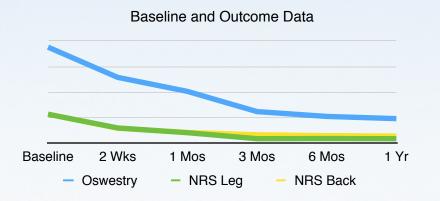
Outcomes of Acute and Chronic Patients with Magnetic Resonance Imaging-Confirmed Symptomatic Lumbar Disc Herniations Receiving High-Velocity, Low-Amplitude, Spinal Manipulative Therapy: A Prospective Observational Cohort Study with One Year Follow-Up Journal of Manipulative and Physiological Therapeutics. Volume 37, Number 3. March/April 2014



90.5 % of Patients Reported Being "Much Better" or "Better" at 3 Months

Lumbar disc herniation with radiculopathy often results in significant disability, societal cost, and missed work. Previous research has proven that spinal manipulative therapy produces outcomes equal to microdiscectomy, and better than epidural steroid injections', for lumbar disc pathology.

In this study, all patients exhibited an abnormal physical exam with radiculopathy. Their diagnosis was then confirmed by MRI. This research is very encouraging because both the acute and chronic patients exhibited improvement with spinal manipulative therapy.

As we know, long term improvement must include an active care component or relapse is likely. However, the first step is providing care through the acute and sub-acute stages. By providing evidence-based chiropractic care in coordination with their primary care providers, patients are able to achieve the best possible results and superior long term outcomes.

"At 2 weeks after the start of treatment, a large proportion of patients reported substantial "improvement", with the percentage reporting "improvement" increasing at 1 (79.6%) and 3 (90.5%) months."

"...chronic patients continued to report higher percentages of "improvement" at both 6 months (88.6%) and 1 year (89.2%)."

"There were no adverse events reported due to SMT applied to the patients with MRI-confirmed, symptomatic lumbar disc herniation."

We believe in creating a healthier community. We believe patients have better outcomes when physicians work together. Let's build a healthier tomorrow.