of all ages - from babies to people in their 80s. Joining chiropractic associations can bring a doctor "fun, fellowship, philosophy, and financial success," he said. "Fear moves people, and money makes people react."

Robert Brown, DC, has been practicing chiropractic for 27 years in New York State. "Yes, it can be done," he said of a career in New York as a chiropractor. Not being a member of a state chiropractic association is like practicing "with your head in the sand." In healthcare, he said, "Nothing is as permanent as change."

Marc Persson, DC (NYCC '04), who runs several practices in Pennsylvania, said that getting involved in student chiropractic associations can boost one's pride. "Give back to your profession," he said. "There's a fight every day in chiropractic. That's why we need you involved. Get involved, you guys. It's very important."

Chiropractic Care for Headaches

Continued from page 14

Protocols at NYCC

Closer to home, in 2003, a working group of clinical faculty members in the Levittown Health Center developed headache protocols. The group consisted of Drs. Joseph Pfeifer, Charles Hemsey and Michael Perillo.

The protocols consists of several key components:

> a summary of the prevalence and criteria for classification of different types of headaches

- a list of red flags suggestive of secondary headaches, which are headaches that result from serious underlying pathology that may be life-threatening and warrant special diagnostic testing
- algorithms for the differential diagnosis of primary and secondary headaches.

Dr. Pfeifer said the purpose of the protocols is to provide an evidence-based resource about the problem of headache for use by faculty members and students, not only in NYCC's Health Centers but also in the pre-clinical curriculum. He added that it is important because it guides the accurate diagnosis of headache which is critical to formulating appropriate clinical decisions about patient care, including the use of various treatment techniques and self-care recommendations and the need for advanced testing.

News Briefs

Dr. Reed B. Phillips Speaks to the NYCC Community

NYCC recently welcomed chiropractic historian Reed Phillips, DC, PhD, to address the campus about chiropractic legends Joseph Janse, DC and Scott Haldeman, DC.

Dr. Phillips

A nationally known speaker and author, Phillips earned his chiropractic doctorate at National College of Chiropractic in 1973, a certification of Diplomate in Diagnostic Imaging in 1976, and Master of Science degree in Community Medicine from the University of Utah in 1979. He thereafter earned a PhD in Sociology in 1986. His professional credentials are impressive, having served as president of the Examining Board of American Chiropractic Board of Radiology, president of the Association of Chiropractic Colleges, president of the Council on Chiropractic Education, president of the Council on Chiropractic Education International, chair of the Chiropractic Advisory Committee for Veterans' Health Affairs, and served with the Oversight Advisory Committee for the Department of Defense Demonstration Project. Currently, Dr. Phillips is director of international programs and research development for the Federation of Chiropractic Education and Research and a regular writer for the FCER column in Dynamic Chiropractic.

Dr. Janse

Dr. Phillips traced the life of Joseph (Jozias) Janse, DC, born in Holland to Geertje and Pieter Janse under humble circumstances. One of three children, he had scoliosis as a boy and was strapped to a board and stretched to help straighten his spine. In 1916 the family immigrated to the United States and settled in Huntsville, Utah, where they converted to Mormonism. He served on a Swiss-German mission in Europe from 1930 to 1933. Upon returning to the states, he attended the University of Utah where he met his



Dr. Reed Phillips and NYCC President Dr. Frank Nicchi

future wife, Gloria Julie Schade. The two married in June of 1938.

Janse's mother suffered from migraine headaches and found relief through chiropractic treatment. After attending several conferences, he enrolled at National College of Chiropractic (NCC). Denied the right to a chiropractic license in Utah, he moved his family back to Chicago and treated patients there. Dr. Janse was well-known for his strict work ethic, a trait he acquired working alongside his father on the family farm. He was also a strenuous advocate of the chiropractic profession. At NCC he proved to be the consummate instructor - always involved with the students, always teaching - and was instrumental in the building of the new NCC campus in the 1960s. He had good people sense, was a great fundraiser and a proponent of research. He was also effective in matters relating to academic accreditation and licensure legislation. Appearing on the television program "Night Beat" with Mike Wallace in 1957, he handled tough questions with grace and eloquence, answering each one calmly, intelligently, and professionally.

Dr. Haldeman

The closing portion of Dr. Phillips' talk dealt with Dr. Scott Haldeman, another well known chiropractor.

Dr. Haldeman's grandmother was a chiropractor as was her son, Joshua (Scott's father). Scott's father, having received a blow to the top of his head, was sent to Palmer College of Chiropractic for treatment. He remained there and graduated from the college in 1926. The Haldeman family moved to Pretoria, South Africa, in 1950. Scott and his siblings explored the Kalahari Desert with their parents. Scott's parents made sure their children kept abreast of their studies - school books were brought along on the trips. His education was expansive; Scott learned to shoot a pistol and fly the family airplane. Before becoming a chiropractor, he was even a top-notch piano salesman! He, too, attended Palmer College of Chiropractic and has become a leader in the chiropractic profession.

What's News?

Alumni Update ~ Alumni Update ~ Alumni Update ~ Alumni Update

Class of 1986

Iames Demetrious, DC, FACO, received the 2008 Academy of Chiropractic Orthopedists Outstanding Achievement Award during the annual convention of the American College of Chiropractic Orthopedists in San Antonio, Texas in May 2009. This honor imparts national recognition for exceptional performance of service and achievement to the Academy of Chiropractic Orthopedists and chiropractic orthopedic specialty. Dr. Demetrious is the Editor of the Academy's eJournal and serves as secretary and executive board member of the Academy. During the convention, Dr. Demetrious presented a lecture pertaining to Risk Management and Failed Back Surgery Syndrome. Dr. Demetrious conducts his clinical practice in Wilmington, N.C.

Class of 1995

Eric Luper, DC, has a new novel "Bug Boy" set to release in stores nationwide on July 21, 2009 to high critical praise. He has received a contract for his third novel, which is set to release in June 2010. He can be contacted at eric.luper@gmail.com. His Web site is located at www.ericluper.com and he has a blog at http://eluper.livejournal.com.

Class of 2001

Eric Huntington, DC, is one of five chiropractors on the Executive Committee of the ICA Best Practices and Practice Guidelines (www.ICABESTPRACTICES.ORG) which have now been accepted for inclusion in the National Guideline Clearing House. This is the largest chiropractic guideline effort to date representing the culmination of thousands of hours of work by dozens of doctors locating and reviewing over 1,400 clinical papers. Dr. Huntington practices in Baltimore, Md. His phone number is 443-524-6600 and his e-mail address is drerichuntington@aol.com.

Class of 2005

Darryl Lindell, DC, and his wife, Jill, are proud to announce the birth of their first baby, Gabriella Rae, born May 1, 2009. Dr. Lindell is owner of Lindell Chiropractic and Massage where he practices along with his wife, who is a massage therapist. Dr. Lindell recently accepted a teaching position teaching Clinician in the D'Youville College of Chiropractic program locataed in Buffalo.

What's News?

Alumni Update ~ Alumni Update ~ Alumni Update ~ Alumni Update

Transitions

What's News?

Your fellow alumni want to know! Share your personal and professional successes with us – marriages, births, awards, achievements and professional advancement. Mail the form below to: Executive Director of Institutional Advancement, NYCC, P.O. Box 800, Seneca Falls, NY 13148-0800; fax: 315-568-3153; or e-mail: pvantyle@nycc.edu.

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Chiropractic Summit V Issues Call To Immediate Action on National Health Care Reform

PLEASE READ CAREFULLY AND TAKE IMMEDIATE ACTION

Chiropractic Summit V, which convened on May 14th in Washington, DC, has issued this historic CALL TO ACTION to the chiropractic profession, urging every Doctor of Chiropractic, state association, chiropractic student and chiropractic patient, to mobilize to represent chiropractic in the national health reform debate. This unified nationwide call follows an intensive day-long Summit session in which Members of Congress, Congressional staff and key leaders in chiropractic and in public policy examined the precise state of national health care reform discussions to determine how and where the chiropractic profession will be most effective in directing messages of concern and calls for inclusion in any reform program.

It is imperative that you take **IMMEDIATE ACTION** to help ensure that your interests and those of your patients that need and depend on the **essential** services provided by a Doctor of Chiropractic are fully protected in any final legislation likely to emerge from Congress. Specifically, we must:

- A) Guarantee that essential services delivered by a Doctor of Chiropractic are included as a covered benefit under any national reform plan.
- B) Ensure that all plans (including Medicare) allow for full direct access to the providers and health care pathways of their choice. Every patient should have the right to choose and be reimbursed for all health care services from doctors of chiropractic without barriers and limitations that unfairly restrict their freedom of choice.
- C) Defeat any attempt to impose an MD-referral requirement for patients to obtain access to chiropractic care.

This is what you need to do TODAY!

- Contact your Members of Congress (House Member and two U.S. Senators) immediately using ACA's <u>Legislative Action Center</u> at <u>www.ChiroVoice.org</u> or ICA's <u>www.AdjustTheVote.org</u>. At both sites, you can sign on to mobilize your patients and send regular appropriate pre-prepared messages to Congress quickly and efficiently.
- 2) Contact the President of the United States immediately via www.HealthReform.gov AND write a letter directly to the President of the United States, expressing your personal wishes regarding chiropractic inclusion in any reform proposal. Address your letter to: Barack Obama, President of the United States, The White House, 1600 Pennsylvania Avenue NW, Washington, DC 20500.

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honoree, Dr. Barnathan serves as Chiropractor and Sports Performance consultant to some of the world's top Pro and Olympic champions and was awarded the United States Presidential Certificate of Merit for his work on behalf of the President's Council on Physical Fitness & Sports.

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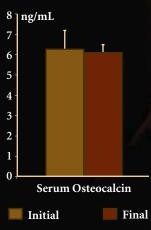
New Research in Bone Regrowth

Calcifood®, Ostrophin PMG®, and Cataplex® D, used together, were found to decrease urinary deoxypyridinoline (Dpd), while maintaining osteocalcin levels (see chart).

These bone health supplements are unique because they provide readily absorbed nutrients from bone tissues to support the process of rebuilding and maintaining bone.*

To find out more about these and other Standard Process products, call 800-558-8740 and ask for our Bone Health Literature Packet (L6213) or visit standardprocess.com.

During a three-month trial, patients with osteopenia were given Calcifood®, Ostrophin PMG®, and Cataplex® D at the regular dosage. Osteocalcin was unchanged while urinary Dpd, a marker used to assess relative rates of bone loss secretion, decreased 18%. Decreased Dpd suggests that less bone was lost over the three months. No change in osteocalcin further suggests a positive environment for bone formation.



^{*}These statements have not been evaluated by the Food and Drug Administration. These products are not intended to diagnose, treat, cure, or prevent any disease.







Transition's



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