

References

1. Kado DM, Karlamangla AS, Barrett-Connor E and Greendale G. Hyperkyphotic posture predicts mortality in older community-dwelling men and women: a prospective study. *Journal of the American Geriatrics Society*. 2004;52(10):1662.
2. Trout AT, Kallmes F and Kaufmann TJ. New fractures after vertebroplasty: adjacent fractures occur significantly sooner. *American Journal of Neuroradiology*. 2006;27:217-223.

KST & THE HUMPT PATTERN



KOREN SPECIFIC TECHNIQUE

KST & The Hump Pattern



KST is very gentle and yet very powerful.

What is the hump pattern?

“Doctor, I’ve been worried about my hump. Will it get worse? Can you fix it?” Unlike the more well-known dowager’s hump, the upper thoracic hump (see Figure 1) is more common and is found in younger as well as older people.

Some humps are barely noticeable; others are very large. Only proper analysis will determine if the spinal column and other structures of the hump pattern are subluxated.

Along with its unattractiveness, the hump can adversely affect the heart, lungs and thyroid and has been linked to increased risk of death due to heart disease.¹

As if that weren’t enough, the hump has been linked to loss of height; diminished lung capacity; lung conditions; finger, hand, wrist, arm and shoulder pain; numbness; tingling and various “nerve” sensations. People with humps also often

have neck, mid-back, lower back, hip and sciatica pain. Many people with a hump find that their shoulders, neck and upper back always feel tight.

People fear that the hump is a harbinger to the fragile, bent-over little-ol’-man or woman, i.e. the dowager’s hump. Can anything be done?

Fortunately the hump can usually be corrected (yes, corrected) with Koren Specific Technique (KST).

Fixing the hump pattern

The hump is sometimes referred to as a “hump pattern” because correcting the hump involves addressing a number of subluxated segments in addition to the hump itself. The hump is part of a larger group of subluxations that affect the ribs, the mid-back and the lower back in addition to the upper thoracic (upper back) vertebrae.

The key to fixing the hump, as well as correcting any body part, is specificity: knowing exactly what is out of alignment causing body malfunction (that is,

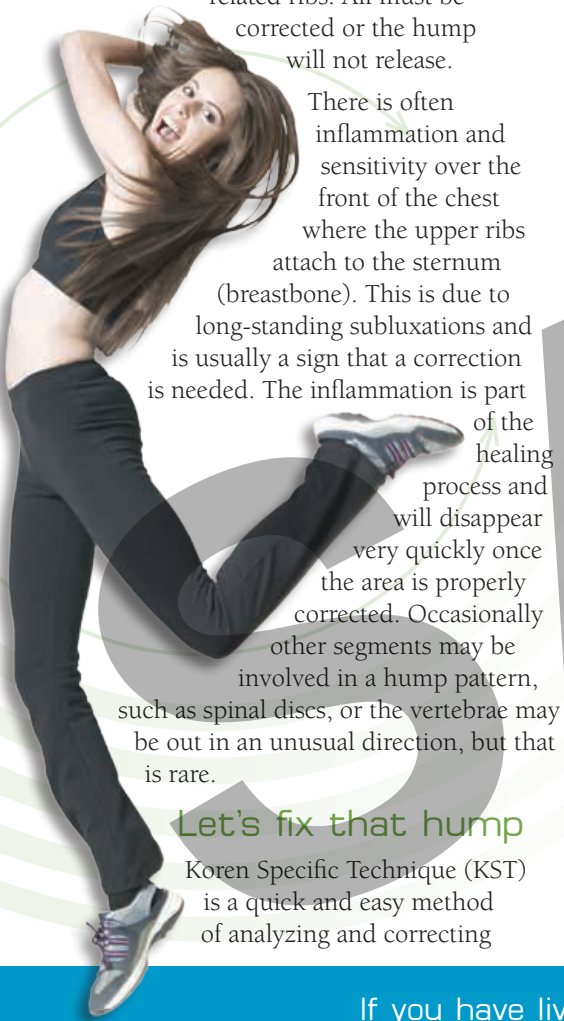


© 2013 Tedd Koren, D.C. All rights reserved. TJM
Koren Publications Inc. • 1-800-537-3001
korenpublications.com

subluxated) and the direction of the misalignment. Knowing the exact nature of the misalignment permits the KST practitioner to use a minimal amount of force/energy to correct the subluxation. When a correction is more specific, the need for re-correction is greatly reduced – people tend to hold their adjustments longer.

What makes up the hump pattern?

The typical hump involves subluxations of the upper thoracic (upper back) vertebrae and the related ribs. All must be corrected or the hump will not release.



There is often inflammation and sensitivity over the front of the chest where the upper ribs attach to the sternum (breastbone). This is due to long-standing subluxations and is usually a sign that a correction is needed. The inflammation is part of the healing process and will disappear very quickly once the area is properly corrected. Occasionally other segments may be involved in a hump pattern, such as spinal discs, or the vertebrae may be out in an unusual direction, but that is rare.

Let's fix that hump

Koren Specific Technique (KST) is a quick and easy method of analyzing and correcting



When the hump is corrected there is often improvement in posture & breathing.

any part of the body. KST practitioners usually use an adjusting instrument to correct subluxated segments. The adjusting instrument quickly and with little force is able to unlock the subluxated segments so they may return to their normal position.

When the hump is corrected...

When the hump pattern is corrected people often experience immediate improvement in posture, balance, breathing and level of inflammation or sensitivity along the ribs at the front of the chest. In addition people often feel a greater overall sense of relaxation and well-being as long-standing subluxation stress is released.

If you have lived with a hump and diminished lung capacity for a long time you may have forgotten what it feels like to take a deep breath. It is only when the hump is corrected and you inhale that you know something really wonderful has happened to you. Patients sometimes say, "I didn't realize it, but now I can take a deep breath."

How long will it take for the hump to go away?

For some people the hump will begin to reduce immediately after the adjustment and may disappear within a few days. For others the hump may not appear much different at first and will take longer to reduce. Many factors affect how fast the hump clears out, among them are age, lifestyle and history of trauma.

Please be aware that as long as the hump remains unsubluxated it will be healing and the heart, lungs, thyroid and other involved areas will benefit.

Will I need to have my hump fixed on every visit?

KST adjustments usually hold for a long time. As a general rule patients with severe hump patterns need more care than those with smaller humps though that generalization, like most generalizations, doesn't apply to everyone all the time.

KST and dowager's hump

Can KST procedures help dowager's hump? Since the dowager's hump (DH) kyphosis is due to compression fractures, unlike the upper thoracic hump, it will most likely never return to normal. People with DH don't have to live in pain or get worse. When their subluxation patterns are corrected the nervous system will function better. This will reduce pain and other symptoms while promoting overall healing.

This is in contrast to the medical approach of exercise, osteoporosis medications and a procedure called vertebroplasty or kyphoplasty wherein a radiologist injects a cement into the porous sections of the fractured vertebra. A Mayo Clinic study that appeared in the *American Journal of Neuroradiology* reveals that vertebroplasty appears to increase the risk for new fractures in adjacent vertebrae.² KST adjustments are a much safer alternative.



Figure 1

These photos show a woman and a man, each with an upper thoracic hump. Notice the anteriority of the head (look at the ear relative to the shoulders). The woman's hump is more pronounced.

If you have lived with a hump and diminished lung capacity for a long time you may have forgotten what it feels like to take a deep breath.