Chiropractic and Nutritional Management and its Effect on the Fertility of a Diabetic Amenorrheal Patient:
A Case Report

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ABSTRACT

Objective: To study the effect of chiropractic care and nutritional supplementation on the fertility of an insulin dependant female presenting with primary amenorrhea.

Clinical Features: A woman in her early twenties is followed through a twenty-month course of care with a subluxation-based chiropractor who specializes in Applied Kinesiology (AK). AK is a functional neurologic assessment process that extends the neurological examination, utilizing manual muscle testing to identify subtle shifts away from optimal neurologic status. The patient in this study reported that she had never been able to have menses without the use of birth control medication. She was an insulin-dependant diabetic who complained of chronic lower extremity skin lesions as well as hip and knee pain. Her course of care consisted of chiropractic adjustments to remove spinal subluxation, manual correction of uterine malposition, and nutritional supplementation.

Chiropractic Care and Outcome: This patient received three to four specific chiropractic adjustments per month during the first four months of care to reduce spinal subluxation. AK muscle testing was used to examine for nutritional deficiencies, malabsorption syndrome, and uterine malposition. The patient chose to discontinue her oral contraceptives after starting chiropractic care.

Initially, she experienced increased lymphatic congestion and passed blood clots, possibly indicating a “cleansing reaction” to changes brought on by her new protocol. Four months after beginning chiropractic care she began having regular menstrual cycles. Twenty months after her first adjustment, she achieved pregnancy.

Conclusion: This young woman experienced normal menstrual function for the first time without medication, following specific chiropractic subluxation correction and adjunctive nutritional support. It is significant that her care was designed to support natural bodily function by decreasing nerve interference and supplying nutritional building blocks. The culmination of this approach was the appreciative subject’s experience of pregnancy and motherhood.

Key Words: chiropractic, subluxation, Applied Kinesiology (AK), amenorrhea, diabetic, fertility, pregnancy, nutritional deficiencies

Introduction

Amenorrhea is defined as the failure of menarche by age 16 or the absence of menstruation for six months in a woman who had previously experienced menses. Cessation of menses occurs most commonly during pregnancy, early lactation, or post menopause and is normal. Failure of menarche by age 16 is considered a rare gynecological disorder. Possible causes include ovarian failure, conditions that interfere with central nervous system-hypothalamic interactions, anatomic defects, and endocrine disorders.

Case Report

This twenty-two year old white female presented with Type 1 diabetes, inability to have a menstrual period without the use of birth control medication, bilateral hip and knee pain, and a skin lesion on her lower leg. She was examined using a combination of palpation, leg length check, and muscle testing, described and taught as Applied Kinesiology (AK). AK is a functional neurologic assessment process that extends the neurological examination, utilizing manual muscle testing to identify subtle shifts away from optimal neurologic status. The patient in this study reported that she had never been able to have menses without the use of birth control medication. She was an insulin-dependant diabetic who complained of chronic lower extremity skin lesions as well as hip and knee pain. Her course of care consisted of chiropractic adjustments to remove spinal subluxation, manual correction of uterine malposition, and nutritional supplementation.

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Primary Amenorrhea is considered a somewhat rare condition in which a young woman never begins her menstrual cycle. There are several potential causes ranging from anatomic defects to endocrine disorder. This study indicates that a combination of endocrine dysfunction and nervous system interference were responsible for this woman’s amenorrhea. It is significant to note that, for most chiropractors, the goal is not to diagnose and treat disease, but to detect and remove vertebral subluxation. The objective could be described as removing nerve interference to allow the body’s innate intelligence to heal whatever condition might be present. This patient, like many, presented complaining of a disease process that was diagnosed by one or more members of the medical profession. The patient’s spine was examined by a chiropractor and subluxations were found. Nutritional needs were identified, and a uterine malposition was indicated by specific muscle testing techniques. Using chiropractic adjustments and nutritional supplements, the chiropractor supported the patient’s body in its own healing process.

Conclusion
A young diabetic female diagnosed with primary amenorrhea experienced regular menstrual cycles, became pregnant, and successfully delivered a full term child in approximately two years after beginning chiropractic care. Primary amenorrhea is often associated with neurological problems and pituitary dysfunction. This article suggests a correlation between the reduction of nerve interference via subluxation correction, nutritional support of the digestive tract and pituitary gland and the patient’s newfound ability to have an unmedicated menstrual cycle and subsequent pregnancy.

The success of this case indicates the need for further study and documentation regarding the effect of chiropractic and nutrition on infertility. Federal funding should be made available for this research, especially in light of the large sums of money spent each year on allopathic treatments for this condition. Regardless of the success of acquiring this research funding, I encourage more chiropractors to submit case studies pertinent to infertility issues.

References
2. Walther, D., Applied Kinesiology Synopsis 2nd ed (Systems DC, 2000) 575
7. Carpenter, M., Human Neuroanatomy, 7th ed (Baltimore: Williams & Wilkins, 1976)
11. Delacato, C.H., The Diagnosis and Treatment of Speech and Reading Problems (Springfield, IL: Charles C. Thomas Publisher, 1963)