

SPINAL MANIPULATION – WHAT DOES IT DO?

By Simon Burley Physiotherapist

Spinal Manipulation is widely used by Physiotherapists and other practitioners in the conservative management of low back pain. Science is yet to prove or disprove the exact mechanism by which manipulation takes its effect although this should not discredit its use.

In the hands of a skilled Physiotherapist who can screen for possible dangers often with the assistance of your medical doctors, it is a useful tool to relieve spinal pain.

Scientific trials have shown that it is important to select the correct type of spinal pain patient for this technique. It is useful on patients with non-specific spinal pain, of acute onset, who have reduced movement between the vertebral bones at a particular level, who also have pain on spinal palpation and spinal movement.

The benefits are reduction in pain, accelerated recovery, reduced disability, increased treatment satisfaction and reduced treatment cost in the short term.

Manipulation is less useful in patients with chronic low back pain. Generally the improvements following manipulation are that you achieve a speedier recovery from spinal pain.

This is the reason most patients seek help. Alone manipulation will not prevent recurrence of your pain and medical specialists believe repeated manipulation may lead to spinal joint damage.

To fully treat spinal pain:

- 1) The cause must be found and modified and
- 2) Spinal musculature must be balanced. That is musculature creating abnormal pull and position of the spinal column must be corrected and musculature providing inadequate support must be strengthened.

MANIPULATION

The dangers of manipulation are again being brought up in the media due to the death of a young woman from neck manipulation.

The coroner who investigated the death found that the manipulation caused injury to one of the vertebral arteries in the neck. The arteries run up canal's through the spine

to supply blood for the brain. They are vulnerable to injury during neck manipulation particularly at the top of the neck where a rotatory force can jam bone into the artery.

This is particularly so if you are very young (younger than 14, where joints are very flexible) or older (greater than 65, wear and tear of joint surfaces can lead to instability of joints and also the development of degenerative osteophytes growths that can protrude into the arteries canal.)

In the case of this young woman she was having neck manipulation to relieve headache pain. The resultant injury to the vertebral artery caused a clot to form in the artery. A piece of this clot broke off, travelled to her brain causing a stroke and she died. The coroner in his summation reported the chance of death from manipulation to be 2 in a million.

The doctor who performed the manipulation had some training in manipulation but inadequate training. Interestingly though regardless of how skilled the practitioner is, there is still that 2 in a million chance.

There is a vertebral Artery Testing protocol that physiotherapists are required to do before a manipulation which can exclude most people with a vertebral artery problem. As it, of course, doesn't test the actual manipulation technique it is not 100%.

THE ANSWER

Most leading physiotherapists are tending away from manipulation except in cases of an obvious locked joint and many won't do the upper cervical manipulations at all.

Releasing tight muscular and ligamentous soft tissues can often achieve the same results as manipulation. If released the abnormal pull on cervical joints is released and correct position can be attained.

Often the trigger points in the muscles themselves can be the source of pain. Cervical (neck) joint problems can also be improved by the gentler mobilisation techniques achieved with gentle thumb pressure.

Physiotherapists are also very concerned that patients have adequate strength of the deep neck flexors. These muscles are crucial to the cervical (neck) joints maintaining correct alignment.

Manipulation can be affective but as the coroner found there are risks even though slight.

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