

IDENTIFYING CHIROPRACTIC APPROACHES TO MANIPULATION IN PATIENTS WITH SPONDYLOLISTHESIS

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OBJECTIVE: The objective of this study is to identify the manual manipulation methods utilized by doctors of chiropractic on patients who have a known lumbar spondylolisthesis.

METHODS: Eighty-three (N=83) doctors of chiropractic were asked the open ended essay questions “Do you adjust at the level of the spondylolisthesis slippage, and what technique approach do you use?”

RESULTS: The respondents identified the most common level of care was applied around the level of the spondylolisthesis (N=50) 61.00%, with 11% adjusting at the level (N=9) of the spondylolisthesis. 13% (N=23) respondents did not answer the question or did not provide enough information to determine their approach. There were 104 responses to question regarding the technique they utilized because many doctors identified more than one technical approach. Seven different categories of manipulation approaches were identified. Drop piece (D/P) technique (N=37) 36% was the most common response followed closely by a diversified approach (N=32) 31%. Other common approaches included flexion distraction (N=13) 12%, sacral occipital technique (N=6) 6%, instrument (N=6) 6%, and self-created techniques (N=2) 2%, 8% (N=8) did not respond to the question. D/P approaches included both anterior to posterior and posterior to anterior correction vectors.

CONCLUSION: In this small study the most common level doctors of chiropractic adjusted patients with a spondylolisthesis lesion was around but not at the level of the lesion. The most common chiropractic techniques identified for patients with spondylolisthesis were drop-piece and diversified techniques.