

Video Transcript: Chiropractic Economics talks to Cindy Howard, DC

Gloria Hall: I'm Gloria Hall, editor-in-chief of Chiropractic Economics. I'm excited to have Dr. Cindy Howard here to talk about her article, "How nutrition and laser therapy work better together." Dr. Cindy, thanks for being here today.

Dr. Cindy Howard: Gloria, thank you. It's just a privilege to be chatting with you about chiropractic and the articles. It's great.

GH: Awesome. To start us off, can you tell us a little bit about you, your philosophy and your practice?

CH: Sure. So I've been in practice for a little over 26 years now and my practice is rooted not only in the science of chiropractic but also in internal medicine and nutrition. I had the opportunity going through school to meet some amazing mentors in primary care, and not realizing that was something we could incorporate into practice, I latched on pretty quickly. My very first chiropractic patient had a herniated disc that we treated successfully through good laboratory work and nutrition. I've been able to incorporate those things into my personal practice ever since. I've been in private practice for that long, doing all kinds of neat things and always looking for new opportunities to expand that aspect of chiropractic.

GH: Well, thank you. Can you go into a little more detail on the article and provide some key advice to DCs who are considering integrating nutrition and laser therapy?

CH: Sure. One of the reasons behind the article was to encourage people to think a little differently about the modalities we have available in practice. I think we get caught up in doing one thing really well, but there are so many things we can bring into practice that, when coupled together, create better outcomes. For me, after years of doing nutrition, supplementation, and teaching patients, I found that sometimes the effects weren't as great as they could be—due to absorption, digestion or potentiation issues. I always used laser in my practice, but separately. When I started bringing them together, outcomes were faster, better and longer-lasting.

It got me thinking about what else we can combine from different modalities. We picked laser and nutrition for the article because they complement each other well. Laser therapy increases ATP production, affects mitochondria and improves the microbiome, which helps nutrient absorption. So if I'm trying to get people to absorb nutrients for an outcome, and laser therapy helps with that, it makes perfect sense to combine them. I hope the article inspires DCs to think about what other modalities they can pair in their practice.

GH: Are there any real-life examples you can cite?

CH: That's the fun part. One of my favorites is Hashimoto's thyroiditis. We see a lot of autoimmune disease patients, and nutrients play a big role in regulating immune function. Organs like the liver, pituitary and thyroid are affected. Using laser therapy over these organs

improves their function when coupled with nutrients. We've seen reductions in antibodies, which is hard to achieve with nutrition alone. When antibodies decrease, the immune system stops attacking the thyroid, allowing it to regulate better. We've even eliminated hypothyroidism diagnoses in some cases.

On the musculoskeletal side, we see reductions in inflammation and pain—like with knee arthritis. I might give glucosamine, chondroitin, MSM, bromelain, curcumin or omega-3s. But when coupled with laser, what used to take weeks now takes just a few visits. Pain reduction happens faster, with fewer treatments and greater patient satisfaction. Whether it's nutritional, immune or musculoskeletal, we're seeing great results.

GH: That's really exciting. Can you share some findings from the research to support the benefits of integrating nutrition and laser therapy?

CH: Research is fascinating but sometimes hard to find. The best evidence shows that laser stimulates metabolic pathways, which increases absorption. If we use nutrients around the time of laser therapy, and those pathways are active, the nutrient uptake is greater. We have proof of that. A lot of research is symptom- or condition-based, so we have to dig deeper to understand what laser is doing—like improving mitochondria, ATP production and the microbiome. If nutrients need those systems to function better, coupling them makes sense.

We need more research—especially double-blind, peer-reviewed studies that combine nutrients and laser therapy. There are lots of case studies, but we need more formal research to support it.

GH: Something I've been hearing more and more.

CH: It's true.

GH: With October being Chiropractic Health Month, can you share why you became a chiropractor and what chiropractic means to you?

CH: My story is kind of funny. I don't have that dramatic story like many of my peers who were saved or inspired by chiropractic. I was raised in a very allopathic family—antibiotics for everything. I never saw a chiropractor until college, after a car accident. It helped, but it wasn't life-changing.

I was a dance major and dreamed of being a professional dancer, but realized how broke I'd be. So I switched to exercise physiology and applied to physical therapy school—but couldn't get in. It was so competitive. My dad said go into sales, and I did. I made money, spent it all and got tired of sales quickly.

Someone said, "Why go to PT school and be told what to do when you can go to chiropractic school and tell PTs what to do?" I thought, "I love telling people what to do!" So I applied, got in and went. It was blind faith—I loved health, wellness and fitness. I didn't have the initial story,

but I fell in love with the profession, the people and the ability to truly listen to patients and help them. The relationships I've built are so rewarding. Now I have the story of how much I love chiropractic—it just didn't start that way.

I eat, breathe and drink this profession. Anything I can do to help educate, share knowledge and expand access to chiropractic, I'm in. It truly changes lives—it just didn't change mine until I said yes to school.

GH: That's a great story.

CH: Thanks. It's the one I've got, Gloria.

GH: As we approach 2026, what do you see as the biggest trends or topics DCs should be aware of?

CH: That's a hard question—there are so many great answers. But I think one of the biggest is collaboration. Collaboration within your own practice—figuring out what tools you have and how to use them to give patients more options. And collaboration with each other. We often sit in our own bubble, feeling alone or afraid to reach out. But there are so many intelligent people in this space with ideas and knowledge that could benefit patients. If we work together, share stories, ideas and patients, we can elevate our profession and improve patient outcomes. Patients just want to get well, and we don't access collaboration enough in my opinion.

GH: That sounds like a good topic for an article.

CH: Oh, did I just get roped into that? I think I did—but I'm happy to do it. It's a great topic.

GH: Dr. Cindy, thank you. Thank you for your time today, your contribution to Chiropractic Economics and your contribution to the chiropractic profession. Glad to have you here today.

CH: Thank you, Gloria. It's been my pleasure, and I thank you for trusting me enough to share my ideas with our audience. Hopefully they can take what they want, collaborate better and help more.