

L5 S1 Disc Herniation Resolved with Cox® Technic

presented by
Dr. James Orphan

HISTORY 02/25/08

- ◆ 36 year old, white ,male, 5' 11" tall, weighs 260 lbs.
- ◆ 3 days prior, acute sudden, intense LBP/LP after bowling
- ◆ (R) Buttock & radiation to (R) anterior foot-pain parenthesis
- ◆ 1-10 pain scale: "8"

PAST HISTORY 05/23/07

- ◆ 1 year prior, patient complained of lower back pain with lower extremity involvement.
- ◆ Negative neurological examination
- ◆ Pain level
 - 1-10 pain scale: "8" with sharp stabbing pain
- ◆ Protocol 1-Flexion distraction manipulation resolved within 6 weeks

PHYSICAL EXAMINATION

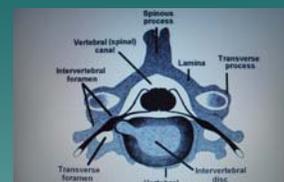
- ◆ Lumbar ranges of motion were measured with a Dueler Inclinator
- ◆ Marked decreased lumbar ranges of motion-excluding right/left rotation
- ◆ (+) Minor's Sign
- ◆ (-) Valsalva maneuver
- ◆ (+) Lindner's Sign
- ◆ Dejerine Triad (+) lower back/right leg pain
- ◆ (+) right Kemp's test for lower back pain, radiating down into right leg
- ◆ E/N sensory/motor exam

RADIOGRAPHS

- ◆ Prior radiographs were exposed on 05/25/07
 - Moderate L5-S1 disc degeneration
 - Normal thoracic/lumbar impressions

DIAGNOSIS

- ◆ Lumbago
- ◆ Sciatica
- ◆ Rule out space occupying lesion



TREATMENT

- ◆ Electrical muscle stimulation
- ◆ Hot/cold moisture packs
- ◆ Cox® Lumbar Lower Back Exercises
 - 1-3 pelvis stabilization
- ◆ Further Cox® exercises will begin as the patient's condition improves
- ◆ Nutrition:
 - Discat
 - Omega Complex



DISABILITY ASSESSMENT

- ◆ Roland-Morris Acute Low Back Pain Disability Summary
 - 50%

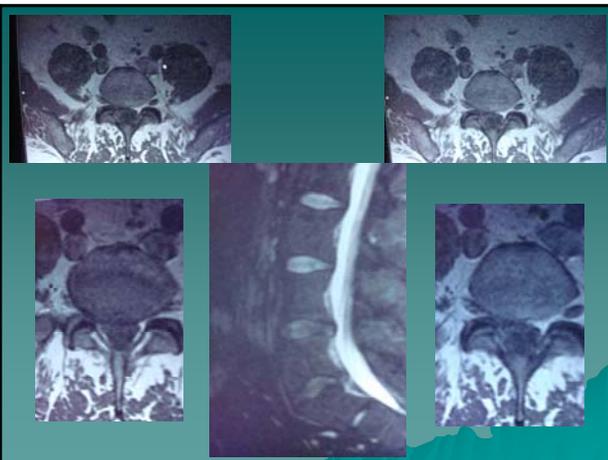
INTERIM-EVALUATION 03/07/08

- ◆ Patient states he fell twice: "Feels like I'm losing control of my right foot."
- ◆ Subjectively 60% improved with pain
- ◆ Dysesthesia L5 dermatome by stimulus testing of sensation of extremities
- ◆ Foot and great toe dorsiflexion decreased
- ◆ Weakness tibialis anterior muscle, extensor digitorum and hallucis longus muscles
- ◆ Paresis in heel walking (R) foot
- ◆ Continued Protocol 1



MRI

- ◆ Exposed on 04/07/08 of the Lumbar Spine
 - Small to moderate right paramedian disc extrusion at L5-S1
 - S1 extruded superiorly L5 vertebral body narrowing the (R) neural foramen at this level
 - Small central disc herniation L4-L5
 - Mild central stenosis and ligamentum hypertrophy



RE-EVALUATION 03/21/08

- ◆ Subjectively 80% improved
- ◆ Back pain dramatically reduced
- ◆ Mobility lumbar spine increased
- ◆ Decrease numbness
- ◆ Increase (R) foot strength 4/5

APRIL 2008

- ◆ 100% pain free/no paresthesia
- ◆ Dorsiflexion (R) foot 4+/5
- ◆ Patient is happy/lawyer not happy

Thank you!

James Orphan DC DACBO
Walpole, MA
508-668-5566