

2013 Part 3 Cox® Certification in Maui

Case Report

**Moderate Adolescent Idiopathic Scoliosis (AIS) while being braced, now presents with lumbar disc disorder with sciatica, treated using Cox® Technic Protocols.**

*By: Dr. Mike M. Poulin, D.C.*



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History

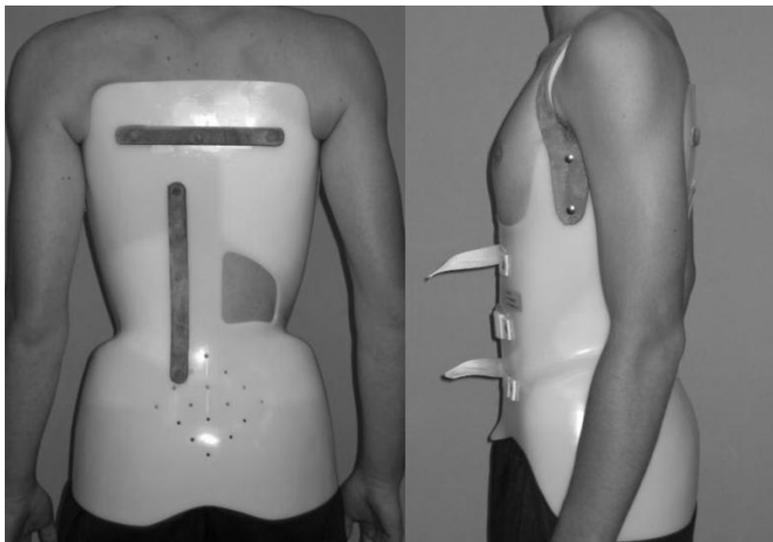
Prior to Presenting to Us

- 14 yr. old Caucasian male – High school Freshman
- Scoliosis 1<sup>st</sup> diagnosed Onset: 7/6/11
- Treated by Dr. Jeffery Hanway, MD (Orthopedic surgeon specializing in scoliosis at Children's National Medical Center in Washington, DC).
- Was fitted on 7/28/11 for his brace. He began wearing the brace 10-14 days.

## History Prior to Presenting to Us (cont.)

- Luke S. is clinical practitioner exclusively specializing in scoliosis treatment. Completed his orthotic training at Northwestern University in Chicago in 1987. He is an Associate Fellow with the Scoliosis Research Society and a founding member of the SOSORT (International Society on Spinal Orthopedic and Rehabilitation Treatment). He currently serves on the editorial board for the Scoliosis Journal and is a member of the BRAIST Bracing Evaluation Committee.
- Luke has studied with Manuel Rigo, MD, from Barcelona, Spain. He has collaborated with Dr. Rigo and continues to pursue integrating the Rigo-Cheneau concepts and principles into the Scoliosis Solutions brace design.

## Rigo-Cheneau Brace



## Rigo-Cheneau Brace (cont.)

- Current guidelines =  $>30^\circ$
- Patient began wearing brace 23 hours a day.
- Only taking off brace for bathing.
- Was reduced to 21 hours a day and now patient wears brace 16 hours a day.
- Compliance is now an issue due to patient being 14 years old.

## Chief Complaint

- No previous LBP or leg pain prior to this episode.
- Presented on 1/17/2013.
- 2-3 weeks of minimal LBP but left leg "zinging" dull, ache pains to his left knee with associated tightness.
- LBP "1" and left leg "zinging" was a "5-6" on 0-10 V.A.S.
- His condition was aggravated with standing and picking up things.
- Pain was reduced when he laid down on his back.

## Examination Findings

### Abnormal findings:

- - Dejerine's
- + Kemp's
- Normal Deep Tendon Reflexes and Muscle Strength
- + All lumbar R.O.M. were painful and limited radiating pain down his left lateral leg to his knee (S1).
- + Left Lumbar area especially left of L4 and L5 were painful on palpation and percussion.
- Mild muscle spasms and tightness noted in lumbar spine.

## X-ray

T1-T8  
28°

T9-L3  
34°



## Diagnosis

- 722.10 Lumbar disc disorder
- 722.52 Lumbar disc degeneration (Mild)
- 737.30 Idiopathic Adolescent Scoliosis
- 724.3 Sciatica
- 739.4 Sacroiliac Segmental Dysfunction
- 728.85 Muscle spasm

## 1<sup>st</sup> Treatment

- On first visit after: consultation, exam, review of x-rays brought in by patient, and brief R.O.F., and then Cox<sup>®</sup> Disc Decompression of the lumbar using Lumbar Cox Protocol 2 after tolerance testing. Cox<sup>®</sup> decompression with small 2-3" Dutchman roll.
- Protocol 2 was utilized since sciatica was only down to the knee.
- Thompson drop adjustments were done P-A. Side posture was utilized for both SI joints that were also subluxated.
- Electrical stimulation was not utilized due to patient's extreme fear of electrical treatment.
- Patient laid supine on ice for 10 minutes with knees elevated.

## Recommendations

- 3x a week for 4 weeks
- 2x a week for 3 weeks
- As patient continues to improve, treatment is expected to get to 1x a week every 2-3 weeks, due to sitting and carrying heavy backpack.
- Goal: Have patient's spinal complaint and symptoms 50% better by 12<sup>th</sup> visit. If so, will be given Red Sheet of 10 LB exercises, 1-6.

## Recommendations and Homework

- Icing instructions for home, 20 minutes on and 20 minutes off, 2 times per day.
- Sleeping with knee elevator
- 1200 mg of Calcium Citrate with D3.
- Discat Plus capsules 4 in am and 4 in pm with food for 3 months, then 2 in am and 2 in pm.

## 2<sup>nd</sup> Treatment

- On second treatment patients symptoms were 50% better
- Cox<sup>®</sup> Disc Decompression of the lumbar using Lumbar Cox Protocol 2 with large 5-6" Dutchman roll.
- Gentle side posture adjustments were utilized for both SI joints that were also subluxated, probably secondary to patient's compressed disc and scoliosis.
- Patient laid supine on ice for 10 minutes with knees elevated.
- Cox<sup>®</sup> low back and leg pain report of findings (ROF)

## Cox<sup>®</sup> Low Back and Leg Pain Report of Findings (ROF)

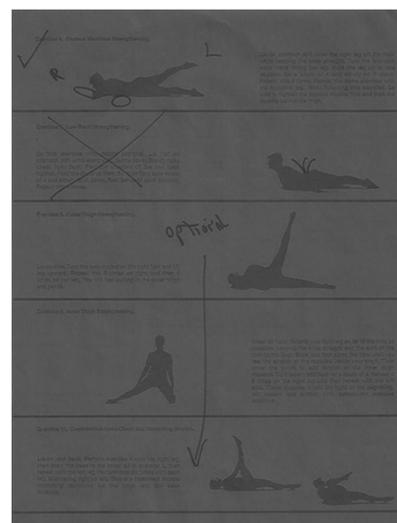
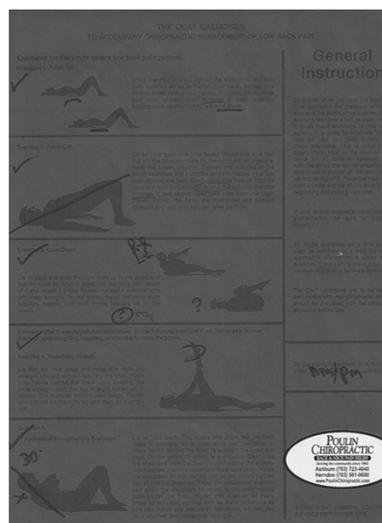
- Page 24 – scoliosis
- 10% of people
- 7x more in girls than boys
- 4x more osteoporosis

*Thank you for consulting your chiropractic professional in the diagnosis and care of spinal conditions.*

## 12<sup>th</sup> Treatment

- On 12<sup>th</sup> treatment patient had maintained 50% better, even with some good days and some bad.
- Cox<sup>®</sup> Low Back Red Sheet of 10 Exercises was given.
- Patient was shown link on our website to the video that thoroughly shows low back exercises done properly.
- <http://www.poulinchiro.com/>

## Cox<sup>®</sup> Low Back Exercises



## Follow-Up

- Patient on 3/15/13 was on treatment 16 and his pain was down to a rare intermittent "1", over 85% better.
- Next week patient goes back to orthopedic for annual review and x-rays.
- Patient is now down to 1 treatment every 2 weeks.
- Next visit will update us on orthopedic visit and x-rays.

- Questions?
- Thanks for your time.