

# Sigma Align

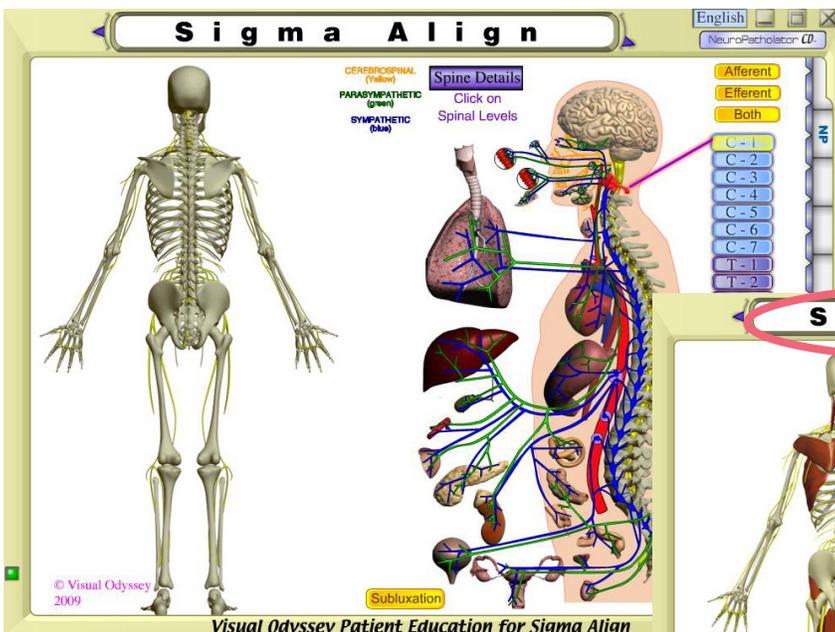
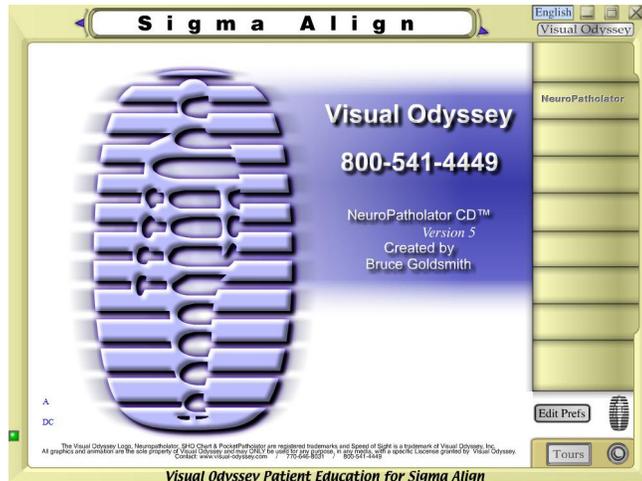
## Patient Education Software

# *Manual & Scripting*

# Visual Odyssey Neuropatholator™ Scripting Concepts

Adapted for Sigma Align

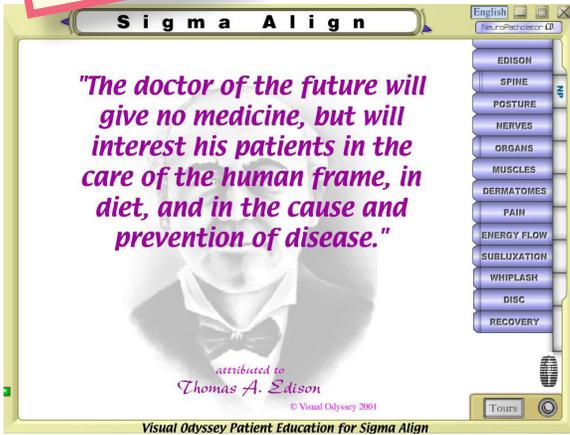
When the Visual Odyssey Patient Education for your Sigma Align first comes on, you will see this splash screen. When you click anywhere to continue, the Neuropatholator Software becomes transparent so you can use the Sigma Align Software. To get back into the Neuropatholator Software you will click the “nerves” or “muscles” buttons on your Sigma Align screen. Doing this will bring up one of the two screens seen below.



Whenever you want to return to the Sigma Align Software click the large Sigma Align banner at the top.

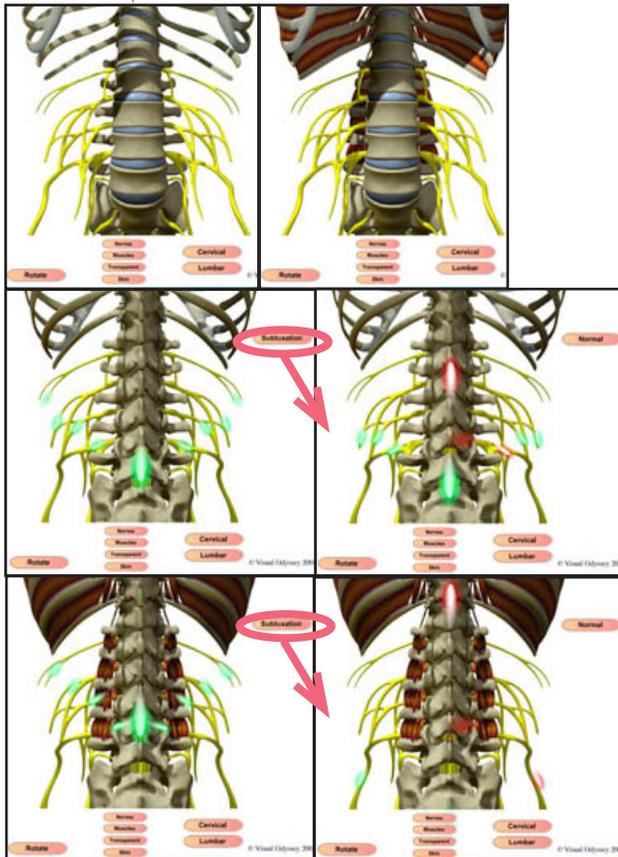
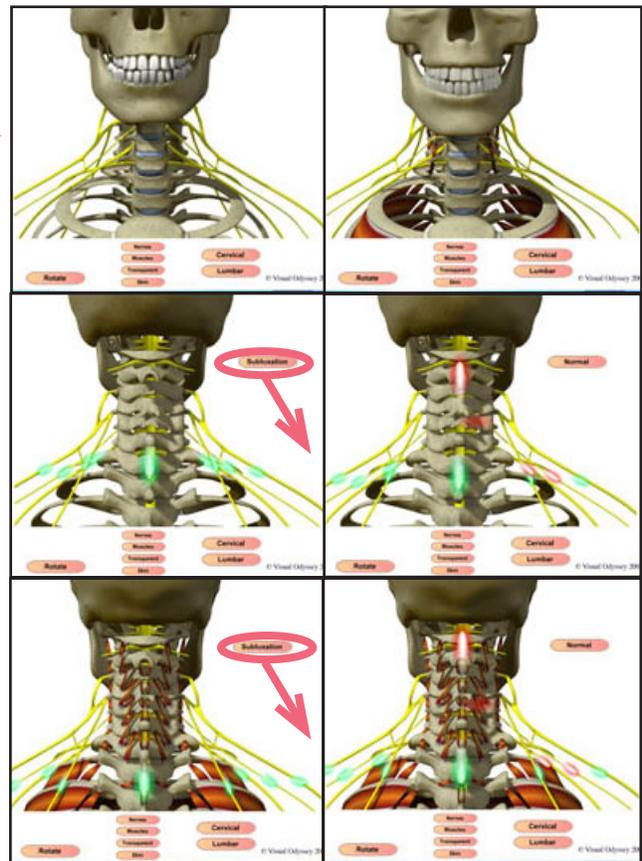
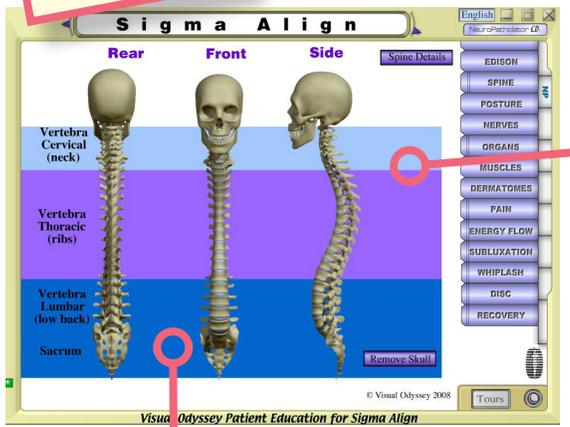


# Edison

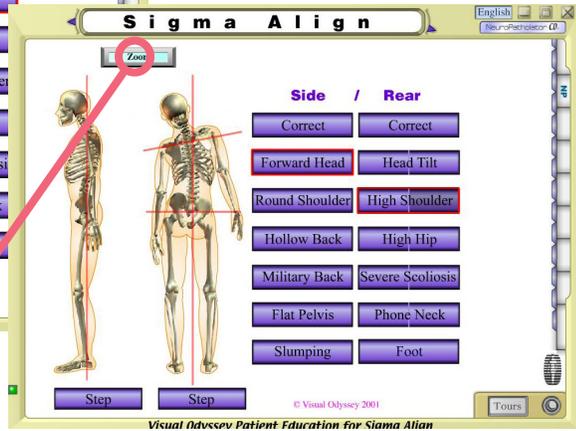
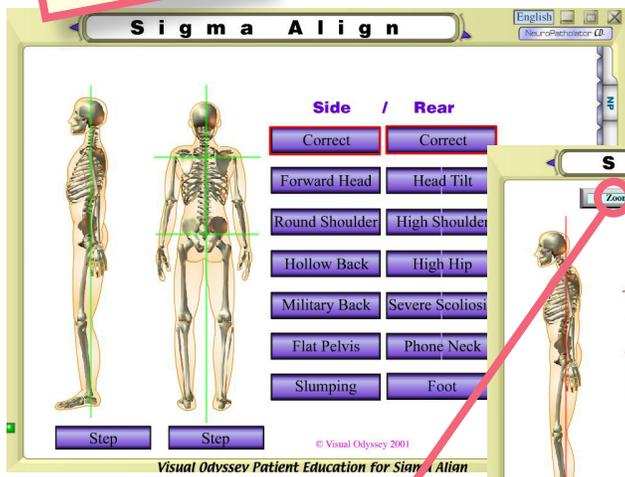


First, this program deals with the definition of health by Thomas Edison, then some posture basics, and what the spine should look like from the front, the back and the rear.

# Spine

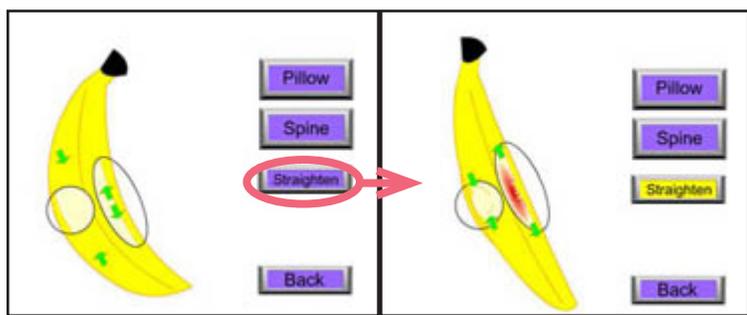
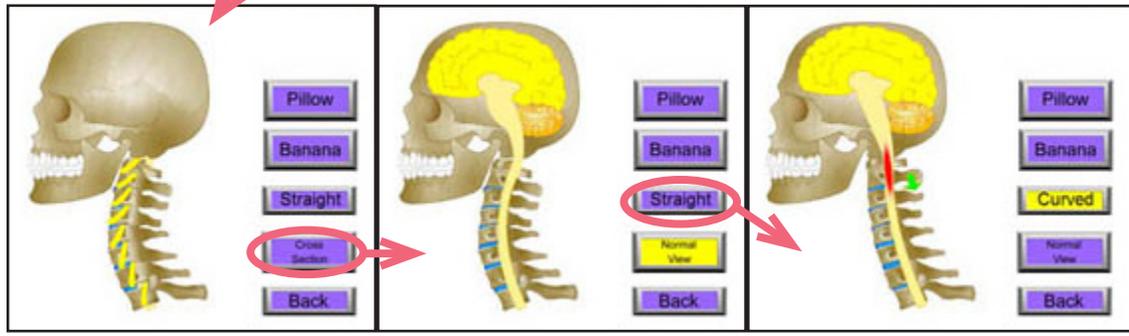


**Posture**

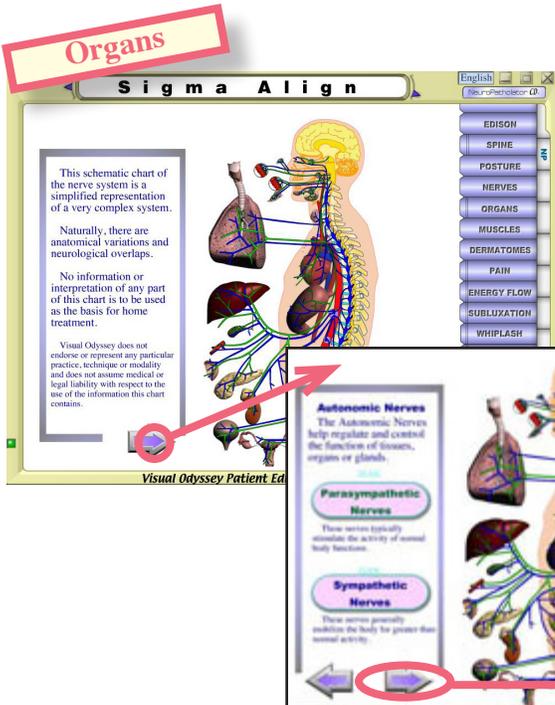
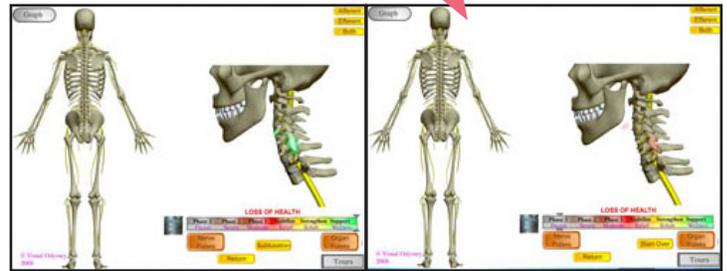
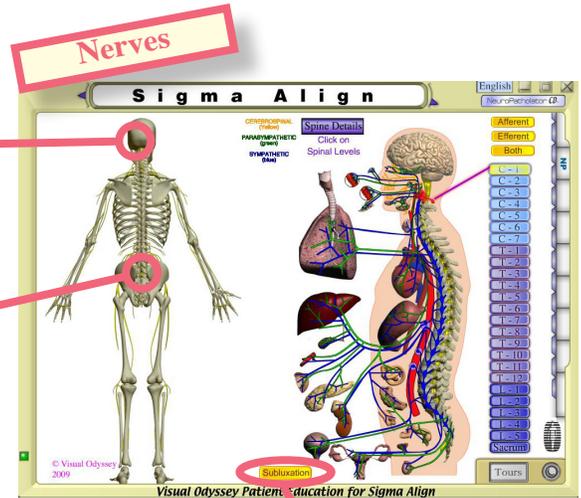
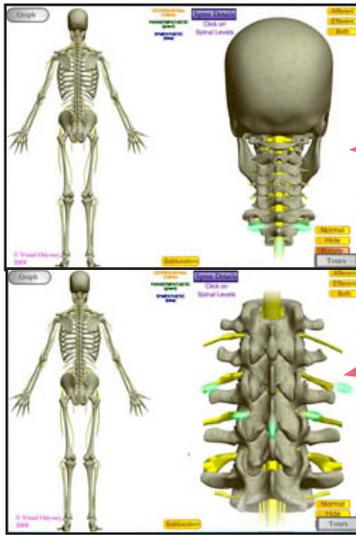


Here are some scenes from the posture screen. This screen allows you to click on many different posture types. Watch as the bodies move or almost dance as they take on that shape.

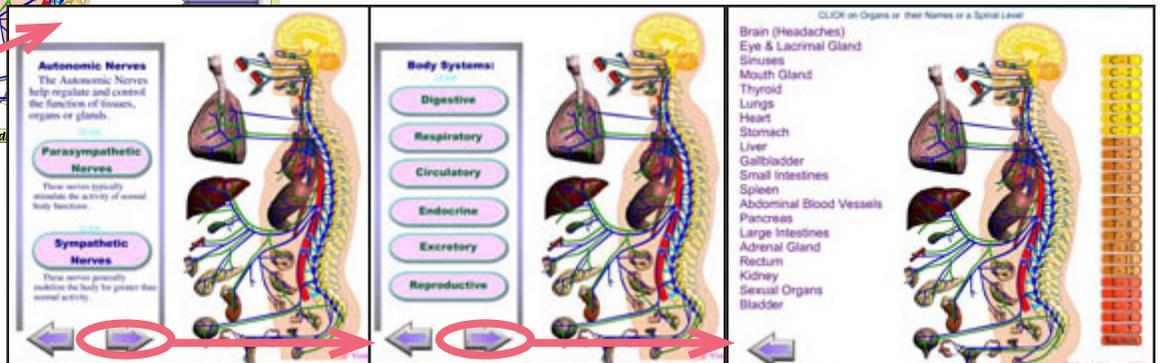
**Cross Section**



Forward head posture demonstration and comparison to soft tissue damage in banana.

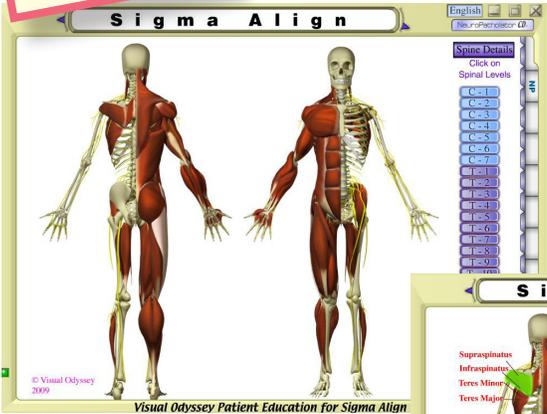


Clicking on one of these body systems buttons triggers the nerve pulses traveling from the brain out to the organs affected. This makes it very obvious that in fact the nerve system is the master control system between the brain and the organs and their proper function.

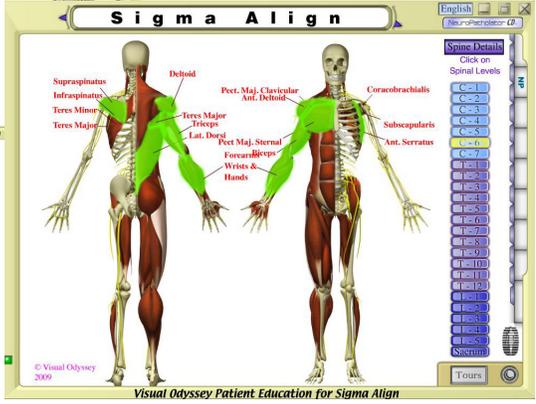


The 'Organ Neuropathologist' screen is available from the navigation button strip on the right-hand side of the 'Body Systems' screen. It enables us to click on the names of the organs, on the organs themselves, or on the spinal level, and see the reflections and relationships going in both directions.

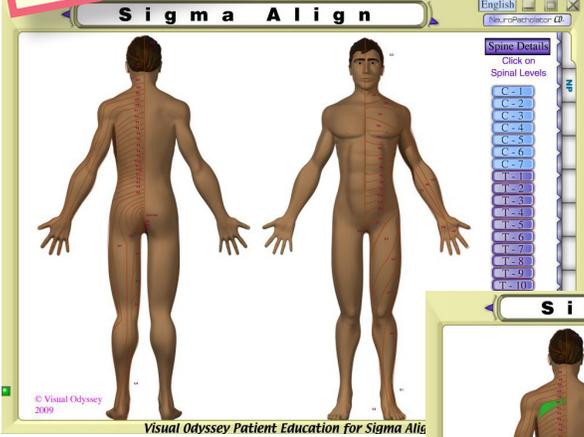
# Muscles



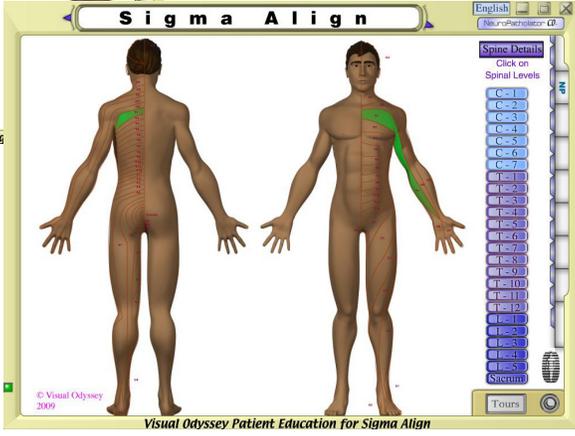
From spine to muscle or muscle to spine.



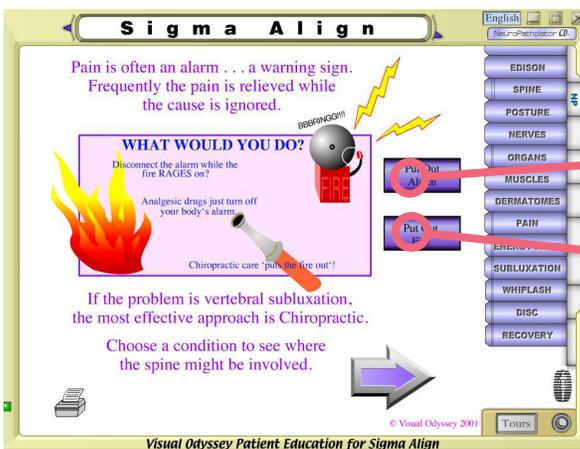
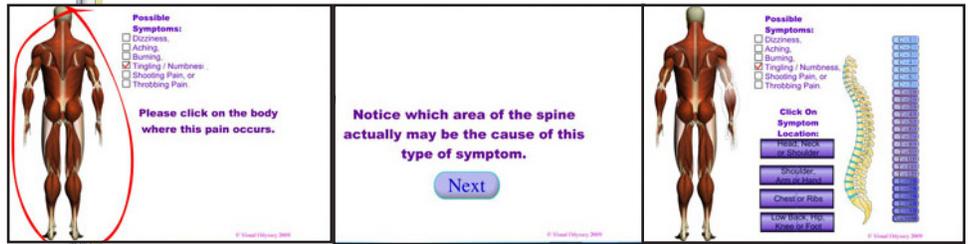
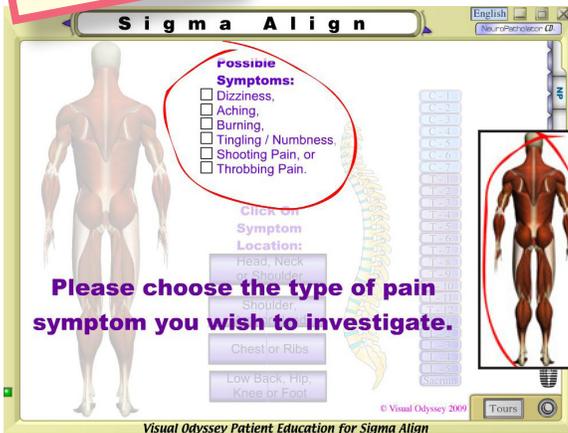
# Dermatomes



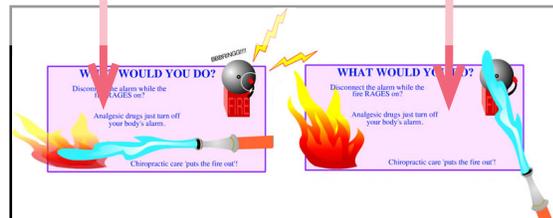
From spine to dermatome or dermatome to spine.



**Pain**

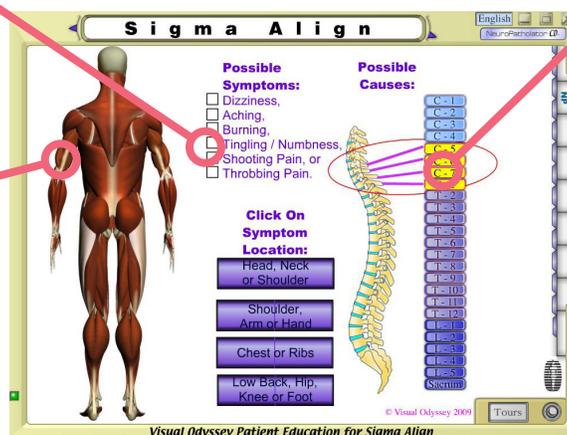


The “Cause vs. Symptom” screen uses the analogy of a fire alarm and an actual fire, the fire being the cause and the alarm being the symptom. The patient is encouraged to either put out the fire or the alarm. Selecting to “put out the alarm”, obviously doesn’t make any sense and yet that is what people are doing all the time when they are taking drugs to deal with pains and symptoms. So when we click the “back” button and click “put out fire” we’re helping them understand that that really is a more reasonable approach to the problem, but what they choose to do is really up to them. Now that you have presented all this information certainly your hope is that they will be ‘cause-oriented’ and utilize Chiropractic rather than strictly symptomatic approaches and the degenerative process that leads to.



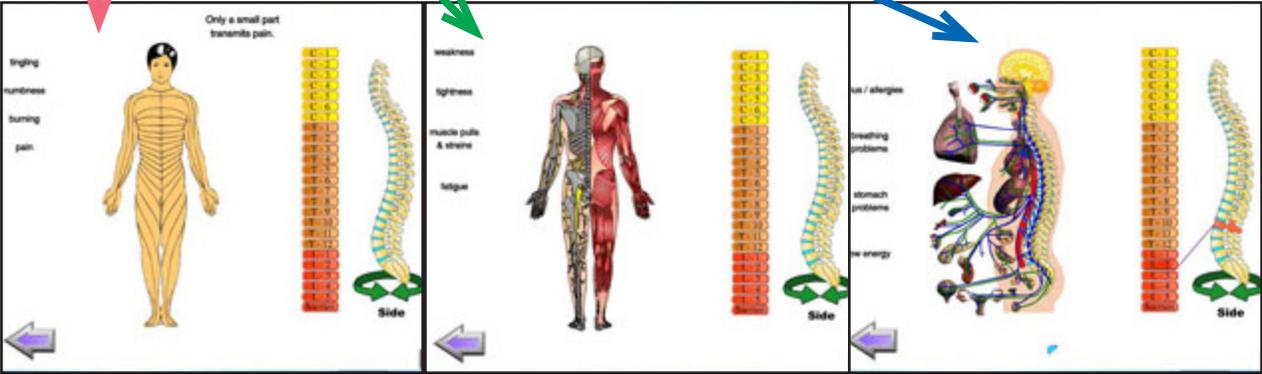
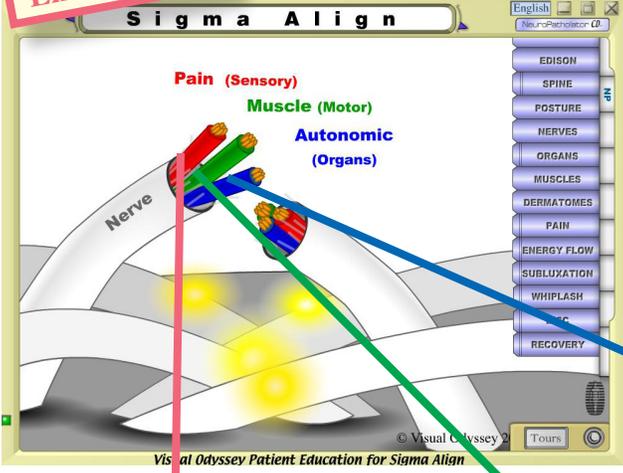
**1.** Click here first to choose a visualization of a certain complaint.

**2.** Then click on any part of the body after choosing a symptom type.



**3.** Now you’ll see which level of the spine is possibly causing the problem. It is also possible to click over on any part of the body and see which areas of the body might be affected by the checked symptom. It is also possible to click on the spinal levels and it will reflect both the body on the left showing the symptom and the which spinal level could be causing that.

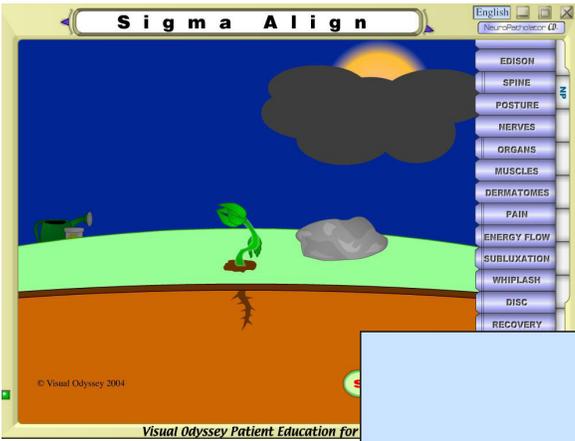
**Energy Flow**



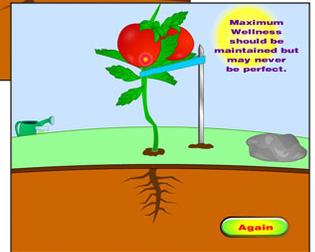
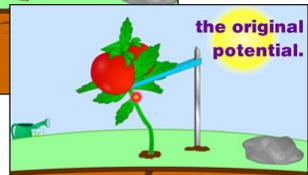
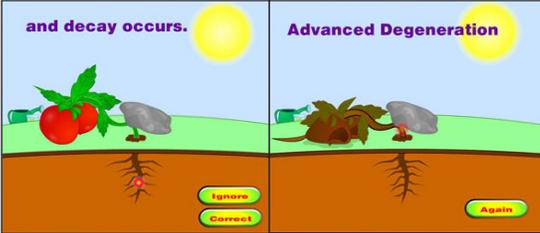
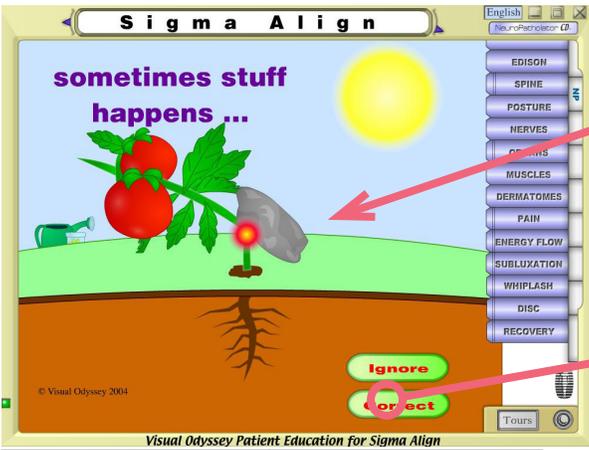
Sensory to spine and spine to sensory

Motor (muscle) to spine and spine to muscle

Organ to spine and spine to organ

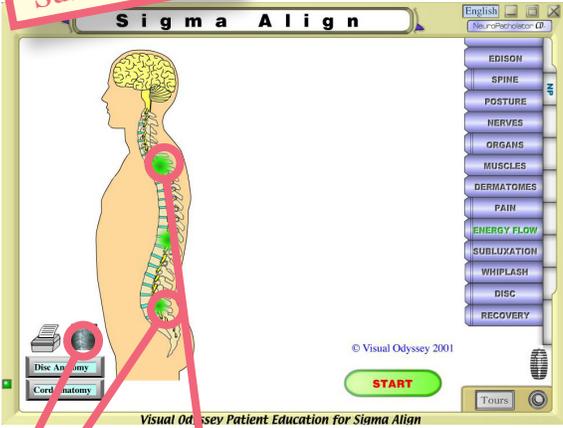


Adapted and modified from a B.J. Palmer story, the “Tomato & Rock” section describes the possible troubles of interference through simple analogy. The seedling has the potential to be a whole tomato plant. But sometimes during the life process, things can interfere with the normal potential.



Such as, a rock on the stem. Not enough to break the stem, but enough to push the plant over and to impede some of the energy flow that normally goes up and down the stem. The longer the rock is there, the greater the chance the organism has to adapt to the interference. By adapting, the potential of this plant is no longer what it was. When this happens, we want to remove this interference as quickly as possible. We want to support the organism physically and nutritionally, so that it can approach it's original potential. No matter how minor the interference, if it's allowed to remain, it will affect the organism because it must adapt and that moves if further and further away from the original potential.

# Subluxation



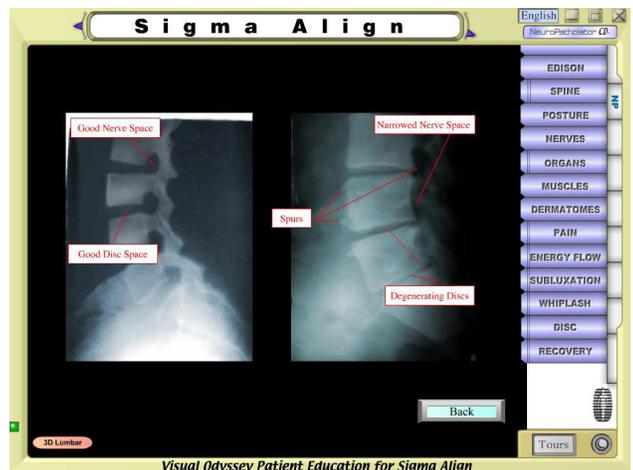
Clicking the Subluxation button gives us the ability to show the impact of a subluxation on the cervical (or lumbar) spine and how it takes multiple stages of correction to deal with this condition.



Once the spine is demonstrating subluxations, clicking this same button progressively moves the 'health meter' from the left (loss of health) to the right (optimal improvement) in stages. As this happens, the spinal segment itself improves. During this process, a button will appear to the left of the 'health meter' which is the 'missed appointments'/'life's stresses' button. Clicking this moves the 'health meter' pointer back toward the left step by step as you explain the importance of maintaining the program of care and a positive, receptive, healing attitude.

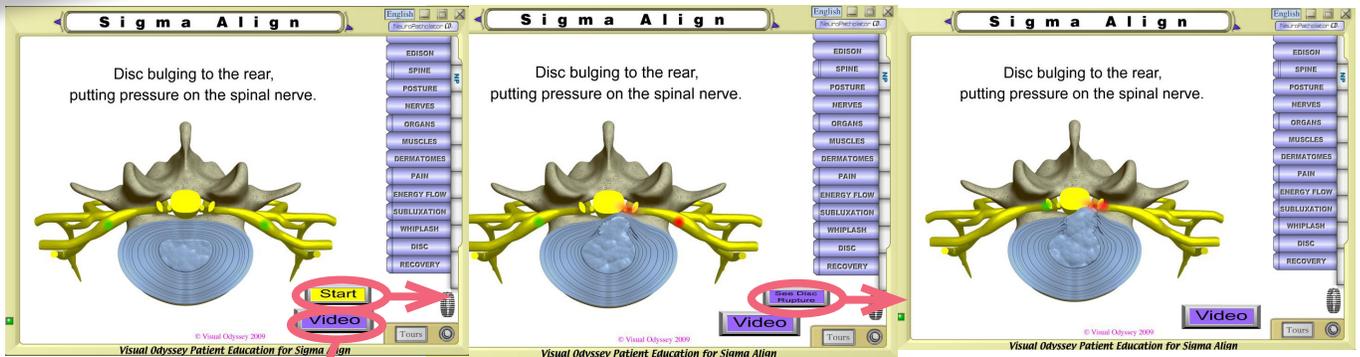


Cervical x-ray

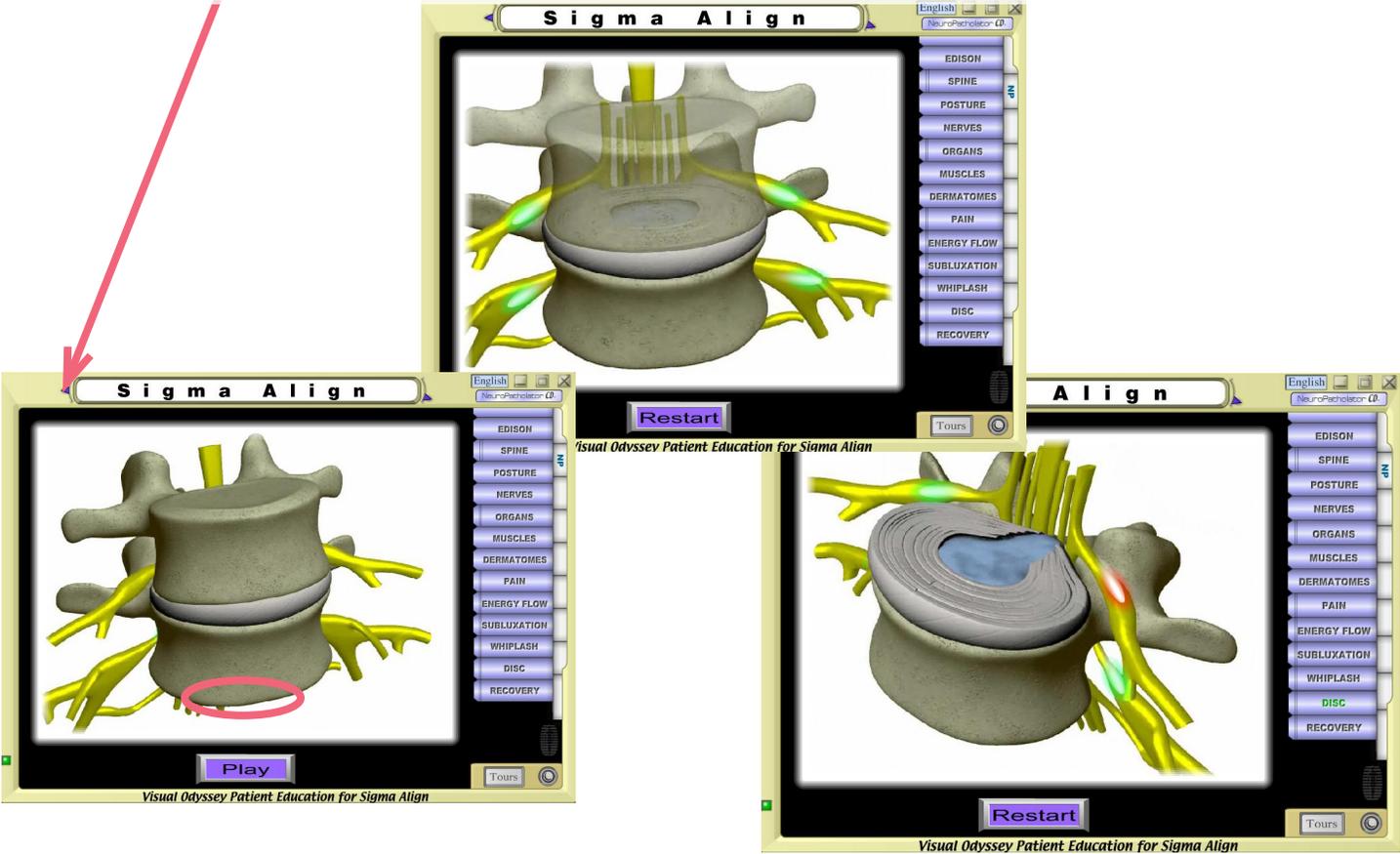


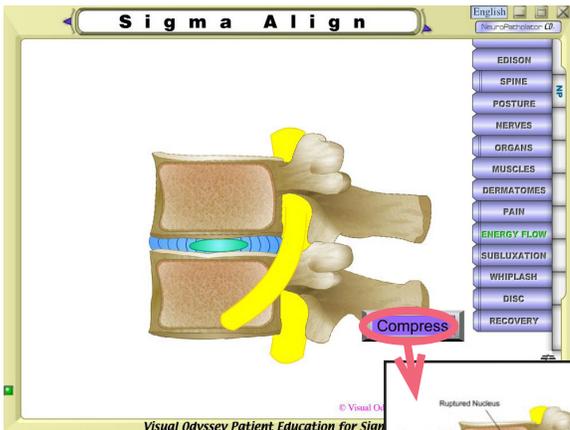
Lumbar x-ray

**Disc**



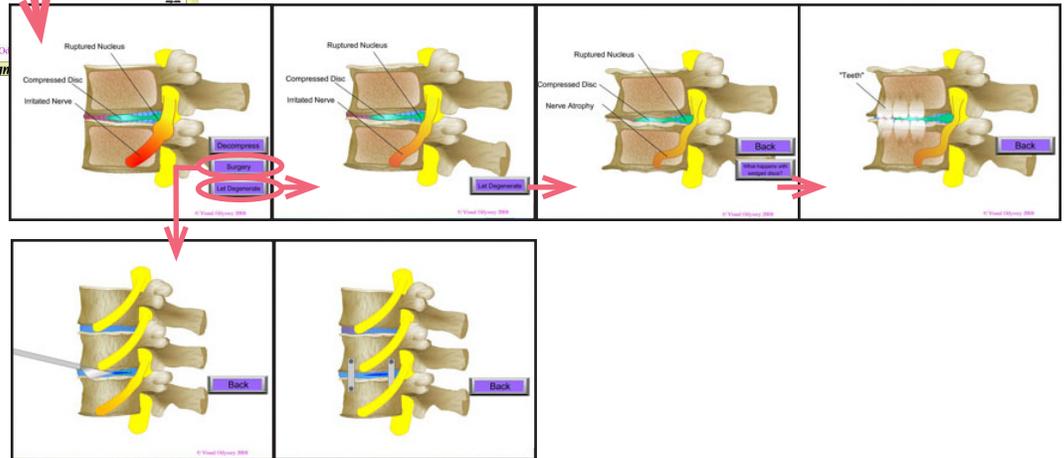
Then we show a side view of the disc and the compression putting pressure on the spinal nerve. Now we have a number of options. The first option we can click on is surgery. This animation demonstrates how well surgery may help with the initial symptom complaint, but it also has the additional problem of locking up that specific joint and forcing an excess range of motion in the areas above and below, this causes additional wear and tear of the spine. It's one of the explanations for why back surgery can often fail, because the problem will travel to another area of the spine. Another option is to not do anything and let the area degenerate. We then show the degenerative changes to the bones as well as to the disc. Click to let it degenerate further and you'll see the atrophied nerve, compressed disc, and the ruptured nucleus. Of course the thing that makes the most sense is to actually utilize chiropractic for the purpose of decompressing the disc, and if appropriate, other modalities like a decompression table to help restore the health to that disc area.





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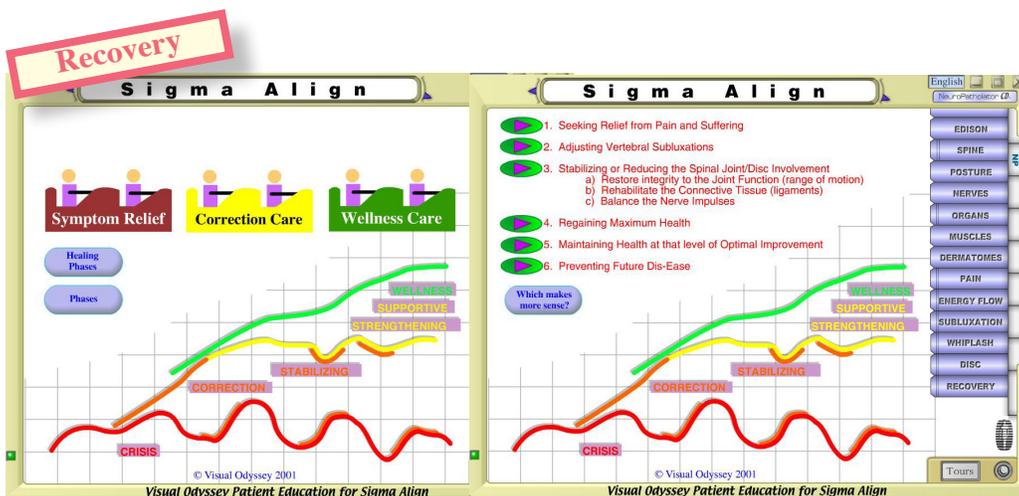
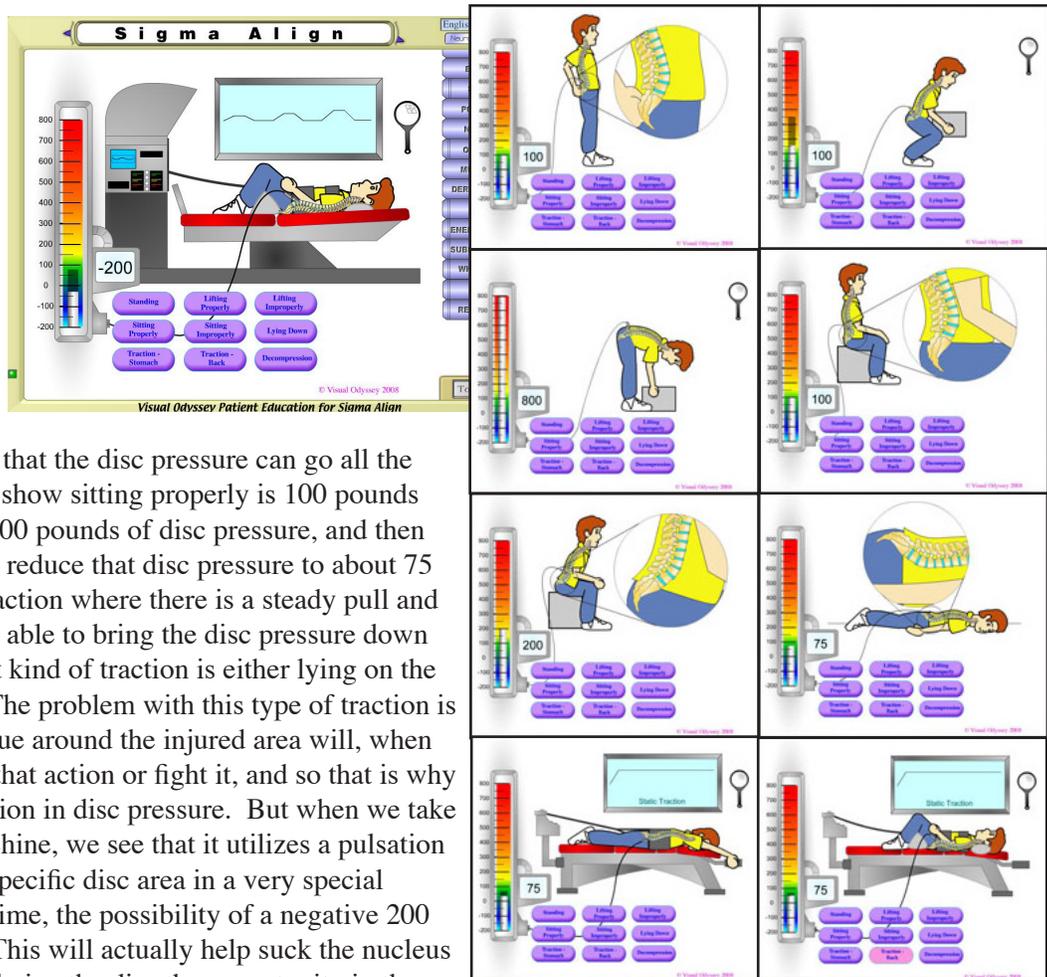
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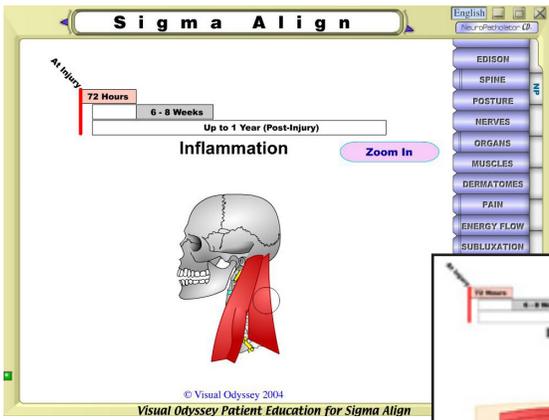
Now, if we click the button that says “disc pressure”, this is very powerful especially if the doctor has some type of a decompression machine similar to the Axiom DRX 9000, because here we are showing that when standing, the normal pressure in the disc would be about 100 pounds. When we are lifting properly, the disc pressure could go all the way up to 350. If we are lifting

improperly, it has been recorded that the disc pressure can go all the way up to 800 pounds. We now show sitting properly is 100 pounds and sitting improperly is about 200 pounds of disc pressure, and then we show how lying down would reduce that disc pressure to about 75 pounds. Next, we show basic traction where there is a steady pull and it demonstrates that we might be able to bring the disc pressure down to about 40 pounds, whether that kind of traction is either lying on the stomach, or lying on the back. The problem with this type of traction is that the muscles and the soft tissue around the injured area will, when being pulled upon, try to defeat that action or fight it, and so that is why you don't get a very large reduction in disc pressure. But when we take a look at the decompression machine, we see that it utilizes a pulsation that ramps up and pulls on that specific disc area in a very special way. It actually can allow, over time, the possibility of a negative 200 pounds of pressure in that disc. This will actually help suck the nucleus back into its normal position and give the disc the opportunity in the healing process while the nucleus is back where it belongs.

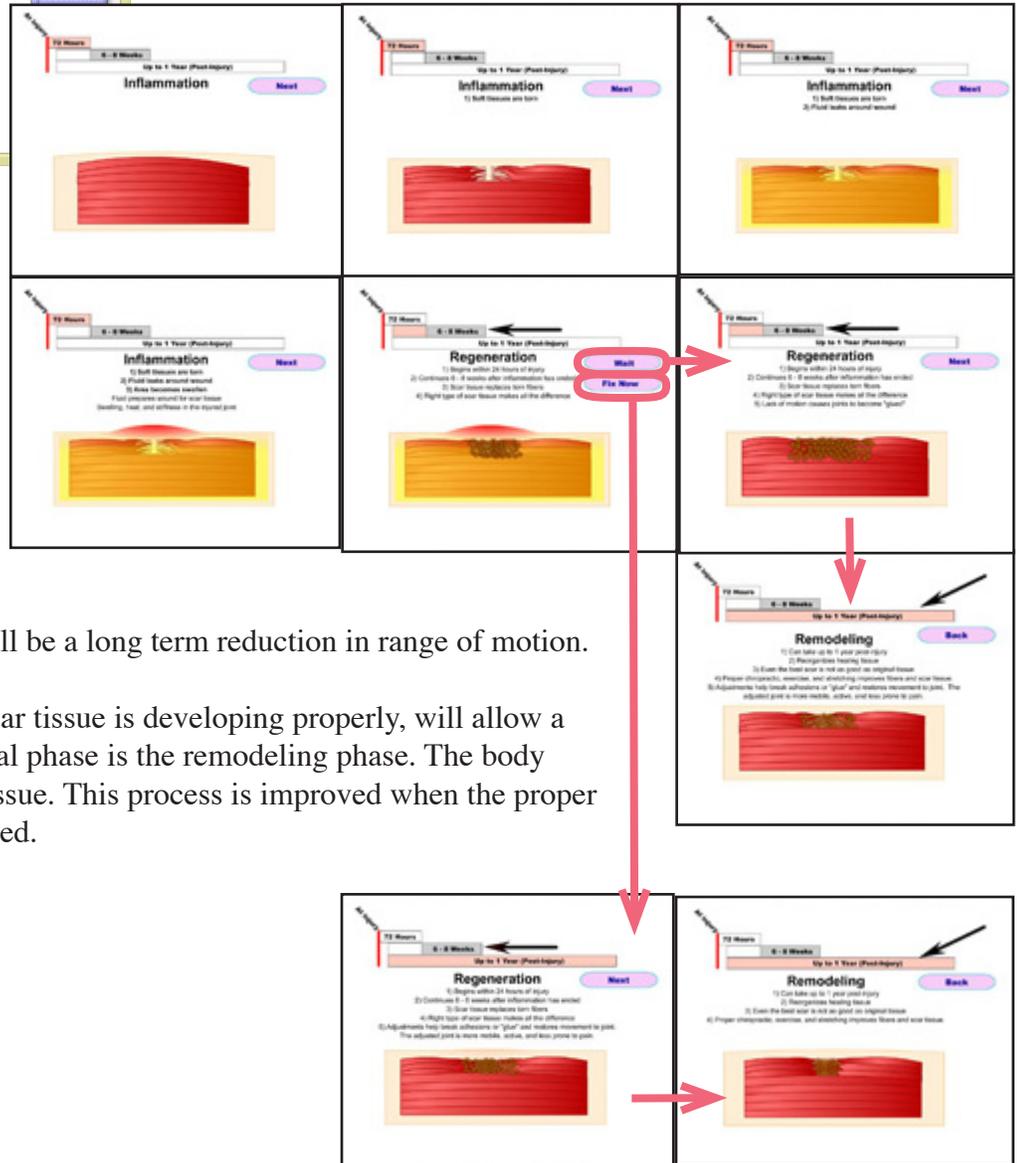


This rollercoaster screen gives us the ability to quickly show patients how the symptomatic relief they've been searching has taken them downhill: /the first hump being (A) over the counter drugs/the second being hump being (B) prescription drugs/the third hump possibly being (C) shots/ and the last hump being (D) the consideration of surgery to fix the problem.

It is possible to click on the words along the graph for the stages of care. It is very effective if you do that in conjunction with the rollercoaster just getting to that area or just pass through that area. The correction rollercoaster takes us up through the process of locating the cause of the problem and focusing on stabilizing and relief, then strengthening that area. Finally, the wellness rollercoaster is where we focus on maintaining what we have gained as well as preventing future disease.



This is where we demonstrate soft tissue injury and how it first becomes swollen, tender, and hot as it prepares itself for the development of scar tissue.



The problem with not doing anything, or restricting the range of motion in that area and not correcting any of the segments or joints that need to be corrected, is that it allows that scar tissue to form quite a mass. And that mass will not be reabsorbed with much organization. Therefore there will be a long term reduction in range of motion.

Dealing with making sure the scar tissue is developing properly, will allow a greater range of motion. The final phase is the remodeling phase. The body removes the unnecessary scar tissue. This process is improved when the proper function and motion are optimized.