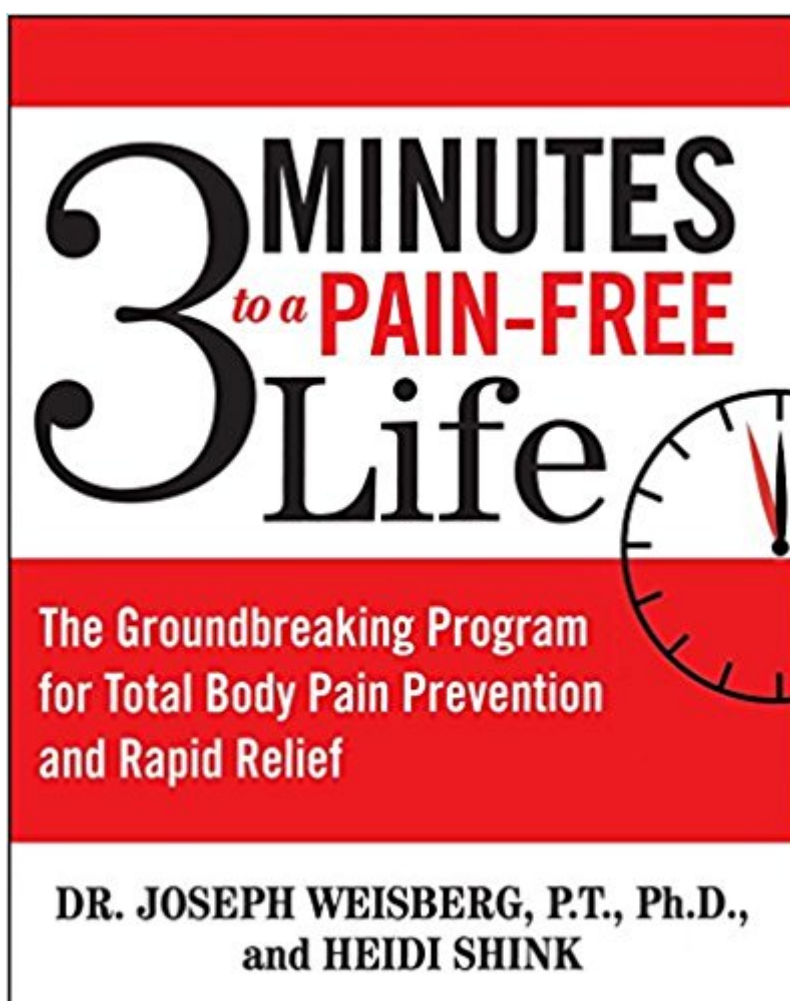


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3 Minutes To A Pain-Free Life: The Groundbreaking Program For Total Body Pain Prevention And Rapid Relief



Synopsis

Relieve and prevent chronic pain forever with this simple, safe, and sure-fire three-minute daily program! Imagine a world free of aches and pains...no back pain, headaches, joint stiffness, or arthritis; no expensive ergonomic equipment or pain medications. With Dr. Joseph Weisberg's revolutionary new system, a pain-free life is now within reach of everyone--even those who have endured chronic pain for years. At the heart of Dr. Weisberg's system is the 3-Minute Maintenance Method--a unique program for all ages and fitness levels that eliminates the conditions that cause pain in the first place. By utilizing six different thirty-second therapeutic movements the program makes it possible for the body to keep itself free of pain. Thanks to Dr. Weisberg's groundbreaking program, relief--and a lifetime of healthy muscles and joints--is finally at hand. In fact, it's just three minutes away!

Book Information

Paperback: 320 pages

Publisher: Atria Books; 37237th edition (April 26, 2005)

Language: English

ISBN-10: 0743476476

ISBN-13: 978-0743476478

Product Dimensions: 7.4 x 0.9 x 9.2 inches

Shipping Weight: 1.3 pounds (View shipping rates and policies)

Average Customer Review: 4.4 out of 5 stars 155 customer reviews

Best Sellers Rank: #78,630 in Books (See Top 100 in Books) #9 in [Books > Health, Fitness & Dieting > Diseases & Physical Ailments > Chronic Pain](#) #34 in [Books > Health, Fitness & Dieting > Exercise & Fitness > Quick Workouts](#) #103 in [Books > Health, Fitness & Dieting > Diseases & Physical Ailments > Pain Management](#)

Customer Reviews

Dr. Joseph Weisberg, PT, PhD, is a highly respected expert and authority in the field of physical therapy, with more than thirty years of clinical experience. Since opening his private practice in 1969, Dr. Weisberg has imparted his unique talent, craft, and vision of health and healing to tens of thousands of patients. Dr. Weisberg has been the recipient of five professional and academic awards, serves on the editorial board of The Journal of Orthopedic and Sports Therapy and sits on the advisory board of the Professional Associations for MS.

Chapter 1: The Good News About Pain I have a little anecdote I like to tell my patients when they first come to see me: I've got some good news and some bad news for you. First the bad news: You're in pain. Now the good news: You're in pain. Sounds ridiculous? It does to my patients as well, that is until I give them the same information I'm about to give you. By the time you're done reading this chapter, you will begin to look at pain differently and see it for what it really is: a teacher guiding you to a complete and accurate accounting of what problems are occurring in your body. Pain is not your enemy. In fact, it is one of your greatest allies. The simple truth is that pain is nature's perfect alarm system, designed to alert you that something is wrong. When this alarm goes off, you are being sent an unmistakable message that something happening inside or to your body is causing you harm. Why is it so imperative for you to see pain in this light? Because misconstruing or ignoring what your body is trying to tell you can have grave, even crippling, consequences. I am going to teach you how to recognize and interpret the signals of pain so that you may heed the sirens of this built-in warning system. I know it may be hard to perceive pain as anything but bad, especially when you or someone you know is suffering. And a whole lot of people are suffering. Pain does not discriminate. It can strike whether you are a young adult or of advanced age, male or female, rich or poor. It doesn't matter if you are a high-performance athlete or a couch potato, a yogi or a mommy. I am well aware from my own experiences how much being in pain reduces your zest for living. It robs you of the ability to be up for all the challenges and good times that life has to offer and seems to hurt much more than it can ever possibly help. And to a certain extent that's true, especially if you're talking about the kind of pain that just won't go away. However, I am not suggesting that I think it's a good thing to stay in pain. In fact, I wrote this book so that you could live your life pain free. I want to help you develop a deeper relationship and connection with your body than you've ever had before. When you make a friend of pain, you will be acknowledging and respecting the intricacies and nuances of your body's design. Thus the first step toward living a pain-free life is understanding that the good news about pain is that you can feel it. Without the ability to feel pain, you would be unable to survive. (Until recently, children who were born lacking this faculty had an extremely diminished life expectancy.) It is one of creation's great paradoxes that you incur pain in order to avert pain. Think about it. Pain makes it possible to navigate your way through the perils that are often a part of daily life. For instance, when you touch a hot stove, the pain you feel demands that you pull your hand away to avoid any additional harm. If you suffer an injury, such as a fractured leg, the pain prohibits any further use of the limb until it has healed. Likewise, if you develop a disease or suffer a major trauma, the body responds by sending a clear directive to your brain: Pay attention and take action now. Not all pain is created equal. Although it

may feel the same, there are actually different kinds of pain. They are generally broken down into two categories: acute pain (sharp, intense, immediate) and chronic pain (recurrent, persistent, long-lasting). In the preceding paragraph, all of the examples illustrated acute pain. This type of pain is characterized as an instantaneous symptom of a specific injury triggered by some form of tissue damage. Acute pain can be mild, such as from a splinter, or it can be severe, such as when you have a tooth pulled. Its duration can vary from a matter of seconds, such as from a stubbed toe, or to several months, such as from a bad burn. The important distinguishing factor is that there is a direct correlation between cause (injury) and effect (pain). In addition, there is a reasonable, almost predictable amount of time between effect (pain) and recovery (no pain). Treating acute pain is also fairly predictable because the injury itself informs you of what needs to be done to remedy the problem. Whether you can manage this treatment yourself, such as by putting a Band-Aid on a minor cut, or require medical assistance, such as needing stitches for a severe cut, there are some obvious steps that will eventually lead to the alleviation of your pain. In other words, when you fix what's wrong, the pain goes away. All of these factors make it easy to see why feeling acute pain is so vital to our existence. However, things become a lot less clear when we start talking about the main focus of this book: chronic musculoskeletal pain.

Chronic Pain: The Inside Story

No two words put together back to back inspire more fear, spark as much controversy, and cause as much confusion as "chronic pain." You cannot turn on the television, listen to the radio, open a newspaper, or surf the Internet without being bombarded by a plethora of information on this subject. I have found a lot of this information unnecessarily complex, often conflicting, and sometimes even highly inaccurate. Everyone, it seems, is talking about chronic pain because everyone, it seems, is in it. And that's no exaggeration. It has, quite literally, become an epidemic. The statistics in the United States alone are staggering:

- More than 100 million people suffer from chronic pain.
- 90 percent of the population will experience back pain during their lives.
- 70 million workdays are lost from pain a year, costing industry more than \$100 billion a year in lost wages and insurance.
- 50 million people are partially or totally disabled by their chronic or long-term pain.
- 45 million people have severe and chronic headaches.
- 40 million people suffer from arthritis, 26 million of them women.
- 20 million people experience jaw and lower-facial pain.
- 10 million children under the age of 18 suffer from chronic pain.
- 6 million people suffer from fibromyalgia, a general diagnosis for the myriad aches and pains afflicting muscles, joints, and tendons.

You may be reading this book because you are already one of these statistics. Or you may be reading it because you don't want to become one of them. Either way, the information in this book will provide you with the help you're looking for. I'm going to

let you in on a little secret: In nearly 100 percent of these cases of chronic musculoskeletal pain, the symptoms can be rapidly relieved and the conditions themselves prevented. The word "chronic" comes from the Greek word for "time." Generally speaking, chronic pain could be characterized as any pain that recurs or persists over an indeterminate period of time. Like acute pain, chronic pain can run the gamut from mild to severe; and the duration of each bout can last from minutes to months, even years. What distinguishes the two is that while the source of acute pain can be attributed to an obvious injury or illness, many who suffer from chronic pain (barring the chronic pain associated with disease, such as cancer, or trauma, such as the chronic pain associated with nerve damage) do so seemingly in the absence of an injury. For instance, how many times have you experienced pain that seemed to just pop up out of nowhere? How many times have you said that "without warning" you couldn't move your neck or that "suddenly" your back went out? If these experiences are true for you, you're not alone. Millions of people around the world have reported the same thing. Likewise, whereas the recovery from acute pain seems to follow logically from the treatment of the injury itself, chronic pain persists in spite of, sometimes even because of, treatment. In fact, quite often there seems to be no logic at all; no discernible direct link between cause, effect, and temporary recovery. Chronic pain seems to come as mysteriously as it goes. Of course, there is a reason for the sudden onset and dissipation of chronic pain, as I am about to show you, but the lack of objective evidence pinpointing an actual injury has led to a great debate in the medical community on the very nature of chronic pain. Because of its vexing and ambiguous qualities, many health professionals have been reluctant to even acknowledge chronic pain as a real ailment. I cannot tell you how many patients have come to me over the years after their doctors told them that their pain was imaginary, a manifestation of hypochondria, or a desperate ploy for attention. Although I am always appalled when I hear this, I am never surprised. Western medicine is dependent upon the tangible for analysis and care -- seeing, cutting, poking, and prodding. But chronic pain is intangible and cannot be quantified by most extrinsic standards, except that the patient is clearly feeling something. Because many of the empirical methods commonly used today for diagnosing chronic pain, such as CAT scans, MRIs, X-rays, and blood tests, are inadequate for formulating proper treatment, many doctors feel frustrated and impotent in the face of the growing crisis. Some have even dismissed it altogether. The situation has become as critical as it has in large part from widespread misdiagnosis, mistreatment, and ignorance. The failure on the part of many health professionals to adequately deal with chronic pain exacts a devastating psychological toll on its sufferers. To be in physical pain is bad enough; to be given little support and offered no solution only leaves one feeling utterly helpless and depressed. The severity of this emotional

trauma cannot be overestimated. Fifty percent of suicides give pain as motivation.¹¹ Changing the approach to chronic pain has literally become a matter of life or death. Lately, the medical community has acknowledged an urgent need to reassess their position, and slowly a new attitude and understanding is emerging. Not long ago I was reading an article in Newsweek that stated: Realizing that for years doctors neglected to include pain management in patient care, the medical establishment has, over the past decade, taken a new, more aggressive approach to treating pain.... Even Congress has gotten into the act [by] passing a law declaring the next 10 years the "Decade of Pain Control and Research." Of course, chronic pain is real. But even coming up with a singular and coherent definition has proved difficult. It's not that there isn't one; in fact, there are too many. It reminds me of the old joke: "What do you get when you ask three doctors a question? Five answers and a second opinion." Most health professionals agree that chronic pain is pain that reappears over and over. I can tell you that defining it that way is simply not enough. While it may be accurate, it does not sufficiently convey a complete picture of the condition. Why? Mainly because of what it leaves out. For instance, what causes pain to reappear? What causes it to disappear? Is there a cause in the first place? There is, of course, a more precise definition. After spending more than 30 years in clinical practice, research, and teaching, my definition is this: Chronic pain (outside the realm of disease or trauma) is recurrent and persistent pain related to the biomechanical dysfunction of muscles and joints. Understanding why this is so, from a physiological point of view, will be explored more fully in Chapter 3, although I will touch upon it here. The important concept of this chapter is what this pain is telling you, and how this information can be correctly applied toward maintaining and maximizing your all-around health.

Conditions That Cause Chronic Pain

Chronic pain, like acute pain, is a warning sign that something is wrong. Whereas acute pain is indicative of an overt problem, chronic pain is indicative of an underlying one. More specifically, it is an indication that the mechanical function of your musculoskeletal system has been compromised in some way. When you have a headache or a backache, when your hip hurts or your neck is tight, you are being sent a clear message that the muscles and joints in that area are, to varying degrees of severity, impaired. Chronic pain is, therefore, a direct result of injury. Whereas acute pain is the result of a singular, often perceptible injury in which the tissue is damaged, chronic pain is the result of multiple imperceptible injuries in which the tissue is irritated. In some instances chronic pain can trace its source to an illness or a catastrophic event, but it mostly occurs as a consequence of an infinite series of benign actions that subtly harm the muscles and joints. When does this happen? Every time we move. The human body was designed for motion, and motion is made possible by a complex interplay between our muscles and joints. We need to move in order to

sustain ourselves, whether to procure food and shelter, to get from here to there, or simply to avoid the atrophy that is guaranteed to set in with inertia. Yet movement itself can be harmful to the very anatomy that makes it feasible in the first place. Flawless as the design of the musculoskeletal system is, it is prone to wear and tear as it endures the constant rigors of use, misuse, and abuse. You may be thinking that this wear and tear must be caused only by severe or radical activity, but I can tell you that it's not. Common and unavoidable activities that make up daily life, such as sitting, walking, standing, reaching, grabbing, and holding, are some of the main culprits. Although the degree to which the musculoskeletal system is vulnerable to wear and tear correlates directly to how well its functional health is maintained, these seemingly innocuous actions are likely to produce injuries, which are called microtraumas, or small wounds (in contrast to acute pain, which is caused by macrotraumas, or large wounds). Taken by themselves, these microtraumas have very little effect on the structure and function of the body. In fact, they are so tiny that they occur silently and evade detection. Slipping under the radar, they fail to trigger the healing process, which begins only when the body senses a direct or immediate threat (as it does with an acute macrotrauma). Overlooked and untreated by the body itself, these microtraumas accumulate, resulting in the deterioration of the tissues of the muscles and joints. This minute deterioration is responsible for the most caustic and debilitating chronic pain. Chronic musculoskeletal pain is like an echo. The pain you feel in the present is the delayed effect of the seeds of biomechanical dysfunction that were sown in the past. In other words, chronic pain is the end result of the abnormal performance of the anatomy responsible for movement. As the dysfunction grows, which it surely will if microtraumas are allowed to amass unchecked, the functional capacity of your musculoskeletal system continues to diminish. Because your muscles and joints try to compensate for the dysfunction by adapting to the abnormalities, the entire structure is subject to overload and stress. Encumbered by the excessive burden muscles impose on the joints, thus inhibiting the full range of motion required for their lubrication and nourishment. This situation is so precarious that little provocation is needed to upset the delicate balance of the system. Thus even the slightest movement can cause the sudden onset of a great deal of pain. That is how your lower back goes out from your just bending down. Or how your neck becomes immobile after you barely turn your head sideways. Or how you are stricken by blinding pain in your arm after simply lifting your cell phone. In reality, there is nothing sudden about the onset at all. Chronic pain is a manifestation of the gradual buildup of a festering dysfunction that has remained dormant until now. The funny thing about your muscles and joints is that although they are prone to injury, they are also incredibly resilient and have a remarkable ability to bounce back from the daily grind. The musculoskeletal system is capable of repairing itself, and it

strives to return itself to a state of health. Left to its own devices, it will attempt to restore function to a degree of normalcy, and in some ways it does so successfully. This explains how bouts of chronic pain seem to suddenly dissipate. As the system adjusts to the buildup of microtraumas, the symptoms (pain) subside. However, there is real danger in thinking that the absence of pain means the absence of dysfunction. The relief, as it often turns out, is temporary, because the underlying problem, which is the constant wear and tear to your muscles and joints, has not been solved. This in turn leaves the door wide open for even the simplest of tasks to induce another episode. Thus the vicious cycle of chronic pain plays itself out. You may be wondering if this cycle can ever be broken or if it is possible to successfully navigate a course through life free of pain when we are in an almost constant state of motion and even ordinary activities can be injurious. The answer to these questions is unequivocally Yes! There is a way to properly prepare your musculoskeletal system for everyday use, safeguard against the inevitable wear and tear, and nurture its innate ability to remain healthy. And that way is the Weisberg Way.

The Weisberg Way

The foundation of my program is the principle that one of the most potent and effective tools for healing the body is the body itself. Although movement can damage the muscles and joints when there is an underlying dysfunction, properly designed movement can affect its recovery. The Weisberg Way takes the body through six different 30-second therapeutic movements (TMs) that combat chronic pain by eliminating the cause of its occurrence. How? By healing microtraumatic effects, thus preventing their harmful accumulation: by taking joints through their full range of motion, guaranteeing their full lubrication: and by keeping the major muscle groups at their proper length, ensuring that they are ready for any activity you choose. And the Weisberg Way doesn't require a lot of time or effort. In fact, a little goes a long way when it comes to keeping your muscles and joints in optimal health. Three minutes, to be exact.

The Weisberg Way techniques include:

- The 3-Minute Maintenance Method: my daily program, made up of six 30-second therapeutic movements (TMs), which improves and maintains your optimal musculoskeletal health while preventing nearly all types of general aches and pains.
- The Encyclopedia of Pain Relief: a series of targeted, body-part-specific TMs that rapidly relieve existing pain from head to toe.
- The 3-Month Tune-Up: a series of diagnostic tests and TMs applied once every three months that tune up and monitor the health of your body.

Treated to a daily and consistent application of my program, your musculoskeletal system can remain in excellent condition for more than a hundred years! Without it, whether you are now in pain or not, your muscles and joints will eventually fall prey to irreversible erosion and damage. It is important to understand that the simple act of living is the basis and foundation for the conditions that lead to chronic pain. We are all at risk. No one is exempt. While most people do not feel the

full-blown effects of dysfunction until later in life, one way or another, either through recurrent episodic flare-ups or the inability to move the way you used to, the cumulative buildup will catch up with you. Yet I have met very few people who think about the upkeep of their musculoskeletal system. Of the rare individuals who do bother to think about it, I haven't met a single one who knows how to do so, or, more accurately, how to properly do so. For those of you that think that going to the gym or taking an aerobics class is the same thing as tending to the biological needs of your muscles and joints, think again. Exercises that target strength, aesthetics, and even agility, while important, do not result in biomechanical health. We are prompted to watch our diets and eat right. We are encouraged to get in shape and exercise consistently. We diligently go for regular checkups and take care of our teeth, our eyes, and our hearts and other internal organs. We are even conscious of the role that our external environment plays in our well-being. And yet neglect runs rampant when it comes to taking care of our muscles and joints. Although they account for more than 60 percent of the makeup of our bodies and their health determines the very quality of our lives, their preservation is taken for granted. What good, I often wonder, is the pursuit of all-around health when we -- children, adults, and senior citizens alike -- cannot move without it hurting? What good is an increasing life expectancy when those extra years are mired in disability, immobility, and suffering? It requires so little to achieve so much, yet musculoskeletal health is not a priority. Honestly, when was the last time you thought about allocating a portion of your day to the preservation of your muscles and joints? I'm sure that before reading this book, you probably didn't even know that you could or should. Now you know better. You know that you can engage yourself in a program that will keep your musculoskeletal system in optimal health for the rest of your life. That's why I wrote this book. I want you to have the power to manage your musculoskeletal treatment and care. Should symptoms arise, which they may as a result of the condition of your muscles and joints or your lifestyle and habits, you will have the ability not only to stop the symptoms but also any progression. Furthermore, you can reverse many of the conditions you may already have, such as some forms of arthritis, and return your body to normal function. Some of my chief goals are to make you independent of running to the doctor, incurring invasive surgery, investing in expensive ergonomic equipment, and taking highly addictive drugs or unproven herbal remedies in an effort to make and keep yourself well. I can tell you that these choices are frequently unnecessary, ineffective, and sometimes responsible for making the situation worse. You will find that employing the Weisberg Way will provide you with all the help you need. To assess what course of action is the most appropriate to take for your musculoskeletal care, I will supply you with all the information necessary to make prudent and informed decisions rather than uneducated or desperate ones. To that end, I

have developed six basic tenets that you should make the cornerstone of your new approach to pain relief and prevention.

Prescription for Relief and Prevention

1. Don't Put the Pain Alarm on SnoozeIt will go off again. And I can assure you that when it does, the pain will have been made worse by the wear. Yet the second that alarm sounds, most of us want to shut it down immediately by whatever means possible. Desperate to alleviate the pain, we reach out for one of the abundant over-the-counter or prescription drugs available today. In the year 2000 alone, Americans spent more than \$4 billion on anti-inflammatories¹³ and close to \$2 billion on narcotics.¹⁴ (Abuse of the latter is fast becoming an epidemic unto itself. I will discuss more of the pros and cons of pain medications in Chapter 4.) Ironically, many of these medications can actually inhibit the healing process. Thus they increase rather than reduce the amount of time you're in pain. Furthermore, by masking pain, these treatments enable you to continue doing the activities that produced the problem in the first place. This perpetuates an endless continuum of injury begetting injury. Making the pain go away will not make the problem go away. In fact, the opposite is usually true. Temporary relief can cause permanent problems. I am interested in providing you with permanent relief, which renders your problems temporary.

Here's my golden rule of pain: If you can feel it, you can deal with it. If you can't, you won't. Think of it this way: Would you have an elaborate fire alarm system installed in your home only to disable it because the sound of the alarm is annoying? If you do disable it, the only way you'll be able to tell if there's a fire is when the whole house is already engulfed in flames. Doesn't make sense, right? Of course not. So why treat your body that way? Instead, let the pain sirens blare so that you can tend to the danger before it's too late.

2. Listen to Your BodyYour body has a lot of vital information to tell you, and, as we saw earlier, the only way it can communicate it to your brain is by the nerves. When something goes wrong, your body alerts you to this danger by sending a messenger -- pain -- to deliver its message of warning. It hurts so that it can help. I have spent this entire chapter trying to impress upon you one point: You need to pay close attention to these signs, no matter how minor or major your discomfort may be. Pain is a sign that harm has befallen you, and it is sending you a clear directive that your immediate care is required.

Remarkably, most people don't bother to listen. They deal with their pain by not dealing with it at all. Instead, they choose to simply ignore it. Because chronic pain is caused by a gradual buildup of dysfunction, there are usually many warning signs that occur before a full-blown episode. Yet many patients come to me when their pain is so bad that they are completely unable to function. When I ask them why they waited so long before they sought help, they respond, "I was hoping that it would just go away." It won't. The first step toward any solution is acknowledging the problem. When it comes to eradicating pain, you must start by listening.

3. Know Your ABCsYou had to study

your ABCs when you were learning to read and write. In essence, you are learning a new language now: the language of pain. Once you start listening to your body, you will notice that pain manifests itself in a variety of ways. Different types of pain indicate different types of problems. Because there is a tendency to lump all pain together, these subtle distinctions are often missed. It is not enough to just listen to pain; you need to be able to distinguish among its attributes to understand what it is trying to tell you. Specifically, is it symptomatic of a pathology that may need further investigation, or is it symptomatic of a chronic musculoskeletal condition that you can correct on your own with the Weisberg Way? Making this determination is crucial because it will indicate how you should proceed. This step and the ones that follow are designed to help you properly evaluate your symptoms so that you may make a correct self-diagnosis.

When you are suffering from a chronic musculoskeletal condition, the pain will usually express itself in one or more of the following three ways: Aching, Burning, and Cramping.

Aching Aching, by far the most common of the three, is a dull, continuous pain that is usually mild to moderate in nature. Although its onset is slow, it gradually worsens with time. A single episode can span a day, as with a recurrent, nagging headache, or it can span the course of weeks, months, even years, as with a backache. Aching usually is an indication that the muscles and joints have been subjected to the buildup of microtraumas in that area. As microtraumas continue to evolve unabated, this mechanical irritation causes the muscles to contract and tighten and the joints to erode. When this happens, they irritate the adjacent nerves, which in turn causes the area to emit an aching sensation. Aching can also be caused by a chemical irritation to the nerves. For instance, when you overwork your muscles, say, from lifting weights or handling something heavy, they are unable to dispose of the excess metabolic waste material produced during this strenuous activity. This extraneous waste irritates the nerve endings, which cause the aching condition known as a charley horse. Aching from mechanical or chemical irritations is an indicator of underlying musculoskeletal dysfunction and is treated by correcting that dysfunction.

Burning Burning is characterized by its fast, abrupt onset and is considerably more severe and pronounced than a general ache. It too is the result of an underlying dysfunction from the buildup of microtraumas that, in this case, causes a reduction of circulation to the area. When muscles are deprived of blood flow, they cannot properly flush away the normal metabolic waste that is produced during all movement. Burning is the by-product of this deprivation. Burning usually occurs when you exert yourself and push your body to its physical limit. Whereas aching can arise from even the simplest activity (or none at all), burning usually comes about when you engage your muscles in activities that go beyond what they are accustomed to or prepared for. Once you stop engaging the muscle in the activity, the burning usually subsides.

Cramping Cramping is a sudden

and intensely painful contraction of a muscle. This spasmodic sensation is immediate and extremely sharp, but it usually doesn't last or linger for long. It's not hard to recognize when you have a cramp: The pain is so great that it renders the area immobile. The most frequent cause is from some form of physical overexertion, such as participation in exercise for which your muscles and joints are unprepared. It can also arise from putting your muscles into positions to which they are ill-equipped, such as repeatedly wearing tightly fitting or high-heeled shoes. In fact, the most common areas of affliction are the legs and feet. When a short, weak, or overused muscle becomes fatigued, it is deprived of nutrients and oxygen, which causes a buildup of lactic acid to occur. When this buildup becomes too great, the muscle reacts by cramping. Of the three, cramping is the hardest to ignore (which you now know you should never do with any pain), yet the easiest to treat. Either a stretch or massage will generally alleviate it. If your pain falls into one of these categories, there is a high likelihood that what you feel is symptomatic of chronic musculoskeletal pain. And that's the really good news, because, as you may have noticed, almost all of these symptoms are caused by physical or, more specifically, biomechanical limitations that can be permanently corrected with the Weisberg Way. Yes, it can be tricky trying to pinpoint which of the ABCs you are feeling at a given moment. It is possible to erroneously classify aching as burning, cramping as aching, and so on. However, distinguishing from among the three isn't really necessary, for all are indicative of the same thing. It is important, however, for you to be able to characterize your pain as falling somewhere within these categories, regardless of how vague or definitive this characterization may be. Knowing your ABCs will make it possible for you to interpret your pain thoroughly and accurately. If aching, burning, or cramping doesn't seem to properly describe or convey the essence of pain you're feeling, it doesn't mean that your symptoms don't fall within these categories. The ABCs are comprehensive, not exhaustive. There may be a word or words that is more suitable than aching, burning, or cramping. Chances are, though, that these words are synonymous with one of the ABCs. For instance, "throbbing," "pounding," "gnawing," "stabbing," "pulling," and "tender" are all common words used to describe chronic musculoskeletal pain. (In contrast, "shooting," "paralyzing," "dizzying," "nauseating," and "blinding" are words often used to describe pain that is symptomatic of trauma and disease.) There are many ways people articulate their pain, and it is impossible for me to include them all, especially the ones that aren't real words. (I once had a patient who told me that her pain was "stingulizing" her. Perplexed, I asked what she meant by that. She said that her arm was stinging and immobilized; thus stingulizing. After examining her, I concluded that she meant a burning sensation caused by continuous overexertion of the area.) Furthermore, sometimes it's hard to determine, even for yourself, what exactly it is that you are feeling. Pain is both subjective and

objective at the same time. Thus your subjective interpretation of your own pain may in fact differ substantially from the objective truth of what that pain really is. So something that feels like a burn to you may in fact be an ache. Although classification may be challenging, it is your job to try to characterize what you're feeling in some way to see if it fits in or correlates somehow to the ABCs. If your pain falls outside of the ABCs, that doesn't automatically mean that you are suffering from another form of pathology, not from a chronic musculoskeletal condition. Likewise, just because your pain falls into one of these categories doesn't mean that it is a chronic musculoskeletal condition, not another form of pathology. There are some additional criteria that need to be met to positively identify chronic musculoskeletal pain from among the myriad other possible ailments. This brings us to our next step.

4. Think About Action and Position

Chronic musculoskeletal pain is caused by something you did to or with your body. This is what distinguishes it from pathology or disease, which often occurs without relevance to or in spite of what you may or may not have done with your body. It follows that one of the most important criteria in establishing whether you have a musculoskeletal condition is your ability to connect it with its cause. Earlier in the chapter I explained how everyday movements are responsible for most chronic pain. To make the link between cause and effect, you need to understand the two elements that make up movement: action and position.

Action

Action is the way you use your body. Specifically, it refers to the infinite variety of activities you engage in. This includes walking, running, stepping, dancing, lifting, throwing, raising your arms, reaching out, and turning your neck. While each instance of an action does not necessarily cause pain, its repetition can. Why? When your body is not in optimal musculoskeletal condition, every time you repeat a certain activity, the microtraumas produced by that activity accumulate. It's a bit like a train wreck in that they keep piling up, one on top of the other. Eventually, if left untreated, the accumulation will escalate to higher levels. As that happens, you feel pain. It is your job to evaluate which actions may have caused your current condition. That's not as hard as you might think. To illustrate, let me cite you the example of my coauthor.

Ms. Shink first contacted me when she had excruciating lower-back pain. Because she lives on one coast and I on the other, we had to establish by phone whether her pain was musculoskeletal in nature. So I went looking for a cause. I began by asking her what kinds of activities she participates in. She told me that though she usually jogs and lifts weights, she hadn't for some time because she was busy writing a new book. A very interesting clue, I thought. Then I asked her what she was doing when her pain appeared. She told me that she was just sitting at her computer, almost completely stationary. This was, in fact, the way she had spent her days for many months. Another clue. That alone could have been the culprit, but I decided to probe a little

deeper. And this is where the mystery unraveled. She went on to tell me that while sitting at her computer she had to constantly twist her body and bend down because her pencil sharpener was on a shelf below her desk. Ten, twenty times a day, week after week, she bent over in this fashion with no problem. Eventually, though, this repetitive activity caused a chain reaction to occur, whereby one more time became the "one time too many." By thinking about action, we were able to clearly identify and establish the precise cause of her pain.

Position Position is the passive placement of your muscles and joints before and during an action. Specifically, it refers to the length of the muscle and the angle of the joint from the start through the end of an action. Often it is the way we position our bodies, not the activity itself, that causes us the most pain. In other words, it's not what you're doing, but how you're doing it that counts. When you engage your body in an action, whether static or fluid, your muscles and joints adjust to accommodate themselves to it. Sustaining the action requires an enormous expenditure of energy on their part. Eventually, if you fix yourself in a position, such as sitting or in a poor posture, for an extended period of time, the muscles will shorten or elongate their length in an effort to conserve energy. Elongated muscles lose their strength, and shortened muscles are tight and less flexible. Both put stress on the joints, which makes the entire structure highly prone to injury. In addition, changing your position forces the muscles to go outside the range of their newly formed lengths. This strain causes pain. In the previous example of Ms. Shink, her pain could just as easily have been attributed to sitting at the computer for 8 to 10 hours a day. Why? Because when she was hunched over and fixed like that, some of her muscles assumed a very short position. Just standing up could have triggered a great deal of pain. In my estimation, it was the combination of action and position -- bending down and sitting for long periods of time -- that induced her episode.

To establish the link between the position of your muscles and joints, and your pain, look at the way you handle your body. Do you keep it in one position for long periods, causing the muscles to shorten? Do you participate in activities, such as ballet dancing or yoga, that cause the muscles to elongate? Thinking about position will often help you identify the culprit, even when it seems that there is none.

The goal in establishing this link is to determine whether the pain you are feeling is musculoskeletal in nature. If you have concluded that your pain is not, you should seek advice from a health care professional. If you have concluded that it is, you can use the Weisberg Way to relieve this pain. An added bonus is that my program also prepares your muscles and joints for the continuation of the activity you have isolated as the cause of your pain. I want to make it very clear that you do not need to stop doing this activity; rather that you need to prepare your body for it. I want you to have the freedom to play now without having to pay later. When you take care of your muscles and joints, they will take care of you.

5.

Make a Self-Diagnosis You do have the ability to make a self-diagnosis. After you've completed steps 1 through 4, it's time to take the following evaluative tests to ensure that your analysis is complete. (If, after completing these tests, the exact nature of your pain remains unclear, you should consult a trusted health care professional to help you reach a more accurate conclusion.)

First, the Chronic Musculoskeletal Pain Test is a quick checklist that you can refer to any time you're in pain.

Chronic Musculoskeletal Pain Test

1. Can your pain be described as one or more of the ABCs (Aching, Burning, Cramping)?
2. Is your pain associated with action and position?
3. Was the onset of your pain gradual?
4. Have you ever felt pain in this area before?
5. When you move the painful area, do you hear body noise, like clicking or grinding?
6. If you try to give the area resistance, like pushing against it or forcing the muscle to contract, does the pain increase?
7. Is your range of motion in the area limited in any way?

If you answered Yes to one or more of these questions, it is highly likely that the pain you feel is musculoskeletal in nature and that its treatment is manageable through one or more of the Weisberg Way techniques. Please note: The more questions you answered Yes to, the more certain your self-diagnosis is.

Second, the Nonchronic Musculoskeletal Pain Test is an important diagnostic tool to ensure that you're not suffering from a disease that affects your muscles and joints.

Nonchronic Musculoskeletal Pain Test

1. Does the description of your pain fall outside the scope of the ABCs (Aching, Burning, Cramping)?
2. Did your pain suddenly appear with no relationship to action or position?
3. In the absence of a traumatic event, injury, or previous history of pain in this area, is it very severe?
4. Is your pain steady and continuous?
5. Did your pain ever awaken you in the middle of the night?
6. Does it take more effort now to do simple tasks, even in the absence of pain?
7. Is the pain itself causing a systemic reaction, such as vomiting or diarrhea?

If you answered Yes to one or more of these questions, you should contact a health professional and further investigate the source of your pain, as it may be indicative of a condition that falls outside the scope of this book.

6. Live in the Solution The alternative to living in the solution is to live with the problem, which means the continuation and progression of your pain. It also means the cumulative deterioration of your muscles and joints, which ensures that your next episode of chronic pain will be worse than your last one. If you're sick and tired of being sick and tired, you are sufficiently motivated to make some fundamental changes in your life. I know that's a hard thing to do, even if you're aware of how the quality of your life will vastly improve if you make them. It seems that part of human nature is to become comfortable with being uncomfortable. But I am convinced that given the right tools and information, you can affect healthy change. That's why I made the Weisberg Way as practical as I could without sacrificing its ability to remain effective. I want the incorporation of my program into your life to be as easy on you as possible, so that you

can become and remain well. Three minutes a day is all it takes to transform the way you feel, the way you age, what you're able to do and how you do it, and whether you will spend your life in moderate to debilitating pain or pain free. Living in the solution means choosing to make the Weisberg Way one of your daily rituals. It means employing the strategies that I have laid out for you in this chapter at the first sign of pain and using the information contained in the rest of this book as a vital resource and companion guide in your effort to achieve optimal musculoskeletal health. It means setting these goals and being okay with the possibility that you may not always accomplish them perfectly. And it means tuning into the positive messages of pain and tuning out the negative ones. Living in the solution is transforming your body from a painful liability to a pain-free asset.

Happy Endings: Stella's Story

Stella F. is a 90-year-old woman with two children, seven grandchildren, and five great-grandchildren. She led a very active life until her mid-70s, when she began experiencing severe, debilitating pain in her lower back and legs. For many years, Stella suffered from the symptoms of stenosis (the narrowing of the canals in the lumbar region of the spine) and from osteoarthritis of the knees. She came to see me shortly after her orthopedist diagnosed her condition as "beyond repair." By that time, nearly a decade ago, she was almost completely immobile. In 1993 my doctor told me that I would never walk again. This was a terrible shock. I always prided myself on being able to keep up with my large family, even the younger members. In fact, I had spent much of my life running around, going from place to place, involved in all sorts of adventures. But when I turned 80 (a youngster!), I couldn't even make my way across a room. With no solutions available -- surgery and medicines were deemed too risky at my age -- I was wheelchair-bound. While this was very disheartening, I honestly thought that it was just a natural part of life. After all, the vast majority of the people I knew of similar age were going through exactly the same thing as me. Our bodies were falling apart. It seemed that the golden years weren't filled with very much gold. That is, until I went to Dr. Weisberg. Dr. Weisberg got me walking again. How was he able to do what no other doctor or health professional could? The first step on my road to recovery was regaining my hope. Dr. Weisberg assured me that neither my age nor the arthritic changes in my back and knees would hinder my ability to be well again. He showed me countless studies and told me of many of his elderly patients who had restored pain-free function and health to their muscles and joints. And these were cases that were as bad, if not worse, than my own. Then he taught me how to make good use of my pain. Instead of searching for ways to stop feeling it, I started using pain as a guide. I began to realize that pain let me know which activities were safe to embrace and which I should avoid. This was a big turning point because I was no longer afraid that moving would hurt me. As my confidence with my pain alarm system grew, I

slowly incorporated the Weisberg Way into my life. I have been walking ever since. In retrospect, I understand that my body never failed me but that I failed it. I ignored the obvious warning signs that had been there for a very long time. Furthermore, I neglected to do anything about it until the problem left me crippled. Once I began paying attention to the signs my body was giving me, I was able to read them and respond more appropriately. The better I served the needs of my body, the better my body served mine. I recently had the good fortune to celebrate my 90th birthday. My family threw me an unforgettable party with wonderful company, food, and music. My greatest joy that evening was being able to dance with everyone there! Copyright © 2005 by Joseph Weisberg, Ph.D. and Heidi Shink

Most of the information covered in this book is fairly elementary. If you've had chronic pain for any length of time and have undergone even the most basic treatments, you're really not going to find anything new or interesting here. This book is best suited for someone who does not have pain and is looking for a short preventative regimen, or someone who has pain and is just beginning to take an interest in doing something about it. I would also advise skipping pretty much the whole section on chairs. They're bad... if you're really interested in the history of chairs then please by all means read it. Otherwise prepare to sit there frustrated and in pain reading about the chairs of ancient Egypt and Greece, wondering what the hell this has to do with helping you manage pain effectively.

I'm only 31, but I've had back pain for years. About a month into this program, my pain was gone. I'm a nurse so I tweet my back once or twice a year but I never have chronic pain anymore. It's simply physiology, stretching and strengthening your muscles will help treat most forms of pain. The three minutes is easy to stick to every day, but I will notice myself feeling tight in my body after about a week of no stretches. The squat alone was very difficult for me to get into at the start of this program, now I sit into a square as a relaxing position and an instant way to relieve a tight neck or lower back at work. For most people, this program is going to work wonders. It isn't a gimmick. It is simply incorporating every day stretching and strength training into your daily life. (Word of warning: Be careful with the Cobra stretch. If you don't have stringer abs you are likely to tweet your lower back with that stretch)

I fell down a flight of stairs and have been in pain since. Went for physical therapy. He gives same exercises. Unfortunately, working by computer 8 hrs a day is bringing all the pain back. I do his TMs, 3 min each day. They Really help. His writing style is just a bit repetitive and long winded.

Joseph Weisberg has put together a deceptively simple case for doing something to keep your body in better alignment. In an era when the medical industry has complicated the simple, made the transparent opaque and the cheap expensive this is a very refreshing book. Weisberg's bagging of junk medicine - where pills are used to mask symptoms is timely. Back Pain is not caused by a lack of Celebrex. He makes good sense. When the price of a back operation costs upwards of \$100,000 (for a couple of hours work), spending 3 or so minutes a day doing some stretches looks like a wise investment. Though Weisberg has pretty much ticked all the right boxes, I would have included some strengthening exercises and there's probably a few more flexibility exercises that would help speed up the rehab process. However many reviewers have remarked that the 3 minutes got them interested. Egoscue's principles - muscles pull bones out of alignment, and - the cause of the pain is rarely at the site of the pain are also worth noting. This is a book well worth getting. It's a refreshing break from the same old, same old exercises you get in physio and chiro books, and the same old, same old treatments where the spot that hurts gets rubbed, crunched, heated and vibrated. Back pain is not caused by a lack of rubbing, crunching, heating and vibrating! John Miller[...]

These exercises work and they don't make your back hurt more like another book I bought. Dr. Joseph Weisberg is a physical therapist and his patients have tried these exercises. I do recommend visiting your own PT as one size exercise fits all from a book, may work for you. I discovered that I had strained rotator muscles in both legs from helping a friend move. I found this out from a qualified physical therapist. The exercises in another book called "Pain Free" did not work for me. In fact his exercises made my back and leg pain worse! So, please consult with a qualified chiropractor and PT before trying your own solution, as I did. And when doing Dr. Weisberg's exercises, listen to your body and don't strain further than what your body tells you. These exercises are NOT for those with serious back issues or just recovering from injuries.

Possibly one of the most important books you will ever read about pain. This explanation of chronic pain should be standard for every single health practitioner as should the explanation of what pain medication does to your body. I'm not sure what the long term effects of these exercises will be for me but I know I will continue to do these exercises because the immediate short term benefits have been so positive.

My husband has used the stretches in this for years and it helps keep him mostly pain free for years

now. We ordered it as a gift for a friend with back pain. Definite alternative to using medication.

This is an amazing series of exercises, and I learned a lot from the book. When I do what the book says to do regularly, my pain goes away, and I am much more limber. It's not just the exercises, its his discussion on chairs and other things that is very interesting. The less I used chairs now, the less I hurt. Very useful and education.

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3 Minutes to a Pain-Free Life: The Groundbreaking Program for Total Body Pain Prevention and Rapid Relief Back Stretching: Back Strengthening And Stretching Exercises For Everyone (lower back pain, healing back pain, stretching exercises, back pain treatment, ... pain relief, stretching, back pain Book 1) Scoliosis Prevention and Treatment: The Ultimate Guide to Health, Fitness, Dieting, Recovery and Growth: osteopathy, alternative medicine, yoga, contemporary ... Back Pain, Pain Relief, Pain Management,) Debt Free for Life: The Ultimate Guide to Get Out of Debt (FREE Bonuses Included) (Debt, Debt Free, Debt Free Forever, Debt Free for Life, Debt Free for Good, Debt Management, Get Out of Debt) Hip Flexor Pain: The Ultimate Guide to Fix Tight Hip Flexors and Cure Tight Hips Life! (hip flexors, hip pain, hip flexor stretches, hip flexor, hip pain relief, hip joint pain, hips) Foot Pain: Ingrown Toenail: How To Become Stress Free And Easily Cure This Nasty Nail Disease Today From The Comfort Of Your Own Home (Foot Pain, Foot Problems, Foot Pain Relief, Foot Reflexology) Heal Your Pain Now: The Revolutionary Program to Reset Your Brain and Body for a Pain-Free Life ATKINS DIET: Weight Loss Secrets and a Quick Start Guide For a New and Permanent You: Rapid Weight Loss Guide For Beginners, Rapid Weight Loss Guide, Atkins Rapid Weight Loss Allergy-free Desserts: Gluten-free, Dairy-free, Egg-free, Soy-free, and Nut-free Delights Beginner's Guide to Sciatica Pain Relief: A Concise Guide to Pain Relief & Spinal Cord Anatomy BODY BUTTER: Homemade Body Butter Recipes - 30 DIY Body Butter Recipes For Softer, Healthier, And More Radiant Skin (Body Butter, Body Butter Recipes, natural remedies) The Healthy Gluten-Free Life: 200 Delicious Gluten-Free, Dairy-Free, Soy-Free and Egg-Free Recipes! The Matrix Repatterning Program for Pain Relief: Self-Treatment for Musculoskeletal Pain (New Harbinger Self-Help Workbook) Body by Science: A Research Based Program for Strength Training, Body building, and Complete Fitness in 12 Minutes a Week (NTC Sports/Fitness) 15 Minutes to Fit: The Simple 30-Day Guide to Total Fitness, 15 Minutes At A Time TMJ Temporomandibular Joint Dysfunction - Causes, Symptoms, Treatment, and Pain Relief For Your Jaw Pain (How to Get Rid of Jaw Pain & Headaches Due to TMJ) Knee Pain: Treatment for beginners - 2nd EDITION UPDATED & EXPANDED - Knee Pain Relief, Cure and Exercises to overcome your knee problems (Knee

Problems - Knee Pain Cure - Knee Hurt Book 1) Yoga for Pain Relief: Simple Practices to Calm Your Mind and Heal Your Chronic Pain (The New Harbinger Whole-Body Healing Series) Build Your Running Body: A Total-Body Fitness Plan for All Distance Runners, from Milers to Ultramarathoners

Run Farther, Faster, and Injury-Free Pain Relief for Joint, Muscle and Nerve Pain, Drug Free Using TENS

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