



The Vibe TM

Owner's Manual

**Dr. Dennis Woggon, B.Sc., D.C.
A. Joshua Woggon, B.S.**

www.vibeforhealth.com

PO Box 426
Madison Lake, MN 56063
1-866-520-4270

Copyright 2008

Table of Contents

Warranty Information	3
About the Inventor & Author	4
Introduction to Whole-Body Vibration (WBV)	5
Directions for Installing the Vibe	6
Using your Vibe for the First Time	7
Simple Exercises	8
Advanced Exercises	9
Accessories for the Vibe	12
Contraindications	13
Recommended Billing Codes	14
Research & Literature on WBV	15

All products sold by Vibe For Health are guaranteed to meet your satisfaction; if not, simply return the product within 30 days for a complete refund!

The Vibe™ Pro 21 & Pro 14: all parts & accessories are covered against the chance of manufacturing defects, shipping damage, and also breakage resulting from normal wear & tear, for a period of up to one (1) year after the unit is received.

In the event of warranty disagreements, Vibe For Health reserves the right to ultimately decide whether to provide compensation and/or repair service on any and all of its products.

In case of equipment breakage or malfunction, please notify:

Vibe For Health
866-520-4270, option 1 or
care@vibeforhealth.com

A brand new unit will be shipped to you if it is not possible to have your old unit repaired and returned to you within seven business days.

Please bill CLEAR Institute for shipping costs (Standard Ground only).

For questions regarding treatment protocols, please e-mail

care@vibeforhealth.com

For all other requests, please contact Vibe For Health directly at
866-520-4270.

About the Inventor of The Vibe™

Dr. Dennis Woggon was born in Milwaukee, WI, and graduated *cum laude* from Palmer College of Chiropractic in 1974. He is the founder and director of the Saint Cloud Chiropractic Clinic, which recently celebrated its 30th anniversary in 2004, and also founded CLEAR Institute in 2000. He has completed over 4400 hours of post-graduate work in spinal biomechanics, and lectured at several chiropractic colleges including the Palmer, Parker, Life, Northwestern, Northern California, and Texas Colleges of Chiropractic. Dr. Woggon has published over 25 articles on chiropractic in various journals including *Dynamic Chiropractor*, *Posture Magazine*, *Canadian Chiropractor*, and the *Journal of Vertebral Subluxation Research*. He is internationally recognized as one of the leading spinal biomechanics experts, and has served as a delegate to the Spine Clinic in Vladivostok, Russia, and also presented at the International Chiropractic Symposium in Athens, Greece. His work in scoliosis correction has proved wrong those who thought scoliosis could never be corrected, only stabilized, and that chiropractic could not help a scoliosis patient. "Scoliosis treatment using a combination of manipulative and rehabilitative therapy," by Mark Morningstar, Dennis Woggon and Gary Lawrence, was published in BMC Musculoskeletal Disorders on September 14, 2004. You can find the article online at:

<http://www.biomedcentral.com/1471-2474/5/32>

About the Author of the Owner's Manual

Alan Joshua Woggon is the only son of Dr. Dennis and Brenda Woggon, and received his first chiropractic adjustment when he was barely seven minutes old. The adjustment, performed by his father, restored hyperventilating lungs to normal and most likely saved his life. He began working as a custodian in the Saint Cloud Chiropractic Clinic at the age of 13, and quickly developed a penchant for devouring the knowledge contained inside the many books on chiropractic in the clinic – a habit that continues to this day. After receiving a National Merit Scholarship, he graduated from Saint Cloud State University and assumed the position of secretary and treasurer of CLEAR Institute in the autumn of 2003. He has also worked in the Saint Cloud Chiropractic Clinic with Dr. Woggon as a chiropractic assistant since December of 2003, acquiring hands-on experience with the vibration therapies pioneered by his father. Currently, he is pursuing plans to collaborate with the Research Department of Parker College of Chiropractic on the effect of vibration therapy upon the human body.

Introduction to Whole-Body Vibration (WBV)

Congratulations on your purchase of the Vibe, an innovative and effective new tool for rehabilitation, pain relief, and biomechanical improvement. The benefits of WBV have been researched extensively in Europe and Russia, and exciting new studies are beginning to appear in the United States that correlate with the information from across the Atlantic. To see these studies for yourself, please turn to the last page of this manual, where we have listed many references on the positive effects of WBV.

Although many people will exhibit disbelief, even incredulity, when confronted with their first experience of WBV, there are a number of metaphorical analogies that may help to explain exactly why WBV works as well as it does. Many people are familiar with hand-held massagers that apply a localized vibration to the muscles, aiding in relaxation, waste dispersion, pain management, and blood circulation. What we have done with the Vibe is essentially created a system through which the entire body can experience these beneficial effects, not just one area. When the body experiences WBV, it responds by activating the postural muscles to maintain proprioception (balance), and this in turn speeds blood and lymph circulation throughout the body. The collagen in the body that makes up the tendons, ligaments, and discs begins to heat up and become more fluid, improving ranges of motion and flexibility. Try placing a sealed container of water on the Vibe – it will look like it's boiling!

Many people know that a broken bone will heal quicker under stress (Wolf's Law), and that same law of biomechanics applies to healthy bones as well. The stimulation of the muscles and tendons has an osteoblastic effect upon the bones, and since bone growth requires osteoblastic activity, it has been scientifically proven that WBV will increase bone density! If this still seems a bit hard to believe, try placing a container filled with sand or gravel on top of the Vibe. The material inside the container will quickly be shaken down to a smooth, even surface. This is a model of what happens to the bone-collagen matrix inside the bones! It is re-aligned and strengthened by the shifting and shaking motions going on all around it.

This same analogy can also be utilized when it comes to explaining why the Vibe decreases pain and inflammation. As you stand on the Vibe, you may feel a slight "buzz" in injured areas while in a certain position. By holding that position, you can apply the vibratory forces to help dissipate the inflammation, relax the tissues, and relieve the pain.

Lastly, WBV also affects hormonal production in the body. Levels of the Human Growth Hormone more than triple when you are standing on the Vibe! This hormone is very important for healing and regeneration. Testosterone, which also plays a role in the rehabilitation of injured tissue, increases as well. But there is one type of hormone that actually *decreases* while you are on the Vibe. Can you guess which one? Cortisol – otherwise known as, "the stress hormone."

Installing the Vibe in your Home or Office

The vibration produced by the Vibe can be transferred through the floor into nearby equipment. For this reason, it is very important that you ***do not place the Vibe near computers or other vibration-sensitive equipment!*** Vibe For Health cannot be held responsible for damages inflicted upon other objects in this manner.

The best place for your Vibe is near a foundation wall, which will absorb some of the ambient vibration. Floors with heavily padded carpet will make the vibration seem less intense; hardwood, linoleum, or concrete floors will have the opposite effect. It is not necessary to install the Vibe in a basement or ground level; although, if there are tenants in the floor beneath you, it might be prudent to inform them of your new purchase and explain what it does so that they will not be unnecessarily alarmed when the light fixtures in their ceilings begin to rattle.

If people with difficulties in balancing are going to be standing on the Vibe, place it in a corner so that the walls may be used for stability. It is certainly helpful to position the Vibe with handholds for the user to grab to prevent falls, but the balance-improving effect of the Vibe will be lost if the user is constantly holding on to another object for stability. We encourage you to make every effort to stand on the Vibe independently, without support. You will be amazed by how quickly your balance improves, and how effortless it will soon become to stand on the Vibe.

The timer control may be conveniently attached to a nearby table or wall with the adhesive Velcro® backing. Please do not attach the timer to the Vibe itself, as this may disrupt the sensitive equipment inside the timer.

It is recommended that you keep the area beneath the Vibe clean and clear of dust to ensure trouble-free operation. Every month the unit should be moved and the area beneath vacuumed.

The power supply for the Vibe is standardized for North American operations at 115 Volts/60 Hertz. The power consumption of the Vibe is 5.6 amps. Converters will be required if you are attempting to use the Vibe outside of North America. For more information on Vibes specifically designed for use in European countries, please contact Vibe For Health, 866-520-4270.

Using your Vibe for the First Time

Once your Vibe is installed and ready to use, do not overdo it with your first experience. The vibration produced by the Vibe will flush toxins out of bodily tissues, and this may produce nausea or discomfort. Start with 3-5 minutes of vibration, twice daily. Once you feel comfortable with this time span, increase it to 10 minutes. If you wish, you may increase it further, but do not exceed twenty minutes, three times a day. After standing on the Vibe for twenty minutes, the body will adapt to the vibration and no further benefits will be readily apparent. If the Vibe is used at home, the recommended usage is 10-20 minutes twice a day at least 5 out of 7 days, or daily if possible. In a clinic setting, you may wish to limit the time that your patients are on the Vibe, especially in high-volume practices. Typically, 5 minutes is enough for the benefits of WBV to become apparent in a patient. In particularly difficult cases, you may wish to increase the time to 10 minutes to ensure maximum benefit.

Dizziness and nausea are common side effects of using the Vibe, and they readily disappear within 1-3 usages of the Vibe as the body adjusts to its effects upon the circulation. To facilitate this process, if dizziness or nausea occur, discontinue use immediately, drink 2-3 glasses of water, and wait five minutes before trying again. Do not look down while on the Vibe, as this may cause dizziness.

If you experience a “tickle” in your nose or sinuses, looking up at the ceiling and bending the knees will help to alleviate the pressure (**note to D.C.'s: Patients with Forward Head Posture will be especially susceptible to this complaint due to increased adverse mechanical tension on the cervical spine. Reassure them that as their condition improves, they will find the Vibe more comfortable to use and this side effect will soon wane and disappear**).

As you are becoming accustomed to the effects of WBV, you may find it helpful to reduce the intensity of the vibration through insulation, or by turning 90 or 180 degrees on the platform. The easiest method of insulation is to keep your shoes on while standing on the Vibe (typically, the shoes are removed to improve muscle response and proprioceptive re-training). You may also place a rubber or foam pad either beneath or on top of the Vibe. Moving around on top of the platform will also change the intensity of the vibration, as the motor unit is centered and positioned facing forward. Please be advised, however, that no benefits of WBV are lost when the intensity is reduced – the effects are derived from the frequency of the vibration, and not its strength.

A Note About the Vibe & Children: Many children find the Vibe to be fascinating and fun to use, and children as young as six months have responded with smiles when placed upon the Vibe. However, the Vibe is not a toy, and children should be closely monitored while they are around it. Do not let children attempt to pick up the Vibe or place their hands near its edges. If you sit an infant upon the Vibe, steady them with your hands to prevent falls while still allowing their full weight to rest upon the platform. Children capable of standing should be encouraged to do so while on the Vibe, but again, monitor the child closely and constantly. Do not exceed five minutes, and remove the child from the Vibe immediately if he or she exhibits any signs of distress or discomfort.

Simple Exercises for the Vibe

After you are comfortable with the Vibe, you may begin simple exercises.

- 1.) Stand with your feet facing front. Then SLOWLY rotate your body left and right. At a position of injury or inflammation, you should feel a slight “buzz” in that area. Hold that position for 5-10 seconds, and then resume rotation.
- 2.) The Vibe enhances any stretching or warm-up routine by increasing the force placed on muscle fibers by three times the force of gravity. Stretches should be performed SLOWLY.
- 3.) Facing forward, alternate between bending the knees and rising up on the toes, slowly and gradually. You may hear “popping” noises in your joints as the collagen becomes more fluid.



- 4.) For foot and heel pain, sit on a chair with the feet on the Vibe. This is also beneficial for ankle and knee problems.
- 5.) The hands may be placed upon the Vibe and the wrist, elbow, and shoulder rotated slightly with the hands firmly in place. This is done

for shoulder, wrist, and elbow injuries, including carpal tunnel syndrome. To alleviate arthritis and joint pain in the fingers, alternate between pressing on the Vibe with the fingers and then with the palm.



Advanced Exercises for the Vibe

Important Note: *These exercises are meant to be performed under the supervision of a chiropractor or certified assistant. Please do not attempt to incorporate these exercises into your routine without first consulting your doctor!*

Spinal Weighting Procedures (patent pending):

Begin with head weight or therapeutic glasses. As the patient advances in comfort, the head weight can be gradually moved to the side. Upper and lower shoulder weighting can then be added, followed by hip weighting. With Scoliosis cases, head weight or glasses first, hip weights second, and shoulder weight last! This is usually done over a period of 12 weeks.

Head Weight: The Head Weight will reduce forward head posture and improve the cervical and lumbar lordosis. It may also be moved toward the side of the high shoulder (45 degrees).



Therapeutic Glasses: The top $\frac{3}{4}$'s of the glasses are covered with tape so the patient must extend the head and neck to see. This is very effective with a CO-C1 flexion mal-position.



Anterior or Posterior Shoulder Vest Weights: The shoulder vest weight is placed on the front of the anterior shoulder or the back of the posterior shoulder. This will have a counter effect, which will de-rotate the pelvis. This is effective in forward or backward buttock posture (i.e., a low anterior

shoulder is usually associated with a coupled high or anterior hip; therefore, by putting an anterior shoulder vest on the low shoulder, it should cause the high anterior hip to rotate posterior).

Hip Weights: A weight is placed on the front side of the anterior hip and / or the back side of the posterior hip.



Lower Shoulder Weight: The low shoulder weight will affect the lumbo-dorsal angle, and is placed on the same side as the LD angle. This should be about 8 to 20 pounds.



Hand Weight: The hand weight is similar to the shoulder weight, as it will affect the lumbo-dorsal angle. It is sometimes more convenient.

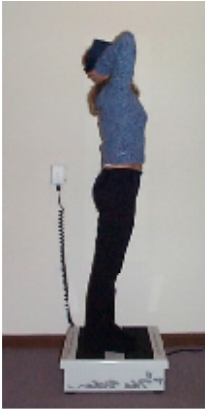


Upper Shoulder Weight: This 2 to 4 pound weight will affect the cervical-dorsal angle and is placed on the side opposite the CD angle.

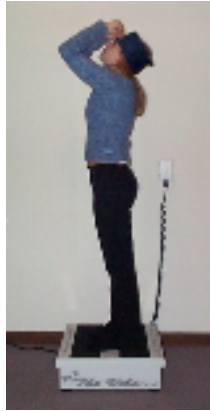
Spinal Rehabilitation Exercise Program

After the patient has completed warm-up exercises, extension, flexion, and lateral cervical exercises on the opposite side of the cervical-dorsal angle (high shoulder), and lateral bending exercises away from the shoulder weight, should be performed. These exercises should be done isometrically and held for 5 seconds with 10 repetitions. Patient brochures on these exercises may be ordered from A-1 Chiropractic Supply, (800) 745-A-ONE, Form #104-R/04.

Extension: This is done with a loss of cervical lordosis and held isometrically for 5 seconds with 10 repetitions.



Flexion: This is done with a loss of cervical lordosis and held isometrically for 5 seconds with 10 repetitions. This will work the weak flexors.



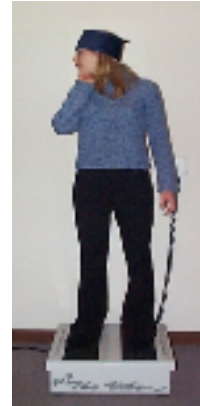
Low Shoulder: This is done on the opposite side of the cervical-dorsal angle. It is held isometrically for 5 seconds with 10 repetitions.



C2 – RCPM: This exercise works the rectus capitis posterior major muscle. It is necessary when there is alar ligament damage. It is done on the same side as the alar ligament damage.



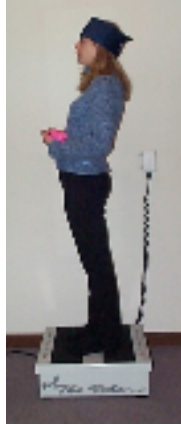
C1 – SCO: This exercise, shown on the right, works the superior capitis oblique muscle when there is 4 degrees or more of atlas rotation. The head is turned toward the side of posterior rotation of C-1.



Scoliosis Weighting: It is possible to lay the patient prone on the Vibe with a block placed under the high shoulder and weight placed on the upper thoracic curvature.



Abdominal Weighting: 25 to 50 pounds of weight is held by the patient, which will accentuate the lumbar lordosis. This will be of benefit with a retrolithesis of L5 but should NOT be done with a spondy. The patient may rotate slowly.



Proprioceptive Neurological Muscle Re-Education: The patient stands on one foot and throws a beanbag or a ball back and forth. As they begin to lose their balance, they change feet. The knee should be brought up at a 90-degree angle and positioned in front of the body.

Additional research is going on with a Vibrating Scoliosis Traction Chair and Assembly. See page 12 for details.



It is also possible to combine The Vibe with traction. This combination improves posture and opens up the intervertebral foramina while providing proprioceptive neuro-muscular re-education. See page 12 for details.

Accessories for the Vibe

Cervical Traction

Combining the Vibe with cervical traction is an extremely effective way to improve posture and disc spacing. The easiest approach to set up this system in your home or office is by using an overhead pulley system, either attached to the ceiling or a nearby wall.



Because this system is so effective, we include a complimentary Grafc® Cervical Traction System with every Vibe Pro 21. Deluxe head halters may be purchased through the Saunders Group for \$16.95, (800) 966-3140, Item #07014. We also sell a modified version of this deluxe head halter that has been customized to include additional padding and softer material for extra comfort. To order this handmade halter, please send a check for \$49.95 to CLEAR Institute, or leave a message with our voice mail at (320) 202-5954.

Cervical traction may be done in a stationary position or with a combination of exercises. The patient may slowly rotate bilaterally. In the case of a scoliosis the patient will rotate from a neutral position to one side (usually right) and then back to center. They may also perform toe raises with slight knee bends while standing on both feet, or, as an advanced proprioceptive re-training exercise, they may stand on one leg (stork stance) and do this exercise.



Scoliosis Traction Chair (Patent Pending)

The scoliotic spine has a “crankshaft phenomena,” where it winds down into itself 3-dimensionally. To be corrected, it must be de-compressed and de-rotated simultaneously. First, the patient is seated in the chair on top of an air cushion that allows dynamic motion into the hips and spine. The chair arms are raised on the side of the low shoulder, and the chair back is rotated into the thoracic scoliosis. One or two elastic braces are used to pull the thoracic and/or lumbar curve(s) towards a normal position. Lastly, cervical traction provides spinal de-compression. For more information about the Scoliosis Traction Chair, e-mail Dr. Dennis Woggon at: Drwoggon@aol.com



Contraindications for Using the Vibe

The Vibe has been in constant use at the Saint Cloud Chiropractic Clinic for almost four years, with patients eight years old to eighty. In that time, we have yet to experience a single adverse reaction that could not be discounted as temporary in duration and mild in intensity. However, in many of the literature sources about WBV, they do provide certain contraindications for its usage. In this section, those contraindications are listed, as well as descriptions about why each one may lead to possible complications.

Prescription Drug Use: The use of certain types of medications will reduce or impair the effectiveness of the Vibe. Fosamax, Actonel, Aredia, Zometa, or any other osteoporosis prescription will reduce the effectiveness of the Vibe in improving bone density. This is due to the formaldehyde-like action of these drugs upon the bone tissue. By inhibiting osteoclastic activity, bone loss is stopped, **but so is bone growth**. If you want the full benefits of new bone formation from the Vibe, discontinue use of these medications immediately. Also, many prescription drugs are expressed as toxins in the body's tissues, which will heighten the nausea and dizziness that accompany the toxic release effect of the Vibe.

Pregnancy: Although there are no documented negative effects of WBV upon an unborn fetus, there is no way to be sure that this experience is interpreted as a positive one by the unborn life. You may wish to decide for yourself whether or not to use the Vibe if you are or think you may be pregnant.

Acute Thrombosis / Severe Cardiovascular Problems: Theoretically, the activity of the Vibe could dislodge an embolism in an artery or vein, possibly causing a stroke or similar trauma. More likely, the vibration will safely break up and disperse an embolism or clot, but those who fear the worst may wish to consult with their doctor before using the Vibe.

Artificial Body Parts / Recent Surgeries: Vibration can be very challenging to the body, and those with large amounts of scar tissue may find the Vibe to be uncomfortable. Please do not attempt to push your body beyond its comfort zone in using the Vibe, especially after severe physical traumas such as surgery.

Epilepsy / Seizures: It is not known if WBV may provoke seizures in epileptic individuals. For safety's sake, do not use the Vibe if you have a history of seizures.

Acute Migraines: The effect of the Vibe upon the muscles and circulation may trigger a migraine in those who have a history of acute migraines. Please consult your doctor before using the Vibe.

Recommended Billing Codes

CPT Code	Description
97012	Mechanical Traction (Vibe w/traction) Intended for Acute Care ONLY
97110	Exercise Therapy (Vibe w/exercises or spinal weights)
97112	Proprioceptive Neuromuscular Re-education This is the recommended billing code for the Vibe
97530	Therapeutic Activity, attended Must be supervised by primary physician Highest RVU

All codes provided are recommended ONLY; we offer no guarantees of payment for any code. It is your responsibility to determine proper codes and fees for your area. Vibe For Health cannot be held liable for any misuse or misrepresentation of the products and/or services it provides. For more information or clarification of the above codes, please refer to the most recent edition of the CPT Manual.

Research & Literature on Whole Body Vibration

- 1) "Vibrating Bones Build Strength," Rubin et al, August 8, 2001
"Mechanical Strain, Induced Noninvasively in the High-Frequency Domain, is Anabolic to Cancellous Bone, But Not Cortical Bone," Rubin et al, Bone 2002, Mar'30(3):445-452.
- 2) "Changes in Postural Muscle Dynamics as a Function of Age," Huang et al, Journal of Gerontology, Aug. 1999;54(8):B352-7
- 3) "Shake, Rattle and Grow," Stoppani, Muscle and Fitness, April 2002
- 4) "Energy Medicine, The Scientific Basis," Oschman, Churchill Livingstone Publisher, 2001
- 5) "Effects of Broad Frequency Vibration on Cultured Osteoblasts," Shiego et al, Indiana School of Medicine, July 2002
- 6) "Effect Of Four-Month Vertical Swole Body Vibration on Performance and Balance," Torvenin et al, Bone Research group, UKK Institute
- 7) "Treatment of Chronic Lower Back Pain With Lumbar Extension and Whole-Body Vibration Exercise: A Random Controlled Study," Rittweger et al, Institute for Physiology, Berlin, Germany
- 8) "Perceptual Changes in Illusory Wrist Flexion Angles Resulting From Motor Imagery of the Same Wrist Movements," Kitada et al, Kyoto University, Japan
- 9) "Hormonal Responses to Whole-Body Vibration in Men," Bosco et al, Societa Stampa Sportiva, Rome, Italy
- 10) "Oxygen Uptake in Whole-Body Vibration Exercise: Influence of Vibration Frequency, Amplitude and External Load," Rittweger et al, Institute for Physiology, Berlin, Germany
- 11) "Option for Healing Broken Bones," Nelson et al, AAOS, October 16, 2002 Web Conference
- 12) "Cosmonaut is Shaking His Bones Back to Health," BBC, ESA, May 16, 2002
- 13) "Shock Wave Therapy for Recalcitrant Plantar Fasciitis With Heel Spur: A Prospective Randomized Placebo-Controlled Double Blind Study," Abt et al, University of Berlin, 2002 Sep-Oct;140(5):548-54
- 14) "Good Vibrations," Dr. David G. Williams, *Alternatives for the Health-Conscious Individual*, September 2003, Vol. 10, No. 3.
- 15) "Acute physiological effects of exhaustive Whole Body Vibration exercise in man," J. Rittweger, G. Beller, and D. Felsenger, 1999.
- 16) "Neurophysiology of motor responses evoked by vibratory stimulation," Physical Therapy, 54, 1273-1282.
- 17) "New Trends in Training Science: the Use of Vibrations for Enhancing Performance," C. Bosco, M. Cardinale, O. Tsarpela, E. Locatelli.
- 18) "Low mechanical signals strengthen long bones," Rubin et al., Nature, Vol. 412, August 9th, 2001, p. 603-604.
- 19) "The anabolic activity of bone tissue, suppressed by disuse, is normalized by brief exposure to extremely low-magnitude mechanical stimuli," Rubin et al., FASEB Journal, Oct 2001, 15(12):2225-9.
- 20) "Whole-body vibration in the skeleton: development of a resonance-based testing device," Rubin et al., Annals of Biomedical Engineering, 1997 Sep-Oct; 25(5):831-9.
- 21) "Morphologic stages in lamellar bone formation stimulated by a potent mechanical stimulus," Journal of Bone and Mineral Research, 1995 Mar;10(3):488-95.
- 22) "Adaptive Responses of Human Skeletal Muscle to Vibration Exposure," Bosco et al., Clinical Physiology 19(2):183-187.