If you are experiencing chronic hip pain...

Four Steps to Save Your Hips

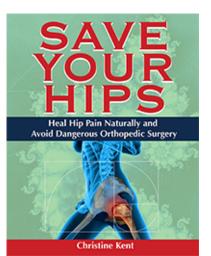
Heal Hip Pain Naturally and Avoid Dangerous Orthopedic Surgery

Artificial hips. It seems like everyone is getting them.

Ask someone who has one and they'll probably tell you how great it's been to have the pain stop. But that's not the whole story.

It never is with surgery.

That's why I researched and wrote *Save Your Hips*, my explosive new exposé of the hip surgery industry, started my







Save Your Hips Intensive programs here at the Whole Woman Center in Albuquerque, New Mexico, USA and trained and certified Whole Woman® Practitioners in Australia, Canada, the UK and US to help women with chronic hip pain.

And yes, most of these surgeries are done on women.

Surgery is not the answer, which I will explain in this paper. But let me address the critical facts you need to know to avoid dangerous and often debilitating hip surgery.

Four Steps to Saving Your Hips

Step One - Pay attention to your body. Hip inflammation is a symptom, not a disease. It is the result of hip joint misalignment that over time creates an inflammatory response, which is the source of the pain. But the root cause of the problem starts long before the pain appears. Here are some simple tests that may indicate an emerging problem with your hips.

- a. Do you have flat feet and/or bunions? Flat feet often occur with the loss of critical lumbar (lower back) spinal curvature, essential for correct pelvic and hip alignment.
- b. When walking naturally, does one foot turn out more than the other? This may indicate a tightening or contracture of hip ligaments on one side.
- c. Do you experience pain in the hip when flexing the leg (pulling it up toward your chest) and rotating the flexed leg inward toward the other leg? This is a classic assessment of hip joint trouble.
- d. Is your lower back flat, without a pronounced curvature? Does your spine have a hump at the base of your neck? Loss of lumbar curvature is not only a predictor of potential hip problems, it is predictor of pelvic organ prolapse as well.
- e. Lie on your back with knees bent and feet flat on the floor, rotate each leg outward, one at a time. Can you rotate each leg more than forty-five degrees? Limited ability to outwardly rotate the hips in this position is a warning sign of hip related issues.

Not all of these issues will apply to all people, nor are any or all of these tests definitive of potential or actual hip problems. However, they are often indicative of trouble.

Step Two - Stay away from ibuprofen. This over the counter painkiller is branded with a number of names that would be instantly recognizable. This drug, technically called a COX 2 inhibitor, blocks the so called inflammatory cascade, the biochemical series of reactions that produce inflammation and accompanying pain. The bad news is that there are two branches to the inflammatory cascade, and by blocking one, the other branch kicks in and becomes the default inflammatory process in the body. So taking COX 2 inhibitors, just institutionalizes the inflammation.

If you are dealing with hip pain serious enough to require pain relief, then you need to work on your hip issues promptly, because the pain will only get worse and serious

damage can be done to your hips if you don't correct the underlying cause. If you need pain meds for a time, try an alternative to ibuprofen. Read the labels.

Step Three - Exercising your hips in ways that give the joints motion without friction increases joint mobility without aggravating the condition. Swimming and other water exercise where the hips are not weight loaded and that extend the range of motion of the hip is helpful.

Step Four - Posture is the key to reversing hip issues. The traditional posture of tuck your bottom, suck in your belly, and pull your shoulders back is terrible posture for women. Lifting the chest restores natural lumbar curvature, lengthens the muscles of the abdominal wall, and reestablishes natural pelvic orientation. This keeps the roof of the hip socket symmetrically over the ball of the femur and avoids the development of pressure hot spots in the hip joint that commonly form as a result of pelvic misalignment.

Why This Information is Important to You

If you have chronic hip or groin pain, or know someone who does, you know the condition is miserable. At best, it's a chronic drain on your energy and motivation. At worst, it is agonizing to the point where it interferes with your ability to sleep, a serious health risk.

If you have been to a doctor about the condition, you have probably been told to take ibuprofen for a few weeks to see if that helps.

It may temporarily, but it will not eliminate the inflammation for the reasons I described earlier in this paper, but primarily because taking pain killers only masks the underlying cause of the inflammation and doesn't address the root cause at all.

The next recommendation is a few weeks of physical therapy, which is also unlikely to help since neither your doctor nor your physical therapist understands the root cause of the inflammation. There is no quick fix for chronic hip pain. True healing takes time and care, and in most cases, hip function can be fully restored. A few weeks of physical therapy will not do the job. This is just a way of demonstrating to patients that the doctor is being thorough in trying to avoid surgery. Unfortunately, this is a red herring.

Then your doctor will give you the serious talk about surgery.

Your doctor may be suggesting a total hip replacement or osteoplasty for "femoroacetabular impingement" or similar procedure. Or he (or she) may not have explained the proposed procedure, assuming your total trust in his/her judgment.

If you have a hip condition, you have a serious problem. Your doctor will probably tell you that surgery is "routine" and "state of the art", and will "fix" your problem.

What your doctor will not tell you is the full spectrum of risks you take in hip surgery.

Imagine, winding up after surgery with many of the same symptoms you experienced before surgery, only now they are *caused by the surgery*. This is a common outcome of hip surgery according to studies.

Surgery is great stuff if you get hit by a bus and when surgery is the only way to put the pieces back together so you'll survive. For chronic conditions like degenerative hip disease, surgery is only temporarily effective, and it is terribly destructive over the long term. I'll explain why in a minute.

But first, let me introduce myself, so you have some sense that I know what I'm talking about.

Why I am Qualified to Help

My name is Christine Kent, RN. If you aren't yet familiar with my work, I'm the author of the breakthrough book, Saving the Whole Woman, Natural alternatives to surgery for pelvic organ prolapse and urinary incontinence. In that book, I exposed the fraud of gynecologic surgery for pelvic organ prolapse, the shoddy research and the cavalier way gynecologists eviscerate women with no medical justification whatsoever.

I showed conclusively that western medicine has misunderstood female anatomy for more than five hundred years and that a huge scientific blunder is now so institutionalized in western medicine, that no one inside the system dares address the error.



I made a breakthrough in my research, that pelvic organ prolapse is actually a postural problem, not really a gynecologic problem at all. Thousands of women around the world have adopted my methods, canceled surgeries and are living full, physically and sexually active lives and are successfully managing their prolapse for a lifetime without dangerous surgery.

A Clue to the World of Hip Surgery

A couple of years ago, however, I noticed a curious trend on the online forum on the Whole Woman web site where our thousands of members interact. A number of women were reporting that not only were their prolapse symptoms improving, but their hip pain had gone as well.

This caught my attention and I wondered if there might be a relationship between the postural work I had been doing for years and hip joint health. Once again, off to the medical school library I went to see what the research had to say on the subject.

There is, of course, a huge body of research on the spine. There is also a huge body of research on the hip. But there was literally zero research on the relationship between the spine and the hip.

This is shocking, but sadly, not surprising.

There are hip surgeons and spine surgeons, and neither looks at the whole body and the interconnectedness of the spinal and pelvic systems.

This, unfortunately, is the legacy of reductionistic western science and medicine. The human body is the most astonishingly subtle and complex organism, the functioning of which we have barely begun to understand, even with the explosion of knowledge we have seen in our lifetime. But medicine treats the body as a collection of unrelated parts.

The Human System

Like the old song says, "The thigh bone's connected to the hip bone". The musculoskeletal system is deeply balanced, integrated, and involves an astonishing array of muscles, veins, arteries, nerves, autonomic brain functions, ligaments, fascia and other connective tissues working in harmony. Simply walking across the room is an almost miraculous exercise of the complex interplay of human systems.

When you surgically intervene in any part of this amazing system, this delicate balance is disrupted and other parts begin to fail. After hip surgery, patients' natural gait has been damaged or destroyed, she will often wind up with failing knees, feet, shoulders, and spinal pain due to the arbitrary methods used to align artificial hip joints.

And yes, people with osteoarthritis of the hip are often in excruciating pain. However, there are far less drastic ways of dealing with the condition, which over time can relieve the pain permanently.

Historically, common hip disease was not treated surgically. Bed rest, warm baths, leg braces to take the weight off the hip joint for a period of time, allowing the inflammation to subside were the common, accepted and effective methods employed.

The Fight for the Rights to Orthopedics

But that didn't satisfy the surgeons.

Surgeons want to do surgery. It's what they like to do, it is what they are trained for, and as the old saying goes, "If the only tool you have is a hammer, every job looks like a nail."

The term orthopedics today means surgery. An orthopedist is a surgeon by definition.

But it wasn't always this way. The surgeons won the right to use the term in a battle that raged for the entire 19th century. Today, if you fall and break your hip, surgery is the only option that will be made available to you.

Traditional convalescent care for this type of injury simply does not exist in today's medical system.

And yes, most of us grew up watching The Bionic Man and The Bionic Woman, or reruns thereof on TV, and the exploding revolution of science and technology seems capable of almost anything.

Replace a hip? No problem.

Actually many problems.

A Few of the Many Problems with Hip Surgery

The mortality rate for hip replacements is about 1% across the US. That's one in a hundred. If this is your second hip or a replacement for a prosthetic joint that failed, your mortality rate is 2.5%, or two and a half people per hundred. Better than Russian roulette, but not a risk to be undertaken lightly.

That's not counting the ceramic hip joint prostheses that shatter, the stainless joints that poison the wearer with chromium and nickel particles from joint wear, which enter the blood stream or inflame the tissue around the joint. Not long ago, a Chinese prosthetic joint manufacturer had to recall tens of thousands of joints due to manufacturing flaws.

This would be an unhappy letter to get in the mail.

"Dear madam. We regret to inform you that the hip joint we just implanted in you at huge cost of money, time, pain and recovery has been recalled by the manufacturer and we need to take it out and replace it with a shiny new [insert brand name here] joint that we think (and hope) will last much longer. We apologize for any inconvenience, but we'll expect to see you in the operating room very soon. Sincerely..."

If patients only get two shots at hip joint replacement on each leg and that the manufacturer's problem just cost one, then instead of twenty of thirty years, on which a patient might count to get through the rest of their life, the patient has maybe ten or fifteen years with their artificial joint, and another ten or fifteen years in a wheelchair.

If it weren't so tragic, it would be a joke.

But hip replacement is just the beginning.

Surgeons Run Amok

Orthopedic surgeons have developed new, complex operations, all based on a set of assumptions that have never been scientifically validated.

Let me repeat that, because it is the most important message I have to deliver to you.

Orthopedic surgeons have developed new, complex operations, all based on a set of assumptions that have never been scientifically validated.

What this means is that the fox is in charge of the hen house. Let me give you an example.

Orthopedists make the following case:

- 1. People are living longer than ever.
- 2. As a result, the risk of their hip joints failing well before their death is higher.
- 3. Therefore any "congenital deformities" of the hip should be surgically corrected to insure the patient has full use of their hip joints for a lifetime. The sooner the surgery is done the better, so 11 to 16 year-olds are fair game.
- 4. Who defines what a "congenital deformity" is? The surgeons, of course. And no scientific validation of these assumptions are required. Why? Because the surgeons say so. That is the logic behind hundreds of thousands of surgeries being performed every year.

Oh, and by the way, the research suggests that 26% of these difficult and complex surgeries will result in total hip replacements due to a wide variety of potential complications. That means, if the average life expectancy of a hip joint prosthesis is 15

years (an optimistic assumption) and the prosthesis can only be replaced once (typically), after which there isn't enough of the pelvis left to work with, then by her forties or fifties, our youngster will be confined to a wheelchair for the rest of her life.

Young athletes are also being operated on by the thousands. Women in their twenties and thirties.

I could go on with many other examples and I have done so in my book, *Save Your Hips, Heal hip pain naturally and avoid dangerous orthopedic surgery.*

What You Need to Know About Your Hips

The hip joint surgery industry, and there is huge money involved, is a colossal deception. Their anatomical assumptions are unproven, the measurements used to justify surgery are arbitrary. These surgeons are treating the symptoms because it is all they know how to do. They demonstrably do not understand the underlying disease.

Even in their own research, orthopedists are starting to raise fundamental questions about their own methods.

That's where I learned all this.

I have a four year degree in nursing. I also have a four year degree in anthropology. I know how to read research. And once I got a whiff of what was going on in orthopedics, I have been on a relentless hunt for the truth of this multi-billion dollar industry for more than fifteen months.

It's an astonishing story. And it's all from their own research.

I consumed probably a thousand research studies and academic journal articles to put this puzzle together. You'll see a bibliography in my book with more than four hundred citations.

It is a story every woman needs to hear. What I learned in my study of gynecology for my first book was that the western medical system tragically is a very dangerous place for women. My work in orthopedics doubles down on that claim.

But forewarned is forearmed.

I have always said that the medical system does many things astonishingly well. But for some chronic conditions, like pelvic organ prolapse and osteoarthritis of the hip, the system is not only virtually useless, it is profoundly misdirected and dangerous.

The Root Cause of Hip Pain

While there are a number of serious pathologies to which the hip joint may be susceptible, the primary cause of osteoarthritis of the hip is postural. What I proved in my work with thousands of women around the world with pelvic organ prolapse, applies equally to the hip.

Why have so many ballet dancers blown out their hips by their forties? Because since they were small children they have been taught to tuck their bottoms, flatten their bellies and pull their shoulders back. This is completely unnatural posture for women.

Look at any three to eight year old girl.



The most prominent feature of her shape is the sweeping curvature of her lower back or lumbar spine. This is the natural female shape. Sustaining that curvature allows the natural orientation of the pelvis to remain like a ring on its edge with the opening at the back.

No, the pelvis is not like a basin with the opening at the bottom as it is conventionally illustrated and to which the medical system has subscribed for over five hundred years.

This isn't obscure and mysterious. Any woman can verify this for herself in about a minute.

When the bottom is tucked, however, not only is she set up for her pelvic organs (bladder, uterus and

rectum) prolapsing into her vaginal space, but her hips joints are misaligned, which, over time, will result in inflammation.

The mechanics of this are relatively simple. The hip socket, or acetabulum, has a heavy roof for supporting the body's weight. In proper alignment, this roof symmetrically supports the ball at the top of the femur, the long bone of the upper leg. When the pelvis is misaligned, the acetabular roof is tilted so all the weight of the body is concentrated on one point on the acetabulum, which results in stress and inflammation.

Once the inflammation process starts in the hip, it is difficult to stop and permanent damage can be done.

Hip inflammation is just a symptom of a structural misalignment that has become institutionalized through muscle and ligament weakness, and contractures that are correctable without dangerous and irreversible orthopedic surgery.

Get Educated and Informed

If you have hip pain, know or love someone who does, or want to protect your hip health for your lifetime, get educated.

The medical system is very slick and powerful. They have carefully cultivated their perceived God-like knowledge and "wisdom" for generations. They have captured the blind trust of millions. But that trust has been and is being abused.

The Latin expression *caveat emptor* means, "let the buyer beware."

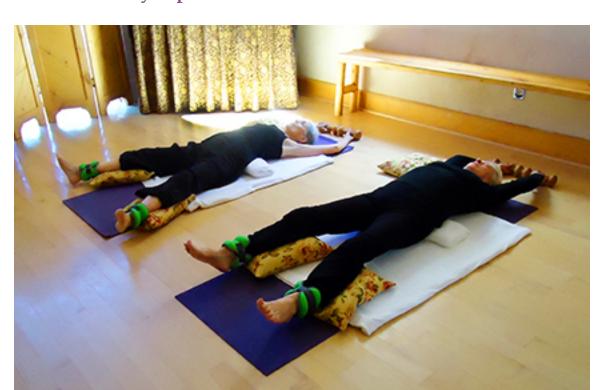
Nowhere does this dictum apply more aptly than in dealing with the medical system.

Making decisions about your health will impact both your quantity and quality of life, including:

- Protecting your natural gait and balance
- Your physical performance if you are an athlete
- Your ability to walk and exercise
- If you are a parent, your ability to enjoy the adulthood of your children
- Remain active enough to keep up with and enjoy your grandchildren
- To live the promise of the "golden years" requires that you be able to make fully informed choices about your treatment. Informed choice means access to all the information available.

If you are a young person anxious to get back to your favorite sport, and chafe under your current physical limitation or chronic pain, and believe in the unlimited capabilities of surgical technology, you need a reality check.

I have read hundreds of stories of mostly young people looking for surgical answers or post-surgery patients reporting on their progress, or more commonly, lack of progress. Many of these posts are heart breaking in both their naive optimism and their shock as the reality of what these surgeons have done to them sinks in. My book is for you too.



My Experience with Osteoarthritis Clients

I have been working with women with hip problems, in many cases, acute osteoarthritis.

Do I have a quick fix? No.

Understand that there is no "fix" for chronic conditions like osteoarthritis and pelvic organ prolapse, in spite of what the surgeons would have you believe. The data just do not bear out the story the medical system wants you to blindly accept.

What we can do is learn the skills and presence of mind to successfully manage these conditions in such a way that we can live full, physically active lives by minimizing how much these conditions impose themselves on our daily activities.

It is difficult letting go of the notion that our doctors can fix us. Staying healthy means knowing when to take responsibility for your own health and when to turn to the medical system.

But what I do have is a program that can relieve the inflammation and musculo-skeletal distortion that osteoarthritis produces. I have a program for successfully managing hip osteoarthritis for a lifetime.

I also have a great deal of knowledge to impart about the care and feeding of your hip joints so they last a lifetime. And, I have a great deal of knowledge of the misrepresentation, arbitrary methods and anatomic misunderstanding rampant in the orthopedic industry that is being sold as solutions to a variety of hip related problems.

What you will find in *Save Your Hips* is the distillation of a great deal of knowledge into a compact and useful form that you and the people you care about can use to successfully manage their hip conditions.

Remember, forewarned is forearmed.



Informed Consent

Making sound decisions about your health requires that you do research. The internet provides a wealth of information, not all of it useful and much of it produced by the medical system, touting conventional treatments.

Unfortunately, you will not get all the information from your doctor. There are two important reasons for this:

First, your doctor doesn't *have* all the information. Doctors only know what they are taught and what they have learned through experience. Their experience is narrowly circumscribed by "standards of care" or the conventional treatments established for conventional conditions.

Second, even if he did have all the information, your doctor has a conflict of interest with you as the patient. The doctor wants to do surgery. This is how he makes his living. In some cases, the doctor will be honest enough to steer you away from surgery if he deems it inappropriate for whatever reason. But the temptation is just too great and doctors are only human with their own financial issues and aspirations. So you will not get the whole story from your doctor.

The Save Your Hips Intensive Program

Since I opened the Whole Woman Center in Albuquerque in 2007, women from all over the US and many other countries such as Ireland, Israel, New Zealand, Australia, the UK, to name just a few, have come to work with me on their prolapse issues. Now I have designed a program for women who suffer from chronic hip pain, the *Save Your Hips* Intensive.

The Whole Woman® Save Your Hips Intensive program has four parts:

- 1. **Assessment and education** there are a wide range of hip joint malalignment issues that must be carefully assessed. Changing a lifetime of postural and walking habits requires understanding the relationship between hip and spinal configuration and their effects on hip deterioration.
- 2. **Exercise and motion** I have developed a unique exercise program to help restrengthen the muscles around the hips, back and thighs as well as gently stretching those ligaments that are in contracture.
- 3. **Myofascial Massage** A lifetime of postural habits becomes embedded in the soft tissues of the entire body. Licensed myofascial massage therapists, trained by me, loosen these frozen soft tissues, allowing the body to realign itself into a more natural orientation that supports healthy hip joint function.
- 4. **Follow up** For women local to the Whole Woman Center, or one of our Certified Whole Woman® Practitioners, a regular follow visit is important to keep you on track. Your hip joint condition developed over years and it won't disappear overnight. Changing your postural patterns takes time and follow up is helpful to insure that when you return home, you will be able to continue seeing improvement. If you don't live near the Whole Woman Center or one of my Practitioners, the companion DVD that accompanies my book has the whole exercise and stretching routine so you can continue the work on your own. We also have in the Whole Woman store complete accessory kits of the equipment and supplies we use in the course.

The Whole Woman® *Save Your Hips* Intensive program is a week-long program held at the Whole Woman Center in Albuquerque, New Mexico, USA.

On Monday, each participant in the program will spend two hours in individual session with me for the Assessment and Education phase. After working with me, the participant will begin her daily myofascial massage treatments. Each morning for the balance of the week, the participant will work with me in a group of no more than four women to strengthen and reinforce her posture and pelvic alignment under my personal supervision. Each afternoon she will have another massage treatment.

By the end of the week, the participant should experience noticeable improvement and will leave with the knowledge and tools to continue the work on her own.

Save Your Hips

For more information, and scheduling for the *Save Yo ur Hips* Intensive, please call the Whole Woman Center at 505-243-4010. To order my *Save Your Hips* book and DVD or the *Save Your Hips* Intensive, please click the links below. Thank you.

Sincerely,

Save Your Hips
Save Your Hips Intensive

Christine Kent Whole Woman Inc.

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