

Lumbar Spine Disc Herniation without Myelopathy:

*The Importance of Patient Compliance
for Optimal Clinical Outcomes*

Shay W. Corbin DC
Presented at Part III Cox® Seminar
October 2011

1

History : September 19, 2006

- 41 year old male
- Lower back and left leg pain; “constant sharp pain in back and leg”
- 10 years earlier GSW to left hip; treated and released minimal intermittent trouble
- Three months prior lifting; felt pull in back resulting in LBP then two weeks later LLE pain
- Pain currently 8/10
- Treated with medication; minimal relief

2

Positive Exam Findings

- Minor’s sign LBP and LLE pain when rising
- Bechterew’s left local LBP some left hamstring pain
- SLR 60 degrees SI joint and left Gluteal pain
- Kemp’s test left LBP and left gluteal/hamstring pain
- Right and forward antalgic lean
- Pain with extension “can’t straighten up”

3

Diagnosis

- 722.73 - IVD w/o Myelopathy; Lumbar Region
- 721.3- Lumbar Spondylosis w/o Myelopathy
- 846.0- Lumbosacral Sprain/Strain

4

Treatment

- Cox® Technic Protocol 1: started 9-21-06
- Treated 4 visits.
 - Added Bridge, glute and piriformis stretches
 - All were tolerated well
 - About 15 percent improvement
- MRI ordered by MD
- Protocol 1 continued for another 3 visits radicular pain and LBP 40% improved
- MRI performed missed two weeks appointments

5

MRI Results

LSU Radiology Reports Page 1 of 2

Patient Name: [REDACTED] MRN: [REDACTED]
Age: [REDACTED] Sex: [REDACTED]

EXL - Earl K. Long Medical Center
802 South Highway
Baton Rouge LA 70805

Radiology **MR** **Spine Report**

Ordering Physician: NEAL, CLEMENT Order Date: 11/17/06 08:00:00
Referring Physician: [REDACTED] Performed Date: 11/02/06 16:44
Referral Status: [REDACTED] Dept: [REDACTED]
Task Type: MIS LUMBAR SPINE W/O CD

LOS MEDICAL CENTER, 802 S. HIGHWAY 802 SOUTH HIGHWAY, BATON ROUGE, LA 70805

RADIOLOGY REPORT

PATIENT: [REDACTED]
MRN: [REDACTED]
DOB: [REDACTED]
EXAM TYPE: LUMBAL SPINE MRI WITHOUT CONTRAST
EXAM INDIC: L1-L5/CD
INDICATOR CODE: 4313415
CLINICAL HISTORY: Low back pain.
FINDINGS:
L1-2 DISK: Normal.
L2-3 DISK: Normal.
L3-4 DISK: Normal.
L4-5 DISK: Normal.
L5-S1 DISK: Shows mild degree of left-sided disk bulge resulting in moderate left L5-S1 neural stenosis.
PATIENT HAS A DEMONSTRATION OF PARTIAL COMPRESSION OF NERVE ROOT WITH A SMALL [REDACTED] [REDACTED] L5-S1 DISK.
No focal mass demonstrated at the L1 spinal canal.
IMPRESSION:
Mild left-sided L5-S1 disk bulge with moderate left L5-S1 neural stenosis. No evidence for lumbar disk retraction nor cerebral spinal stenosis in the lumbal spine.

Printed by 4204175 on 7/1/11 10:04:16 AM

Treatment Continued

- Advanced to Cox® Technic Protocol 2 and tolerated well, 8 more visits over 5 weeks
- Advanced exercise protocol tolerating knee to chest and superman's
- Now has local intermittent pain and LLE pain only with certain motions
- Functional ADL increase without pain

7

Treatment Continued

- Patient doing well and drops care for 3 months and does not complete corrective care plan.
- Patient returns with left lateral lower leg pain and left gluteal pain.
- Care resumes and tolerance test for protocol 2, stays the course this time
- 12 visits with progressive improvement, finishes corrective care over the next four weeks and goes to wellness care.

8

Wellness Care

- Patient maintains wellness program with good relief, intermittent care for left SI joint pain no radiculopathy recurrences.
- Continues intermittent light rehab program of exercise shown in clinic
- Patient curious about disc, and we were able to get approval for follow up MRI.

9

MRI Results

L5/S1 Radiology Reports Page 1 of 2

Patient Name: [REDACTED] MRN: [REDACTED]
Age: [REDACTED] Gender: [REDACTED]

Ref: Earl K. Long Medical Center
3025 Airline Highway
Baton Rouge, LA 70805

Radiology [\[E\]E Share Panel](#)

Ordering Physician: [REDACTED] Order Date: 01/12/2008 09:00:00
Referring Physician: WEL, CLEMENT Performed Date: 01/12/2008 19:00
Priority Status: [REDACTED] Result Date: 01/12/2008 19:00
Referral Status: [REDACTED]
Test Type: [REDACTED]

REF: [REDACTED] L5/S1
DATE: [REDACTED] TIME: 09:00

EXAM TYPE: L5/S1 MR WITHOUT CONTRAST
EXAM CODE: 81122000
ANATOMY CODE: 81121015

CLINICAL HISTORY: Low back and left leg pain.

FINDINGS:
L2-3 is normal.
L3-4 is normal.
L4-5 is normal.
L5-S1 disc normal.

IMPRESSION:
Lumbar vertebrae: The patient has a transitional for partial laminae L1 vertebra with no herniation appearing secondary L1-2 disc space.
Transvertebral lumbar spine MRI examination. No evidence of disc protrusion or spinal stenosis.
Transitional or partially laminae L1 vertebra.

Printed by 4204375 on 7/1/11 10:04:10 AM

Normal MRI

- Patient was surprised by results.
- No recurrence of left lower extremity
- Signs and symptoms now make sense to patient
- SI joint pain explained secondary to previous Gun Shot Wound to left hip and weakness that comes and goes.

11

Conclusion

- We see patients like this all the time. They drop the care plan when doing well, come back when they realize care plan was for a reason.
- Pain is a good motivator for compliance.
- Thought: *What if herniation wasn't gone? Could the patient experience the same result?*

12