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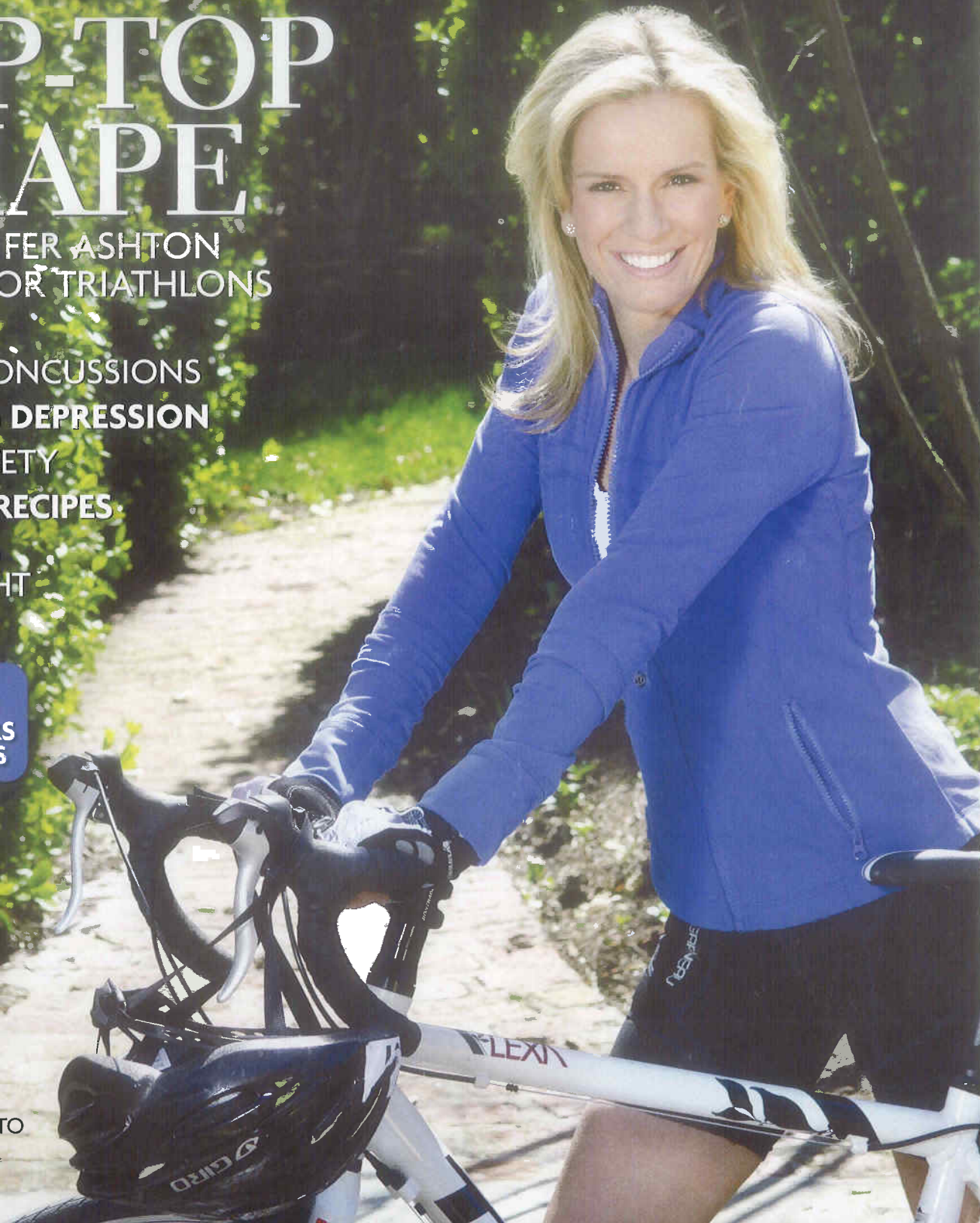
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Pain, Pain, Go AWAY

*Calmare Pain Therapy gives relief
to long-term chronic pain sufferers*

WRITTEN BY **LUCY PROBERT** PHOTOGRAPHY BY **CHRIS MARKSBURY**

Laura Miller wasn't ready or willing to give up on herself even though she felt like her doctors were beginning to. She had been in a car accident in 2005 that resulted in a back injury and later developed Reflex Sympathetic Dystrophy (RSD), a chronic pain condition. The Greenwood, Ind., resident had been in intense pain for years.

"I reached my breaking point last summer after trying so many treatments, none of which worked," the 24-year-old says. "My doctors were starting to recommend some pretty invasive things like a spinal cord stimulator." But she was looking for a long-term solution.

A chance encounter with a fellow RSD sufferer who found success with a new treatment led Miller from a hospital in Ohio to Rutherford, to try Calmare Pain Therapy with Dr. Michael Cooney of Rutherford Allied Medical Group.

"It was a total leap of faith," Miller says. "I checked myself out of the hospital, and my husband drove me to New Jersey that day."

The result?

"It worked!" she says.

WHAT IS CALMARE?

When someone is injured, Cooney says, the brain sets up a process to heal the injury. For example, it increases blood flow to the area, and blood cells take dead tissue away. At a certain point, the brain recognizes that the tissue or bone is healed and shuts off the pain message. But in some instances, such as in RSD and some post-surgical cases, the pain message does not get shut off, which is where Calmare comes in.

The FDA-cleared Calmare Pain Therapy Treatment, also called "scrambler therapy," is a non-invasive, medication-free treatment that uses small electrodes, similar to those used in an EKG, placed on the patient's skin above and below the pain sites. The device sends a very low current of electrical stimulation through the skin and nerve fibers, carrying a "no pain" signal to the brain, essentially overriding the pain signal.

"We're basically trying to reboot the brain," Cooney says.

There are no known short- or long-term side effects from treatment.





For more information about Calmare Pain Therapy, contact: Rutherford Allied Medical Group, 323 Union Ave., Rutherford, NJ 07070, (201) 933-4440, calmaretherapynj.com

“I had forgotten what it felt like to live without pain, so to have that feeling gone was just unbelievable. It was the most amazing moment of my life.” LAURA MILLER

HISTORY

Italian researcher and bioengineer Giuseppe Marineo devised Calmare as a way of treating pain associated with chemotherapy (technically called chemotherapy-induced peripheral neuropathy, or CIPN).

Calmare has found success here in the U.S. for conditions such as sciatic and lumbar pain, phantom limb syndrome, RSD, failed back surgeries, neuropathies, chronic neck pain and radiating pain. Most patients Cooney sees have been living with such pain for anywhere from 3 to 7 years.

A PRAYER ANSWERED

Amanda Davidson, 17, the young RSD patient who urged Laura Miller to make the trip to see Cooney, was playing softball two years ago in her hometown in Indiana when she rolled her ankle and fell on it.

“I was told by my doctor that it was broken, and a cast was put on,” she says.

As it turns out, the cast was put on too tight and the ankle was never really broken. Davidson lost feeling in her toes, and the pain spread to her leg, hips, back and neck.

“Amanda was given so little hope,” her mother, Jennifer, says. “Once you reach the six-month mark with RSD, your options become very limited on what doctors will see you and how they treat you.”

But they weren’t giving up.

“This is my child,” Jennifer says. “We kept looking because we knew that somewhere there was a doctor who would help her, and that was Dr. Cooney.”

Amanda first tried Calmare last summer, and she has been back four times for treatments.

“Each trip is worth it because the pain goes away,” she says.

Without it, she’s certain she would be in a wheelchair and crippled.

“It was a prayer answered,” her mom says. “It hasn’t all been peaches and cream, and there have been setbacks. But we’ll never give up.”

There are seven treatment centers certified to offer Calmare Therapy in the U.S., and Cooney says the results he’s seen in his 50 patients treated with Calmare, from Amsterdam, Africa, South Carolina and closer to home, have been amazing.

“I’m treating a 12-year-old boy who has been in pain for a few years,” he says, “and I have a

76-year-old patient who has been suffering for 40 years.”

Patients typically undergo 10 to 14 sessions, which last about 45 minutes each, with some feeling relief on the first day.

“At my first treatment I started crying hysterically,” Miller says. “I think Cooney and my husband thought I was in pain, but it was just a rush of emotions because for the first time in years I felt a significant amount of relief from my pain. I had forgotten what it felt like to live without pain, so to have that feeling gone was just unbelievable. It was the most amazing moment of my life.”

Cecelia Carney from East Rutherford read about Calmare in *The Record* and was ready to try a non-drug approach to easing the post-surgery pain she had been feeling in her hand since 2006.

“Nothing I tried worked,” she says. “I was taking Percocet, but that only dulled the pain. It gets to the point where you just want to give up.”

After just one treatment, in a set of 10, she felt a difference.

“I’m very happy with it,” she says. “I have had a significant reduction of the pain.”

10 TREATMENTS COST ABOUT \$2,500. INSURANCE COVERAGE VARIES.

WHO IS IT FOR?

Calmare Therapy is not for those with acute (as in short-lived, non-chronic) pain, Cooney says.

“I’ve had patients tell me they have had lower back or neck pain for a few months,” he says, “but the better option for them is to see a physical therapist or a neurologist, because it’s probably a musculoskeletal condition that will only come back eventually.”

The patients he sees have tried every option available, including a myriad of drugs. In the end, he says, the medications will stop working because the body will learn to tolerate them.

“What I ask them is, ‘If we can get you down to a pain level of one or two (out of 10), which is really just an annoyance level, and get you off your medications, would you be happy?’”

“When you live with pain,” Miller says, “it affects your relationships and goals you have set for yourself. I don’t think I’d be living the kind of life I would want for myself if I still had pain.”

Peace of mind is what Jennifer Davidson feels.

“We know now that we have someone who will never give up on Amanda,” she says, “and that means everything to us.” ♦

