Cox® Distraction Helps Cervical Spine Pain Patient Avoid Surgery

A 46-year-old, white, married male is seen for the chief complaint of a 6-month history of numbness and pain in the right and left arms, the left arm much worse. He states that he has weakness of the left arm, drops his tools, cannot sleep, has had a MRI, and two epidural steroid injections for the problem, which gave no relief.

Examination reveals normal vital signs. The range of motion of the cervical spine is full, although pain is noted in all directions. Pinwheel examination of the left arm reveals hypesthesia of the left C6 and C7 dermatomes. Muscle strengths of the cervical spine are weak in all directions, primarily due to pain. The left triceps reflex is +1; all other reflexes of both upper extremities are +2. Cervical compression increases the neck and bilateral arm pain, the left the worse. No thoracic outlet signs are seen.
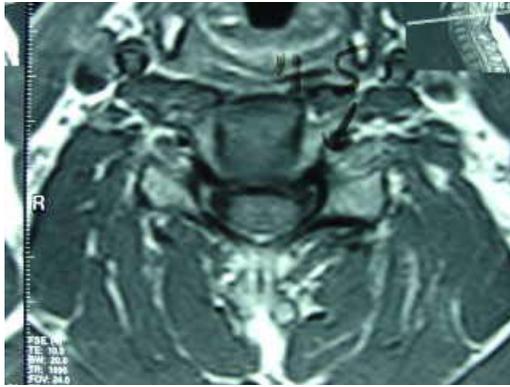
MRI of the cervical spine, see enclosed images, revealed degenerative disc disease at the C3-C4, C5-C6, and C6-C7 levels with degenerative discogenic spurs and uncovertebral arthropathy, the latter finding primarily on the right at C5-C6 and more advanced and bilateral at the C6-C7 level. Moderate bilateral C6-C7 and moderate right C5-C6 proximal foramen stenosis due to the degenerative disc disease is present. A small left lateral disc protrusion at C4-C5 and a more significant but relatively small, broad based subligamentous partial disc protrusion at C5-C6 extending from one lateral recess to the other, minimal, central, and a broad based hard disc protrusion at C3-C4 are seen. Plain x-ray lateral view reveals the degenerative changes from C4 through C7.
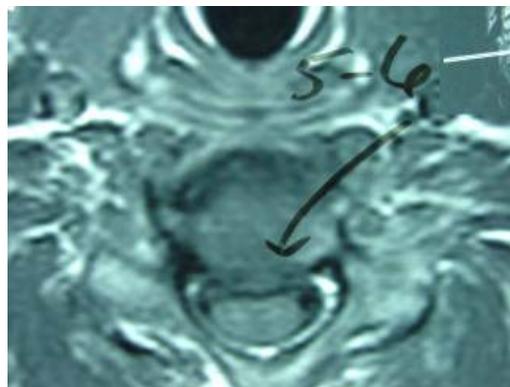
Treatment consisted of cervical head piece long Y-axis distraction consisting of three 20 second long Y-axis distraction sessions. Each 20-seconds consisted of five 4 second pumping movements with the contact on the arch of the C5 cervical vertebra. This was followed by galvanic current to the C5-C6 disc levels extending into the left forearm C6 dermatome. This was given for 10 minutes. This was followed by 10 minutes of tetanizing current. The patient was placed on Discat Plus, which is chondroitin sulfate and glucosamine sulfate as well as the minerals found in the disc, and Formula One, which is a multi-mineral, multi-vitamin, herbal, and enzyme formula. The patient was instructed that if 50% relief was not attained within 4-6 weeks of treatment or if progressive neurological deficit should entail, surgery would be offered as an option. The patient was to apply ice to the cervical spine at home followed by the application of linament to the accupressure points, which were taught to the patient in clinic.
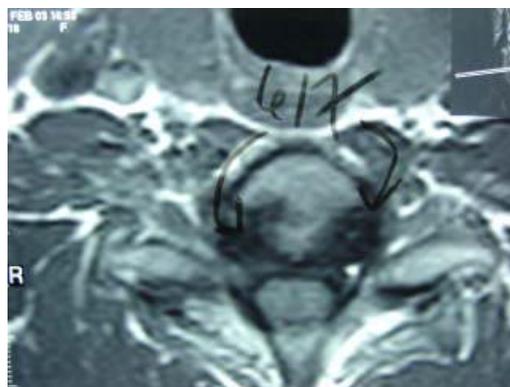
The result of this was that the first treatment resulted in the patient being able to sleep for 12 hours. Within 6 visits there was no numbness in the fingers. At this time the patient put up a garage door and felt increased neck and left arm pain resulting in inability to sleep well. This caused the patient to consider having surgery, especially since his wife thought that this would be his best approach. At that time I presented him with the Heckmann paper stating that conservative care rendered better relief than surgical care of cervical disc herniations. At next visit, the patient presented with a greater understanding of his problem, and stated that his right arm pain was better after the last visit, but the left arm pain continued. He attended back school, and this reinforced the concepts of treating his cervical disc problems with conservative rather than surgical care. On the 12th visit, he had no pain in either arm and was very happy with his care.

The patient continued to work and was very pleased with his progressive healing. He was presented at part one of the Cox seminar in September 2003 in Fort Wayne, IN.

The total number of treatments was 27 given over a 3-month period.

This is a good example of a failed medical case, awaiting surgery that responded to distraction manipulation and allied therapies.

Respectfully submitted, James M. Cox, DC, DACBR