



Perseverance of a Stenotic Patient

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Overview

- The interest of this case is the perseverance of this patient to look for help after multiple interventions with poor results.
- The patient has had laminectomy at L4/5 on the left 40 years ago and laminectomy at L3/4 on the right 20 years ago.
- She has had by her estimate 15 epidurals including 4 in 2011.

Overview

- She saw a chiropractor at her Winter home in Florida last year because of bilateral leg and back pain. She was treated with a lumbar roll and had to be carried out of the office.
- She, remarkably, saw a different chiropractor in Florida two months later and again had an adverse reaction after lumbar roll. She was able to ambulate out of the office, but her pain was markedly worse for over a week.

History

- She presented to our office in July 2012 complaining of persistent lower back and bilateral leg pain which is worse on the right.
- Her right leg pain extends into the right hamstring and also into the right quad area.
- The right quad pain is what really stops her when she tries to walk very far.
- Sitting relieves her pain quickly unless she overdoes it.

History

- Her goal is to be able to remain independent and maintain her house. Her pain has reached the point where she has difficulty staying on her feet long enough to do this.

Physical Exam

- Lower extremity pulses were normal, no signs of swelling in either extremity.
- Blood pressure was 134/78, pulse 72, heart was in normal sinus rhythm.
- The patient rated her pain as 7/10 if she pushed things too far. Her pain left with sitting.
- Supine, dorsiflexion and plantar flexion were 5/5

Physical Exam

- Quadriceps strength was 4/5 on the right and 5/5 on the left.
- Dermatomal exam was normal.
- The patient did exhibit limp on right leg and a slight flexion antalgia.

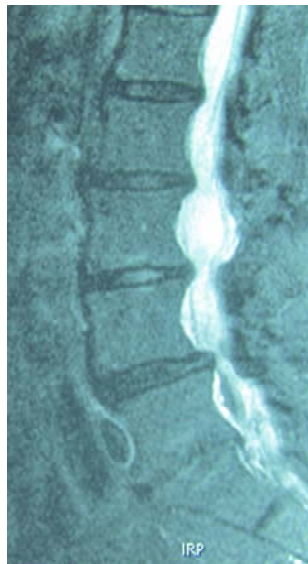
MRI

- 2009-L3/4-right foraminal disc protrusion at site of previous laminectomy compressing the exiting right L3 nerve root.
- L4/5-20% anterior subluxation L4 on L5. Disk dehydration and diffuse bulge. Bilateral facet hypertrophy and spurring.
- L5/S1- severe disc degeneration with complete loss of disc space height.

MRI

- 2010-Similar findings with further stenotic narrowing of the right L3/4 IVF.

MRI



MRI



Treatment

- The treatment plan was explained to the patient. We began with Protocol 1 with a contact at L3 only.
- We discussed the importance of tolerance testing and that she needed to inform us of any pain during treatment or increases after treatment.
- We also emphasized that we would not cure her of her back pain. Our goal will be to decrease her pain by 50% and to increase her ability to be on her feet so that she is able to maintain her independence.

Treatment

- She was treated three times per week for the initial two weeks.
- After two weeks she reported her right leg pain was reduced 50%. She rated her quadriceps pain as 3/10 and she was able to be on her feet working much longer before the pain began.
- She was doing her yard work again.

Treatment

- The patient had an exacerbation in the third week of left buttocks and hamstring pain trying to pull a hose to water her flowers.
- This settled quickly with two treatments.
- Her treatment was reduced to twice per week for two weeks.

Re-exam 1 Month

- The patient is no longer experiencing leg pain.
- She reports being able to do all her work again and that she has learned to sit and take a break if she starts to feel fatigue in her lower back.
- We will be extending her treatment out to once per month with instructions to return sooner if any leg pain exacerbates.

Conclusion

- Goal of Cox® Technic Certification Series
- 3000 Doctors of Chiropractic to represent the best clinicians in the profession to care for the 25% of back pain patients who account for 95% of the cost in suffering and dollars in the populus today.
- These post-surgical patients are going to be common-place in chiropractic offices and lumbar rolls are not going to serve this population.

Conclusion

- I don't pretend to know how to spark the interest of practicing doctor's, but I had the opportunity to sponsor two students from the National University of Health Sciences for a Part 1 Cox® seminar and their excitement learning this material was enlightening.
- Try to go back and remember your first acute disc patient and how ill-prepared you were for it. Consider sponsoring a student at your school of choice and paying for their seminar. Become a mentor and help grow Dr. Cox's work.

Conclusion

- This case is not remarkable for the result. We have all seen this with this work.
- The case is fascinating because the patient was so desperate for help that she returned to chiropractic after two terrible experiences.