

## **SPINAL MANIPULATION**

### **What is spinal manipulation?**

Spinal manipulation is a physical therapy and may be practised by doctors, osteopaths, physiotherapists or chiropractors.

This is a patient-centred system of healthcare, which means it is tailored to the individual needs of the patient.

### **What does spinal manipulation involve and how it work?**

Spinal manipulation increases the mobility of spinal and peripheral joints and relieves muscle spasm. The intended benefits of treatment are to reduce pain and improve function.

### **What are the side effects and risks of spinal manipulation?**

Reviews have concluded that spinal manipulation is very safe when performed by a trained and qualified clinician. The most common side effects are generally minor and include feeling tired or experiencing temporary soreness for a few days following treatment.

In people whose pain is caused by a herniated (slipped) disc, manipulation of the low back appears to have a very low chance of worsening the herniation.

Reports indicate that cauda equina syndrome (CES), a significant narrowing of the lower part of the spinal canal in which nerves become pinched and may cause pain, weakness, loss of feeling in one or both legs and bowel or bladder problems may be an extremely rare complication of spinal manipulation. However, it is unclear if there is actually an association between spinal manipulation and CES, since CES usually occurs without spinal manipulation.

Stroke or paralysis in susceptible patients is a serious and very rare risk associated with specific spinal manipulation of the neck. However, this only occurs once in about 2.5 million treatments.

## **SOFT TISSUE MOBILISATION TECHNIQUES**

Soft tissue mobilisation covers a range of treatments which aim to improve the mobility of stiff, immobile soft tissues and those with poor circulation due to inactivity or increased tension. It is also used to help mobilise scar tissue, thereby preventing long term recurrence of inflammation.

### **What are the side effects and risks of soft tissue mobilisation?**

Some soft tissue mobilisation techniques can be quite uncomfortable as the affected tissues are treated, particularly if they are very tight, or very deep structures. If you keep the practitioner informed throughout the session, they will be able to guide treatment to a level that you are able to tolerate.

Occasionally, some people experience a degree of soreness for a few days following treatment.

### **DRY NEEDLING/ INTRAMUSCULAR STIMULATION (IMS)**

Dry Needling uses acupuncture needles to treat myofascial trigger points. A myofascial trigger point is an irritable/tender point which appears as a taut band or nodule in the soft tissues and which may also refer pain to other areas. Myofascial trigger points can be established by the trauma that occurs during injury from accidents, sports, occupations and disease. They can also be caused by long term or repetitive strain on muscles from poor ergonomics, posture and repetitive movements. Physical or emotional stress frequently aggravates trigger points. Myofascial pain accounts for as much as 85% of the pain people suffer from and acute and chronic myofascial pain due to trigger points is a very common condition.

#### **What does IMS involve and how does it work?**

During the procedure, a sterile, very thin, solid filament needle is inserted into the affected soft tissue(s). The number of needles and the frequency of the procedure will depend entirely on your condition. The aim of inserting the needle is to desensitise the hypersensitive tissues to restore normal tissue function.

#### **What are the side effects and risks of IMS?**

There may be some discomfort during the procedure which can be followed by some localised soreness for a few days following treatment.

Pneumothorax (lung puncture) is an extremely rare complication. The British Acupuncture Society states that there are on average about 3.5 million treatments a year involving acupuncture needles with treatments administered by traditional acupuncturists, doctors and physios and one case is reported perhaps once every two or three years.

As with any procedure which involves puncturing the skin, infection is also a potential, although extremely rare complication of this treatment.

Before proceeding with IMS treatment, please let the practitioner know if:

- You have a fear of needles, a genetic bleeding disorder
- A history of a blood disorder that can be transmitted to another person or
- Are regularly taking any blood thinning medication (for example, Coumadin or Warfarin)

## **SELF HELP TECHNIQUES**

As part of your overall management plan, you may be prescribed exercises to do yourself, or perhaps a self-taping technique. For greatest effect, please try to ensure that you follow the technique that has been demonstrated to you correctly.

### **Exercise Prescription**

Your practitioner will demonstrate the exercises for you and will tell you how many and how often to do these. It is important that you follow these instructions as carefully as you can. Forgetting or not making time to do your exercises is likely to make this part of your treatment ineffective. However, being over-ambitious and doing more than has been recommended can also overload the tissues and can be detrimental to your symptoms

Exercises designed to strengthen tissues can cause an ache whilst you are performing them and this is perfectly normal and is a sign that the tissues are working hard enough to achieve strengthening. However, exercises should not be extremely painful. If you can imagine a visual analogue pain score where 1 is an extremely minor ache/pain and 10 is the most severe pain we would normally recommend that no exercise should cause you pain of more than a score of 3/10. If the exercise causes you to experience more severe pain than this, please stop the exercise and speak with your practitioner.

### **Taping regimes**

Taping regimes can be used to offload certain structures to aid recovery of the musculoskeletal problem. In addition, taping techniques are sometimes used in postural retraining programmes to encourage good posture.

Occasionally a person may suffer a skin reaction to the tape or the adhesive on the tape. In some cases, it is possible to use a barrier product to protect the skin before applying the tape. However, in cases where the skin becomes extremely irritated, it may be necessary to discontinue taping.