

Should You See a Chiropractor or a Neurosurgeon

Prominent New York Neurosurgeon Ezriel Kornel, MD, Says the Distinction Is Critical, and the Decision Can Be Life-Changing

WHITE PLAINS, NEW YORK, UNITED STATES, November 16, 2020 /EINPresswire.com/ -- Countless



When it comes to neuromuscular and neuroskeletal matters, there is no substitute for the advice of a highly qualified neurosurgeon.”

Neurosurgeon And Spine Specialist Ezriel Kornel, MD

Americans head to the chiropractor every year with a variety of gnawing neuromuscular disorders and complaints: to relieve pain; to loosen up for athletic activity; to restore or improve functionality; or to help deal with a chronic condition. It’s a form of complementary medicine embraced by millions and sanctioned as an accepted area of medical intervention.

Where should patients draw the line when it comes to seeing a chiropractor, or making an appointment with a medical doctor skilled in spine surgery — a physician who

can both diagnose and treat a neuromuscular disorder? According to Ezriel Kornel, MD, FACS, a nationally renowned neurosurgeon with offices in Manhattan and White Plains, a principal of Brain & Spine Surgeons of New York, and an Assistant Clinical Professor of Neurosurgery at Weill Cornell Medical College in New York City, the decision is a no-brainer, and a critical one.

“There are outstanding chiropractors who recognize when there is a neuromuscular problem or a neurological problem they can’t correct, and will send a patient to a neurosurgeon appropriately,” Dr. Kornel explains. Conversely, there are others in the chiropractic field “who believe they can simply work with it and won’t send a patient to see a neurosurgeon.” The latter scenario can be a grievous error that can have major consequences and impact a patient’s mobility and quality of life,” Dr. Kornel says.

“There are basically two issues that demand that a patient see a neurosurgeon right away,” Dr. Kornel explains. The first involves any condition whereby a patient is experiencing “a significant neurological deficit.” This, Dr. Kornel points out, can range from a dropped foot “where the person can’t lift up their foot,” or a weak knee, to where “they have such weakness in the arm that they can’t lift it above their shoulder or bend their hand to scratch their head.” Any of the above requires immediate intervention from a neurosurgeon,” he states.

Should a patient lose bladder or bowel control, Dr. Kornel says, that is a definite warning sign of a neurological issue that needs to be addressed at once. "Any numbness in the genital or rectal region — that is a neurological emergency." Similarly, if a patient is uncoordinated in his or her legs or is unable to climb stairs, that also requires the immediate attention of a neurosurgeon, he adds.

"Patients think that if there's no pain, it's not important enough to seek treatment," Dr. Kornel says. The bottom line is this: "If your body can't do something that it's supposed to do, you should see a neurosurgeon at once."

Secondly, Dr. Kornel emphasizes that if a patient "Has been in treatment for more than six weeks and is not getting any better, their pain level is unchanged, there is tingling or numbness in a leg or arm, if it's limiting normal life activities, you need to be evaluated by a neurosurgeon." The concept of "wishful thinking" ought to be jettisoned, he insists. "Patients don't want to think there's a real problem," Dr. Kornel says. "They think, 'This will go away.' That's why people have strokes and heart attacks; the only time many people get help is when they're in severe pain."

The debate over whether to see a chiropractor or a neurosurgeon can be one of philosophy, Dr. Kornel states, but when the neurological system is involved, it is never a good idea to ignore symptoms. "There are chiropractors who have a different philosophy, and theirs is an ability to correct things. Many feel that if the patient sticks with it long enough, chiropractic medicine will make a person better. The reason they think that is that sometimes, a condition will get better without surgery. However," Dr. Kornel cautions, "it's not worth taking the chance by waiting. It's smarter to be evaluated first." That way a neurosurgeon can rule out any significant neurological condition and put the patient at ease. "For the vast majority of patients I see, I tell them they do not need surgery."

Failure to be evaluated by a neurosurgeon can have drastic consequences, Dr. Kornel warns: "You may end up having something that, ultimately, you will not be able to recover from." A reasonable chiropractor will always recommend that a patient see a neurosurgeon if there is any concern whatsoever, Dr. Kornel says. "'Absolutely,' they should say, 'and here is who you should see.'" On the other hand, he notes, "a substandard chiropractor will say, 'You don't need to see a neurosurgeon. They'll just operate on you and make you worse.'" That's the moment, Dr. Kornel insists, "When it's time to see a new chiropractor."

Chiropractors, Dr. Kornel says, "Have different standards: They're expected to have some neurologic knowledge. But you don't want to manage your problem by seeing your chiropractor." A physiatrist, a medical doctor who treats the neurologic and muscular system without surgery, can be consulted, "and they're very good. But it depends on the severity of neurologic deficit. If you slip and fall and become paralyzed, it's obviously serious." But other conditions, such as chronic pain or loss of bladder control or numbness in the lower extremities, demand the intervention of a neurosurgeon. "That's pretty obvious as well."

Primary care doctors can also be consulted, Dr. Kornel notes, but they are hard to see due to scheduling. "They're often so inundated you can't get in to see them in less than a month," he says. Walk-in clinics will mostly prescribe an over-the-counter painkiller, tell you to 'take it easy, use a heat pad,' and send you home.

Dr. Kornel also warns against relying on prescription painkillers to alleviate discomfort, as they can mask true symptoms, and lead to a reliance and possibly addiction.

In the end, when it comes to neuromuscular and neuroskeletal matters, there is no substitute for the advice of a qualified neurosurgeon.

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