

# Don't Let Them Sell You THAT Truck!

**Bio:** Dr. Jarrell is the developer of Spondylogenic Reflex Analysis, SRA Diagnostic and Treatment Protocols, SRA Laser Adjusting, 5MinuteBack, 5MinuteBack Pregnancy and TrueCore Spinal Stabilization. He is the Director of Spinal Reflex Institute, Intl. and SRA Pain and Laser COA. He has designed diagnostic and treatment protocols for professional health care providers for over 23 years and trains Doctors in successful Laser, IR Imaging and clinical protocols.  
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Loyd F. Jarrell, DC

## The ROI of Toys and Happiness

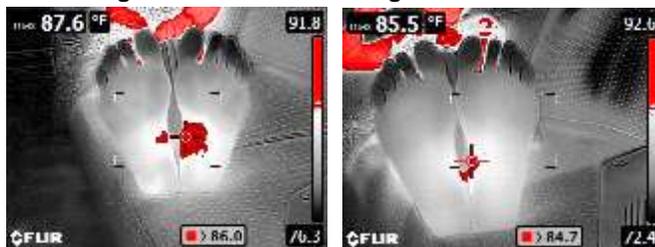
Do you know the feeling of listening to the sales pitch and going for the buy, only to be disappointed when the item didn't perform as promised? My 2013 pickup promised 23 MPG on the highway and after 35,000 miles, I was still lucky to get 17. I wondered how the manufacturer pulled off a 26% negative offset in mileage claims. Disappointed, I sold THE truck, did my homework, listened to more sales hype, glossed over a few sticker claims and stayed with the facts that made sense from a scientific point of view. Two thoughts: Make sure it does what it says and move on if it doesn't.

After finding a replacement, I expected the 28 MPG manufacturer rating to be purely factual, not hypothetical. I was surprised... It wasn't. In fact it over delivered with 32 mpg! Do you think that changed my perception on ROI? The manufacturer actually undersold the mileage benefit and now every time I start it up, I smile at the \$1,100 in annual fuel savings as well as all the Starbucks coffee I can buy from the proceeds. I am Happy!

Roughly 90% of the purchase decisions we make are governed by our emotions. To escape THAT truck, I tempered my emotions by staying with the facts. The laws of physics indicated that the machine could not do what the manufacturer claimed it could do. Successfully helping others, involves professional and monetary transactions that make us feel good about our skills. That's emotional. If we don't, that's emotional too. A mutually beneficial ROI is important to the doctor/patient transaction and ideally it is best for both parties to walk away with more than they expected. The same feelings govern other purchases and transactions involving staff, education, equipment, etc. For a comprehensive ROI, we are most happy when we get more than we expected.

Take home: Don't waste time and money on underperforming strategies and equipment. These simple tips have formed my patient management approach. If I invest in myself, my skills, the patient and the best tools in my trade, my ROI will always bring me Happiness.

## Controlling Plantar Fasciitis through C5 and C6 Vertebrae



**Patient** Female, age 67  
**Dx** Plantar fasciitis for 9 months  
**Tx** Physical therapy with non-resolution  
**SRS** C5 Right spondylogenic reflex syndrome  
**Tx** 2-minutes using Lumix 45W Superpulse laser administered to C5R facet joint only  
**Status** 2.1 F' drop in target muscle temperature  
10 minutes post C spine laser. 70% reduction in pain. Frank Jarrell, D.C.

Example: C5R spondylogenic reflex syndrome identified in 30 seconds. Lumix 4, 45W laser for 2 minutes on the C5 facet only reduced plantar edema by 2.1 degrees F and pain by 70%. What is the ROI in this case? Were the doctor and/or the patient Happy?

## Spondylogenic Reflexes and the Subluxation Complex

We all know the history of the subluxation complex. Few know the history of the spondylogenic reflex syndrome and its relevance to subluxations. While the subluxation was building material support over the past century, a researcher by the name of J. H. Kelligren was studying non-radicular, periarticular referred pain (1938-9). He discovered 'the pain that a zygapophyseal joint refers to a specific anatomical zone when irritated with a noxious stimuli. We call this sclerotomal pain.

B. D. Wyke further researched the motor component of the same reflexes (1967-1979) and M. Sutter defined the term "spondylogenic reflex syndrome" or SRS (1975) An SRS is a normal, defensive withdrawal reflex that is activated by acute posterior dermatomal stimulation and/or facet capsular ligament overstretch or tearing. In the latter, overstretch

or tears trigger persistent capsular ligament nociceptor and mechanoreceptor firing while reflexively splinting local facet paraspinal musculature. This chronic overloading generates inflammation around the facet joint and forms hydrostatic nerve root compression within the neuroforaminal canal. This in turn, drives our classic “garden hose” theory in which sensory/motor nerve facilitation produces a cascade of downstream effector target tissue facilitation or over activation. Our “pinched nerve” rationale now drives select muscles into over activation and fatigue, severely decreases muscle loading capacity and offsets downstream joint tracking specific to those reflexive pathways defined by the SRS. Additionally, an imbalance in visceral function (effector target tissue also) results in system chaos. From here it all becomes a biomechanical, physiological, neurological and histological war zone ultimately enlisting an army of doctors and therapists to control and suppress symptoms over the course of a person’s lifetime. A severely acute or chronically active SRS can be physiologically catastrophic to health and wellbeing. Albeit amazingly predictable with SRA, given the pathophysiology of the SRS... no one is Happy!

*The beauty of understanding the pathophysiology of the SRS is that you fundamentally realize that a reflex is a reflex and if 7 hundred or 7 billion people present with the same hard wired reflex, they will all have the exact same motor activation and facilitation pattern.*

### What Does a Spondylogenic Reflex Have to do with My Feet?

It is an indisputable fact that a patella DTR does not make a shoulder abduct and as in physics: you can take this ‘constant’ to the bank. From this we can now anticipate and locate predictable and dependable patterns of pathophysiology across multiple populations with multiple variables. All that’s left is to accurately select the most effective treatment options.

By understanding the nature and clinical significance of the SRS, we can explain the subluxation complex in an all-inclusive, universal system. All the way from ‘something is causing something else’ to low back pain showing up in an MVA a month after cervical whiplash, to joint tracking error accelerating joint degeneration, to why multiple techniques can be equally effective and to why C5/C6 SRSs are causative mechanisms in plantar fasciitis. In Spinal Reflex Analysis terms, the SRS substantiates the subluxation model without excluding the facts and previous research. It also delivers an ROI in a fashion B. J. Palmer believed chiropractic could.

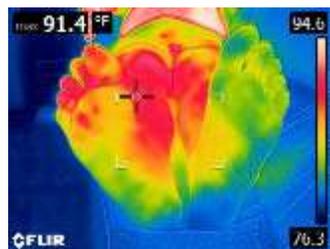
### Did You Say C5/C6 SRS for Diabetic Neuropathy?

As with most reflexes, a spondylogenic reflex (SR) is normal defense physiology. When the facet capsular ligament becomes acutely or chronically unstable, the inactive SR now becomes an active SRS. Normal physiology becomes pathophysiology. Some of the reflexively facilitated superficial and deep muscles on an SRS pathway are capable of chronically offsetting and overloading midline and peripheral joints indefinitely, or until the SRS is corrected. Muscle load and joint offset form the basis for postural distortion, movement dysfunction, joint tracking error, downstream neurocompression syndromes, muscle metabolic fatigue, weakness and a whole lot of hurting. Not Happy again.

### Diabetic Neuropathy and Lumix Laser



**Patient** Male, age 68.  
**Dx** Diabetic neuropathy 6+ years  
**Tx** Appropriate medications  
**SRS** C1L, C6R SRS  
**SRA Tx** Two 10 minute sessions in same day using Lumix 45W Superpulse laser administered to C6R facet and foot musculature for pain/inflame  
**Status** Visible change in peripheral blood flow as noted at 10h, 46m post laser. 80% redux in numbness



C5/C6 spondylogenic reflexes affect iliolumbar, longissimus lumborum, latissimus dorsi and gluteal muscles and hydrostatically impinge L5/S1/S2 nerve roots leading to contractures in the soleus, gastrocnemius and plantar muscles. From here it is vascular impingement aggravating the effects of diabetes. Treating the neurology, muscles and inflammation can grossly reduce the expression of diabetic neuropathy without treating the disease.

*Until we comprehend the power of the SRS, we will never truly understand the power of the subluxation in modern terms. B. J. Palmer, D.C. defined the spine's role in health and function and the SRS defines the how and why this is truer today than we ever imagined!*

## **Why Have a System, the Right Toys and a Strong ROI?**

Working off a constant in a world of patient variables is a game changer for both you and your practice. As illustrated for plantar fasciitis and diabetic neuropathy, implementing a strong protocol that is predictable, dependable and reproducible is crucial to exceptional outcomes. Investing in up to date strategies and fact based technology completes the doctor/patient ROI experience. You and your patients will always feel that you receive more than you expect and everyone is Happy. Period. Chiropractic based Spinal Reflex Analysis, FLIR IR imaging and Lumix Superpulse lasers make this happen in a big way.

## **Why FLIR Infrared Imaging?**

Once you learn to use IR imaging, you are showing your patients, your kids, your grandmother, your pets and your colleagues! All this pure, unadulterated fun aside; look at the images above. Can you see how much useful information can be derived from 15 seconds of sharing pictures? With these images alone, I could assess where the problem originated, if it is nerve, muscle, tendon, joint or not where the patient is feeling pain. I can even tell if my strategy and equipment work and how the patient progresses. WOW! That's a lot of Fun!

## **Why Lumix Laser?**

Like THAT truck, it is better to get rid of ineffective tools for ones that are more efficient, more profitable and return a greater ROI. Lumix is the only laser technology that I can stand behind in a classroom as an educator and demonstrate consistent, real time responses in mere seconds; even for the worst of conditions. The plantar fasciitis patient could feel the difference after only 2 minutes of Lumix laser on her C5 zygapophyseal joint. WOW again!

## **Why Chiropractic?**

If it had not been for the philosophy, science and art of Chiropractic, I would not have discovered and accomplished all that I have. Over 7500 patients later, I am still striving to take them higher. As I grow in skill, they grow in outcomes. This form of service is uniquely Chiropractic and even though I can teach parts of what I know and create to other practitioners in other fields, none can remotely comprehend the mystery and wonders of the spine as we do.

The secret is in the neurology, not the biomechanics. Biomechanics is just 'stuff', albeit important stuff. However, neurology is magic! When 2 Minutes of SRA Lumix Laser Adjusting can change plantar fasciitis more effectively than the past 9 months of mechanistic therapy; that's powerful! Our profession has stumbled upon the greatest treasure of all and we have yet to truly comprehend its mysteries. I encourage every doctor to explore the possibilities that come with new ideas and leading edge technology. It is my mission to build a better bridge to the future for Chiropractic. We are walking across it right now. Way Happy!

## **Join us at the on Sat. Dec. 10, 2016**

Colorado Chiropractic Association Offices 8751 E. Hampden Ave I Ste. B7 Denver, Colorado  
Lunch Provided I \$100 Members I \$125 Non-Members I \$75 of each registration goes to the CCA  
Co-Sponsored by CCA I Guest on Laser Nutrition: Dr. Lynn Toohey of Nutri-West I Includes Demonstrations

## **Title: Real Time Infrared Imaging and Laser Confirmation in the Clinical Setting!**

### **Course Outline:**

- New Technologies in Real Time Infrared Imaging
- The Science of IR Imaging and its Relevance to Chiropractic Care
- LASER - The History, Science, Benefits and Risks of Laser Therapy
- Immediate Response Laser thru Power and Frequency
- Benefits and Risks: What, When and Where to Treat and Not to Treat
- Patient's Presenting Profile, Provocative Testing and Laser Nutritional Needs

**Click Here to Register online or go to: [coloradochiropractic.org](http://coloradochiropractic.org) via 'Calendar of Events' or Call 303.755.9011**