

The Dangers, Causes, & How to Fix Reverse Cervical Curve in Young Athletes

Dr. Matthew Scott Interview 2022-02-15

[00:00:00] **Joey Myers:** Hello and welcome to the Swing Smarter Hitting Training Podcast. This is your host, Joey Myers from HittingPerformanceLab.com. And I have the pleasure to bring back, a ghost from my past. He's not a ghost. This is Dr. Matthew Scott, and it's Matthew T. Scott.

[00:00:19] **Dr. Matthew Scott:** If you want to go full. Yeah.

[00:00:20] **Joey Myers:** And back in the day we used to call it. Urlacher, Brian Urlacher for the Bears. Cause he looked just like him. That was his doppelganger except maybe about half the size, probably. Dr. Matt is a chiropractor. He was a pitcher at Fresno state when I was there. And one of the things that I read somewhere for those that are looking to have a chiropractor come on board with your, on your team, when your movement team, a couple of things that you want to make sure.

[00:00:46] If you don't have a friend that you know, who's good or whatever. Is, they either have to deadlift more than you and or played some sort of a college beyond sport played in playing in a sport beyond on college.

[00:01:01] And a lot of times you can't go wrong with that sort of a chiropractor. So first I want to welcome on the show, Dr. Matt.

[00:01:07] **Dr. Matthew Scott:** Thank you. Thanks for having me.

[00:01:09] **Joey Myers:** And first question is, I wanted to ask you. From your playing days. So going back to those playing days and any of the arm issues that you had, because I know you had some injuries and things with your current knowledge of the body, of the human body's central nervous system, all that kind of stuff.

[00:01:26] If you could go back in time and give yourself some advice, what would that advice be?

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[00:01:30] **Dr. Matthew Scott:** I would see a chiropractor much more frequently than I did. I only went when I was hurt, and they turned it right around. It was like I waited a little too long on that. I pitched with an impingement freshman year.

[00:01:41] For three months to the point, I went from three quarter slot. Now on the sidearms throwing junky stuff, went from 89 to 82 and it hurt. And the training staff, they did what they could and its tendonitis. It's always tendonitis. I figured out the tendonitis and then I took a weekend to go up.

[00:01:59] I think we were [00:02:00] traveling and I left to go up to the bay area and I saw a chiropractor up there who worked on my shoulder and the middle of the next week I had no pain. And I was able to go back up three quarter slot and I ended up actually to grab some innings later in the season. But man, I wish it would've done that six weeks, four weeks prior.

[00:02:20] Or if I had somebody here, even if you don't use the guys on your team, like your medical team or your rehab or your strength and conditioning. Have them on your team. It's the same as adults with their homeowners, like electrician. Oh, who's your people or network that way. They're like, no, this guy always takes care of me. Like you got some guy I want to be people's guy and I didn't have, I wish then I would have used resources at my disposal wiser or had the training staff that had the wherewithal to do that type of work.

[00:02:57] **Joey Myers:** I get you a little frozen face, but it's a good face though. I can still hear you. It's not like some weird looking thing is my face frozen. There we go. Let me get you back. Boom. There he is not, I got you on a muted, Mr. To a zoom since the pandemic. I heard all that. I just didn't. I just saw this nice face where you're just kind of like that.

[00:03:17] Did your velo come back after that?

[00:03:19] **Dr. Matthew Scott:** It wasn't just an adjustment. He worked some muscles in my rotator cuff. I had what's called an independent syndrome and it's more of a dyskinesia of the shoulder. We try to pinhole different injuries into specific diagnoses in the medical world so that we can write them down and send them to places that will approve of their payment.

[00:03:40] But that doesn't matter as much as what's really going on globally. It's not just one thing. There's one thing that ends up getting really injured. And that's one of the muscles of the rotator cuff and that's what was going on with me, but it was really a dysfunction of the entire shoulder that was contributing to that.

[00:03:56] Which typically will end in a tear and then surgical [00:04:00] reconstruction, which you would go to a physical therapist, and they would work on all the muscles that I should have been having worked on before I was injured. And it's this restoration of function. That's really what these complementary and alternative medicines, physical therapy, acupuncture Oriental medicine, chiropractic, massage therapy, all these things that just have to do with motion.

[00:04:21] And if you can restore normal motion, people tend to be in less pain and function better, and their structures don't break down. We just do it different ways. Chiropractic does it through the chiropractic adjustment. We also use physiologic therapeutics, muscle work, so different forms of adjusting. It's the same way of doing multiple things.

[00:04:40] If you look at a vehicle and you turn in, the alignment, goes out in the tires, it's going to function differently than what it's designed, and it will not sustain the lifetime of the tire that it's supposed to. The same goes with the body. If you use it differently or it's not working the way that it's designed, it will break down faster.

[00:04:57] And unlike a car, you can't just fix the alignment and replace the parts they're trying, but we try to restore the alignment and get those parts to last longer. And with my shoulder, it was turned down. I had this scapular winging every time and my raise my arm. It would pinch the supraspinatus in the canal in gradually break breakdown that, that tendon, the chiropractor worked on loosening some of those muscles stripping them out with a muscle technique called ART.

[00:05:22] Getting my shoulders to sit back properly, did some adjusting my shoulder and I kid you not four or five days that swelling. I was 19. I had all the growth hormones. And you heal faster when you're younger and when you're that young, you can muscle through some serious problems until you're 25 and then you're wrecked.

[00:05:40] And so that if, to answer a question in very long, if I could go back to the time that I was in college, I would have a much better focus on my body then I did. Cause you're able to just wing it for a while when you're that young.

[00:05:53] **Joey Myers:** Yeah. What kind of, for pitchers say pitchers out there, or even just ballplayers in general position players. What were some of the symptoms that you were [00:06:00] experiencing that where you, like you said, oh, it was tendinitis. It was tendonitis. What were those symptoms that you were getting?

What were some of the pain symptoms you experienced in your pitching shoulder in college?

[00:06:06] **Dr. Matthew Scott:** So as soon as an easy thing as a painful arc syndrome is when you get to about, so get in the camera. When you get into about right there, the scapula starts to swing up and the humeral head moves up as well. And when you start to swing up this way, if the humeral head is not staying down in the glenoid faucet, it translates superior. It goes up and it'll pinch the tendon at the top.

[00:06:29] So player goes like, and then they wrap around it and then they're like, this is okay, but getting there. And then they go, oh, that hurts. And an easy test is to reach across and reach up. And that, that closes that canal, and you go, Ooh, that's not good. Icing helps to control inflammation, but it's not going to solve problems.

[00:06:47] There's a reason that is coming up and it's usually having to do with really the muscles participating in the group project that is to hold this down. There's a slacker. Or somebody who's doing too much work and it stops it from functioning normally, and you get that pinch... we get too much power in the pecks, internal rotators.

[00:07:08] It brings that humeral head forward. And though the rotator cuff muscles in the back that do the external rotators, if you're not focusing on them, then you're going to get an impingement at some point, especially pitchers.

[00:07:19] **Joey Myers:** What do you know, when did you sleep on it wrong? Do you know what really, or was it just wear and tear and we just, over time it did that freshman year?

[00:07:26] **Dr. Matthew Scott:** No, it could have been any of those things. From a chiropractic standpoint, obviously I'm biased the neurology. I didn't find out that I had a neck problem since I was probably 17, 18 years old. I didn't find out til I was about 26, 27. When I finally saw a chiropractor said, yeah, that pain that you're getting in your back, that's up from your back.

[00:07:43] Your that's not your rib that you keep getting adjusted. That's your neck. I get x-ray my neck. And I had a cervical reversal where no supposed to have a nice pretty curve, but it was flat. And those nerves that leave the neck from the chiropractic standpoint, they all control the shoulder muscles, the rotator cuff muscles are controlled by the nervous system that [00:08:00] leaves the neck.

[00:08:00] I started getting my neck adjusted. It started tending to my neck a bit more and, it starts to help tremendously from a standpoint then where I was a stomach sleeper, which is. That can affect the shoulder. I would imagine that it was more of a workout regime that I was not used to cause that the college workout and the demand on the body is so much different than high school.

[00:08:24] High school was like, you got your couple hours in the weight room, you got your couple hours on the field. And then in colleges you have eight to four or eight to noon for classes. And from six to eight, you're in the weight room or you're training, and then afternoon, you are there until dinner, time working out, doing something.

[00:08:41] And so that could have been, overuse. It could have been something with my mechanics. Cause I went from being a three-quarter slot guy to seeing Bob Bennett who wanted me up top more. No, everybody had the same mechanics, and my shoulder was like, I don't know how to do that.

[00:08:58] And so I was remodeling my body. So that could have been any of those things. And looking back then, that seemed to be one of my least injuries. I broke a couple toes. I had Tommy John. So those were more like bigger impact, easier to target how that happens.

[00:09:13] **Joey Myers:** Yeah. Yeah. It's funny, you mentioned that kind of leads into this, text neck type of culture that these kids are getting into with their phones. And you mentioned that the whole neck issue and then the, what did you call it reversal, cervical reversal. And I came in to see you. This was the first time I'd seen you since ball, I think. And I came in and you say, let's get an X-ray.

[00:09:36] I think you had an idea what was going on. And I had just come off, I was in the weight room, in our Fresno state weight room doing cleans. And that day I'd woke up with a stiff neck that Batman neck, and in between rounds, I started just stretching it out. And then I went down and went wham and pulled it.

[00:09:54] Oh, it was like just burst of pain, just wow. Horrible. And it was a couple of months. [00:10:00] I think I'd seen you probably, it was probably six months after that initial injury. And it was so bad where I had to lift my head off the pillow. I just couldn't, I couldn't bring it up. When I come see, say, all right, let's get you an x-ray.

[00:10:12] So I got an x-ray and we come back and we both huddle over the little thing. You got to look at the x-ray and you go; you see these little beaked things here on your vertebrae. Ah, that's not good. That's and that was, I think, 35 at the time, mid-thirties. And you said, yeah, that's going to be some early onset arthritis, blah, blah, blah.

[00:10:30] And it was just from there. And then, we worked on a couple of things to, to reverse the reverse cervical, but if you hadn't gone through it, I don't know if you would have, or would not have been razor focused on that, but that's the reality today.

The dangers, causes, and how to fix reverse cervical curve in young athletes

[00:10:44] **Dr. Matthew Scott:** Oh, its yes, big time computers, and then the weight room, people are down here like this, they're doing their thing, they're working.

[00:10:51] And then people on their computers are sitting like this. It's a, it is a forward head posture world that we're in. And you get in car, and they drive to work and then they sit down at the computer and their heads forward. We get caught tubes stuck, you get pulled in. And then they got the phones and the video, again, it's all everything's like in front of you.

[00:11:07] And we're not out in the open this way. Some of the easier patients to treat are the ones that aren't in front of the computer. They're the ones coming in off the field. To your point when you were doing your list, I get 20, 25, 30-year-old men that come in and they go, yeah, I woke up and I just stretched and I felt this pain in my neck and I can't turn my head that way, but I can go like this just fine.

[00:11:25] I go, yeah. What'd you do yesterday in the gym? And I'm like, oh it's my body. That's easy to do military press. They, oh, you hit. Military press, because

when you lift like that, it causes that levator scap muscle to pull back on that cervical curve. And if you're predisposed to that injury and man that thing will spasm and it's like nothing else.

[00:11:43] Sometimes it lasts a day. Sometimes the last two weeks, I never know who that person's going to be. I've had that happened to me, pulling up my sock in the car before I had my network done and just lean forward, pull up a sign, go, oh, Ooh, man. I did something. Really pulling up a sock [00:12:00] or racking, a bench, just putting the weight back up.

[00:12:02] It was like oh. And that one lasted a day. Thank God. But like I said, sometimes it lasts a long time. Sometimes it doesn't most of the time, if you can discover it, we put somebody on, we put you on a Denner roll. Yup. Yeah. I'm not about it. But no.

[00:12:20] **Joey Myers:** Are you, I know I'm not asking you either, but do you still use that as a protocol for your clients?

[00:12:25] **Dr. Matthew Scott:** Oh, a hundred percent. Absolutely. Yeah, because the people who are disciplined enough to use it, we get foxhole, religion, what is it? You only have related foxhole, religion. You only get, you only find God, you start praying when the bombs are falling around you in the foxhole. When you're injured, you're like, oh shoot, I got to do this.

[00:12:41] Or I had a dentist appointment this morning, a dentist appointment coming up. You're like flossing and brushing three times a day. Just say you going to want to be embarrassed. So same thing happens with the neck is we tend to focus on, and we go, oh, my neck's hurt. And I got to do this. We've got to do it all the time.

[00:12:55] And I'm the same. If my role isn't out. If my neck hurts, roll comes out, I start doing it and it helps. But the goal is to use that over time because we can change that cervical curve to be more functional in this curve. So that the weight of the head doesn't push.

[00:13:13] And to your point with what's going on with you and for your audience, because it happens a lot of whiplash injuries at a very young age, they need to be tended to because you won't have pain after day three or four.

[00:13:23] If you're less than 25 years old, it'll just go away. And the EMT's after the accident. You're going to be a little sore tomorrow. Sore is not having to pick your head up a day or two after the act that's bad. You've torn ligaments. When we see these folks that have been complaining about neck upper back.

[00:13:41] Now they're getting numbness tingling down there. I'm going to, Ooh, what happened your neck 10, 15 years ago? This, the curve studies, we didn't even know that the curve was as important as it is until about 1995. We didn't have the

studies that showed that if you reversed cervical curve enough, you're going to have problems in 5, [00:14:00] 15, 25 years.

[00:14:01] A lot of folks don't realize. And then they just shake it off and then they find out that they have a problem later. And a lot of these happen in the young retirement life. I was a stomach sleeper, I got rear ended when I was like 16 years old. It was a total tiny thing. But if you played football or you're a flyer cheerleader, you've written horses, motorcycles. Quads.

[00:14:18] Anything that could have caused that whipping sensation might want to get that checked out, especially if you're getting upper back pain, headaches, difficulty looking right and left. You should be able to look right over your right and left shoulder 90 degrees with no problem. And if you can't, you've got problems going on.

[00:14:33] **Joey Myers:** Yeah, totally. Explain that Denner roll a little bit, explain what it is and all that.

What is a “Denner roll”? Not sushi?

[00:14:39] **Dr. Matthew Scott:** It's a foam roll that's specifically designed to help restore the cervical curve by lying over it. It acts like a fulcrum. The same way that you would take something like this, and you just put it on top and then the curve, the weight of your head drops down.

[00:14:54] We try to size it appropriately so that the patient's head rest comfortably on the ground. It's not great. If it floats the size that you can use books to try and get away with it, use magazines to like, oh, we can't do a need to be like on more set. So just slide a book under there and you can play with that.

[00:15:10] But when the curve goes from this to that, and you usually, you can target where that curve is reversed using a cervical spine lateral x-ray, and then we can lie somebody over it. And you got to find that spot, that point where it's more comfortable and the patient can lay like this, ligaments have an ability to stretch to a point where they stay stretched.

[00:15:30] So there's enough collagen and fibers in there that we can reshape like same way that braces move teeth is over overtime you can retrain the ligaments to be allow your head to go back. But when they heal in the forward head posture real flat, you, I can say, okay, pull your head back.

[00:15:45] Yeah. Okay. There you go. Calm, tired. And I go, oh, this is much better. And so you pick up that bad posturing when you the same way that you put a couch in one spot and it like holds onto it pushes on and on the carpet. And then you move the sofa and it's changed [00:16:00] that's plastic deformation, or you break down the tissue or the material enough that it can't spring, back up.

[00:16:06] It loses its elasticity. The same thing happens to our ligaments. And we'd find that about 10 minutes is really where that stretch point occurs to where we start creating permanent change. We can get somebody to align that roll somewhere between 10 and 20 minutes, multiple times a week, we start to see a cervical curve change over the course, and it takes a long time.

[00:16:24] And we're talking about, if you can do it three times a week over the course of a year, you'll change your neck. And if you catch it early enough to the head, when it sits over your shoulders. Yep. About two thirds of the weight of the head is carried through the Fosse joints in the back, which are like segmental joints.

[00:16:41] There's two on each side, one on top when I bought them. And then the disc in the middle. The facets in the back hold about two thirds of the weight the head and the disc only hold about a third. In your case, and in my case, when we have forward head posture, you can split that 50, 50, or even reverse it completely.

[00:16:58] And the disc is not made for that. And it will break down over time. And so we see those bone spurs start to form because the body starts to adapt and shore it up to give it some more stability. But the biggest problem is it puts us in a position where you can herniate the disc or at least get a protrusion into the posterior canal because we lose the cervical spine is supposed to stack in this curve.

[00:17:19] And the front side of the disc is supposed to be bigger. If you reverse that it leaves more pressure towards the back. It's like stepping on a jelly donut, making it go out the back, and then we don't want that because then you get numbness tingling down the arms, you get headaches, you all kinds of problems and impingements are our space occupying lesions in the cervical spine where the cord goes down.

[00:17:40] That affects the rest of you. You get a tiny little disc bulge in your mid back. You're going to feel it. You get a tiny bulge in your lower back or tight hamstrings. You're going to feel it. And so the neck, it's so important to try and maintain that curve. And especially with young athletes, your athlete wears a helmet, that's a lot of weight.

[00:17:57] You play football. You think those guys don't get wrapped [00:18:00] around a little bit?

[00:18:02] **Joey Myers:** Exactly. And then you're yeah, you're talking about for every, I think I've heard for every inch forward, your head is at adds an extra 10 pounds to your neck or something like that. Your neck must be able to stabilize and then you put a helmet on top of that.

[00:18:12] That's what 10 pounds or whatever it is. Five pounds. I don't know what it is. What is it?

[00:18:17] **Dr. Matthew Scott:** Yeah, one of the nastiest necks that I've ever seen with the helicopter pilot. And, he's probably had some trauma in his life, but those things are heavy, and they look down through a little window. And they're working long hours and jet pilots pulling G-forces wearing those heavy helmets are doing this all day.

[00:18:36] Torture.

[00:18:36] **Joey Myers:** Wow. Hey, before we let you go and tell people where they can find you and all that good stuff. Any other things that, that you're seeing with athletes coming in young athletes besides the neck stuff that, that you're like, hey, we need, this is what it is. And then this is maybe what they can do to help fix it.

What other things are you seeing in young athletes; besides neck stuff, that we need to look out for?

[00:18:52] **Dr. Matthew Scott:** Especially parents. I don't know if parents are, or the kids are watching your podcast, but when it comes to parents, kids don't complain of back pain unless something's up. Unless they're trying to manipulate the language that happens. But back pain is something that they haven't lived long enough to develop bad habits.

[00:19:09] If they're complaining about back pain, be aware of it, take them to the pediatrician, talk to your pediatrician, connect your providers. This doesn't have to be my guy over here that your people need to get. And to be able to inter refer, but when it comes to back pain with kids, neck pain, with kids, something's going on, they don't just complain about this stuff.

[00:19:26] They fall off a bike, they scrape their knee, ouch my knee hurts. And in two days they're probably fine, but if they're consistently complaining of back pain, find somebody who's very comfortable with kids and can get to it because those problems, their body will adapt the whole, those tires that go crooked on the car.

[00:19:41] What do we do? We don't drive in circles. And that's the same thing that the kid's body is going to do. It's just going to adapt and change and over time that's going to be their new norm and it's not built to work that way and it will break down. The other thing that I see a lot with kids now is the amount of play and competitive
[00:20:00] time that these kids spend with sports, especially gymnast or kids that are willing sport kids, where they're doing soccer year, round, baseball year-round.

[00:20:07] When I was a kid, we used to go from different sports, and you fight. You use different muscle groups and different movement patterns.

[00:20:13] That's important. There are also important times for having breaks, not getting enough protein. My kids love carbs. I'm like, you need to have protein. I'm trying to find protein shakes and stuff to just get protein in them so they can recover,

and they can heal. But the biggest thing I see is kids that are in a competitive sport nonstop and are growing.

[00:20:34] If they're going through growth spurts, especially in those teen years, especially like preteen teen and some of these kids sprout up big time between 17 and 18. When they're heavily competitive at 16, 17, 18 years old, their growth plates are still open. They've got more growth hormone than they will ever have in their entire life.

[00:20:53] And they're pushing things to the limit. And now they're starting to weight train. We've got all these things going into it, and it all puts stress and strain on different growth plates. And for a lot of people don't know this, your bones will grow. The growth plates can tend to grow faster than the muscles can keep up.

[00:21:09] And that's where those growing pains come in. And that's where you Osgood slaughters, which we treat very successfully using pain away lasers. We use these infrared lasers and deep penetrating lasers that can help cells to regenerate and get better, faster. And we use that as a physiologic therapeutic as an aside, but.

[00:21:28] You also get Sievers diseases in the heel. You get epicondylitis, pitchers, tennis players, et cetera. And those are things that, and this is the hardest thing for athletes to do rest. They don't like it. I hate taking athletes out of their sport. Cause I know they don't want to do that, but they must take that, they must take that calculated risk.

[00:21:49] So I take three weeks off. Or I have surgery in a year and a half and I'm out for a season. What do you want to do? Are you going to lose a scholarship when you're 15? No. Are you going to lose your sponsorships when your 12-year-old little girl? [00:22:00] No. Take the time. Rest. You'll be fine. Wheaties will call you later, but you must be able to take the time off from a sport and not push through it.

[00:22:08] Otherwise, you're screwed, not just for sport. But now you've got a problem for life, right?

[00:22:12] **Joey Myers:** Totally great advice. Where can people find you? Dr. Matt Scott? I know some out there will be Matthew Scott...

Where can people find you?

[00:22:18] **Dr. Matthew Scott:** Dr. Matthew scott.com. And then Alliance chiropractic here in Fresno. It's Fresno Clovis border.

[00:22:24] We're on a corner of Chestnut and Herndon kind of as a medical Mecca in here. And I'm on the other things like the Yelp and all that, but I don't tend to Yelp as much. I don't do Groupons. I'm mostly word of mouth. I do next to zero online marketing. It has not been a real great patient producer. I would say.

[00:22:42] But the word of mouth is key. And I do specialize in disc protrusions and disc injuries because of the techniques that I use. They're low force and they're very comfortable on the only Cox flection distraction doctor that certified in this area and has the 18. The eight, which is the latest model.

[00:22:57] It's a Lamborghini and tables, but it provides a lot of relief for people who don't want to have surgery and are having sciatica or radiculopathy down in the hands and fingers. I work hand in hand with the Alliance health, which is a PT clinic. We're in the same building which is nice because if somebody needs to transition from my care to pre-World activity, I can refer them over to Alliance health for their rehab and vice versa.

[00:23:23] If somebody can't do their rehab, they go, man, your disc is like super jacked up. You got to go see Dr. Scott and then just call us when you're ready to come back in. And it's a nice, we wanted to build that. The patients had options. We have massage therapy here. We refer out for nutrition. We tried to build this multidisciplinary practice so that people could go in and the providers could communicate quickly.

[00:23:43] And it just, it works better for patients. They go, you want a good physical therapist. And I say we have a physical therapist here. This is what they specialize in. If you've used one before, I want you to be comfortable. There's no pressure. Just like their PT, the PT patients, the other chiropractors in the area. Our massage therapist is crazy busy. Like we, it's hard to get patients [00:24:00] in because she's so good and it's hard to keep massage therapists around.

[00:24:02] So we've got a good working designed here and we're all separate businesses. It is very doable.

[00:24:08] **Joey Myers:** Yeah. Very cool. Yeah, it's a great one-stop shop is probably, it sounds a little bit more like those that are listening and those that are in California or those that can travel to Fresno.

[00:24:17] Fresno. Those are in California know where Fresno's at smack dab in the middle and it's a good distance. Two and a half from the bay area. And. Three-and-a-half four and a half, depending on traffic, from the SoCal area. If for those that are interested, have their kids want to come and check them out.

[00:24:32] Come check out. Dr. Matt Scott, again, like I said, remember the couple of rules that you want when you hire a chiropractor, even PT, and then you apply the same rule to any of the other health practitioners is can they dead lift more than you? Number one, and number two, do they play at a high.

[00:24:46] So they understand high level athletics and things like that. Hey, I want to thank you for your time, Mr. Dr. Matt Scott, and we'll have to have maybe a part two at some point.

[00:24:57] **Dr. Matthew Scott:** Thanks for having me on. Appreciate it.

[00:24:59] **Joey Myers:** All right. Let me stop this. And then out here, zoom always changes or stuff around.