

IMPROVED QUALITY OF LIFE FOR A COMPETITIVE 71-YEAR-OLD TRACK AND FIELD ATHLETE WITH LUMBAR SPINAL STENOSIS

presented by

Jeremy Heidt DC

Midwest Chiropractic

8941 Aztec Dr

Eden Prairie, MN 55347

(952) 303-4590

At the Interdisciplinary Spine Conference 2019 on Spinal Stenosis

September 28, 2019

INTRODUCTION

A 71 year old male with spinal stenosis presents with a stated goal by him to compete in the National Track and Field meet for his age group and be competitive as he has won multiple state championships prior. He presents with lower back pain that started as frequent, aching pain he rated as a 6 out of 10 (10 being the worst pain on the visual analog scale). He has bilateral leg pain into his glute and hamstring. The pain is worse with sitting for long periods which he does often due to his job.

HISTORY

He has experienced bilateral core muscle repair for a torn abdominal muscle and undergone radical prostatectomy. His past treatment has included physical therapy which involved running on a zero G treadmill, massage, acupuncture, stem cell therapy, prolotherapy to the hamstring and glute tendons, and work with a personal trainer.

IMAGING



Figure 1 L5-S1 T2 weighted image – sagittal

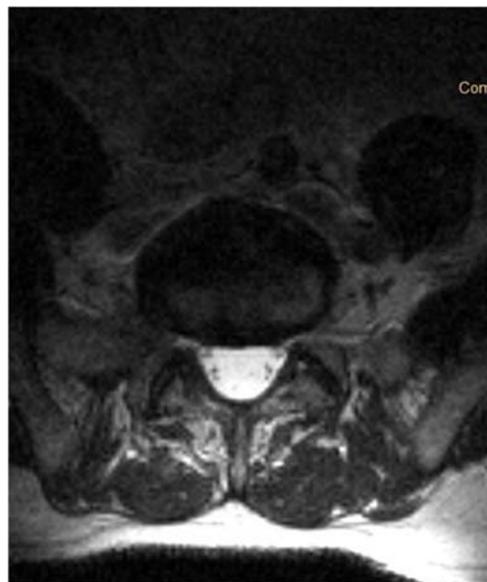


Figure 2 L5-S1 T2 weighted image - axial



Figure 3 L4-L5 T2 weighted - sagittal



Figure 4 L4-L5 Axial T2 weighted - axial



Figure 5 L3-L4 Axial T2 weighted



Figure 6 L2-L3 Axial T2 weighted

TREATMENT

Cox® Flexion distraction Protocol 1 was applied in a side lying position for comfort. The table's flexion motion allows lateral bending to the lumbar spine while the table's lateral motion allows flexion and extension to the lumbar spine. Home exercises for spinal stenosis, particularly isometric hamstring and glute exercises, were recommended. Acupressure points along the spine and sciatic nerve were massaged between the 3 sets of 5 four-second (manual flexion) pumps of Protocol 1. Electrical muscle stim-tetanzing current was applied to the spinal musculature after the treatment. Cox Technic Flexion



Distraction Protocol 1 in a prone position has also been used, but flexion and Y-axis was too much force for the patient. The Cox® Technic System guidelines dictate treating to and under patient tolerance to avoid any aggravation.

OUTCOME

His low back and leg pain is reported to be intermittent, ranging in pain from 2-4 out of 10 (10 being the worst pain), dull and stiff. He has what he terms “flare-ups” about every 2-3 months in which his low back and hamstring become hypertonic. These flare-ups respond well to Cox® Technic Flexion distraction in the side lying position. He can use the Zero G treadmill up to 70-78% of his body weight and is able to bike. He has plateaued at 78% of his body weight with running in the Zero G Treadmill which he would like to overcome yet.

DISCUSSION

This patient is a very motivated individual with whom I shared that “control not cure” is the goal of the treatment plan. He is amenable to this plan as he does not have time for a post op and recovery currently. The latest findings on minimal clinical improvement point to 30% as a goal for medical surgical intervention. (1) Cox Technic emphasizes 50% relief in a month (or so for more stenotic cases) while many patients attain such relief in less time and with higher percent relief. (2) Further, Cox Technic’s stated effects include decreased pressure in the lumbar intervertebral disc to as low as -192mmHg and increased spinal area by 28% and height by 17%. (3)

REFERENCES:

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