

LUMBAR SPINE DEGENERATIVE DISC
DISEASE WITH SPONDYLOLISTHESIS
TREATED WITH
COX® DECOMPRESSION ADJUSTING

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CASE HISTORY

- Female, 68 years old, 5'4" tall, 151lbs.
- History of diverticulitis, left kidney removed 1979, kidney stones, cholecystectomy 1981, leg cramps upon walking and low back pain with sciatica.
- Present complaint of low back pain radiating into buttocks. LBP is sharp, achy, started gradually, rated 8 of 10, frequent, worse when standing, lying down and sleeping. Unchanged for 1 year.

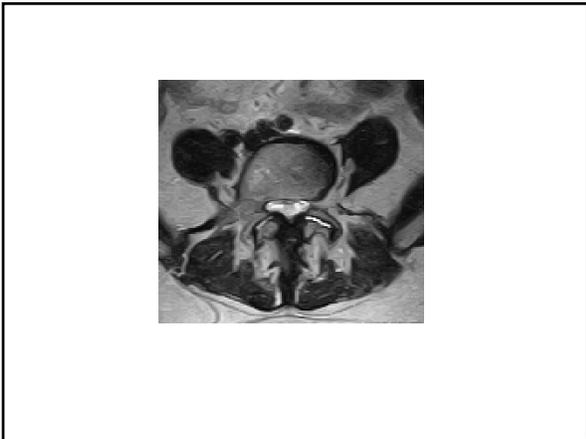
TREATMENT HISTORY

- Had prior medical care, chiropractic treatment, physical therapy and 3 epidural injections.
- Patient was concerned as all prior treatment has been ineffective. Worried about prospects for the future.

EXAMINATION FINDINGS

- Muscle spasms, tenderness L2-S1 and left GIO area.
- ROM lumbar spine: flexion 30°, extension 18°, RLB 15°, LLB 15° with pain.
- LE muscle strength and DTR were WNL.
- Spinal orthopedic: Bechterew, SLR, Braggard, Medial Hip Rotation, Yeoman, Ely's, Nachlas were + Lt, Prone lumbar flexion +.





TREATMENT PLAN

- Cox® Decompression Adjusting, 3x per week for 4 weeks with anticipated 50% clinical improvement.
- Pre-modulated electrical muscle stimulation, sitting.
- Home stretching program
- GS/CS had allergy to shellfish.
- Lift style modification.

CONCLUSION

- Patient tolerated treatment.
- Slight improvement after 4th treatment.
- After 12th treatment rated pain 1 or 2 of 10.
- Increased spinal ROM and flexibility, reduction in positive spinal orthopedic findings.
- Reduced treatment frequency now receives supportive care 1x per month.
- Enabled the patient to increase ADL's where she can care for herself.