

## When Will I Be Better?

### We Must Work Together.

Since there are many causes of back and leg pain problems, your doctor will be most conscientious in diagnosing your specific condition. On the first visit, the doctor's job is to perform a thorough examination, including x-rays if necessary, to accurately diagnose your condition and outline the treatment protocol best for your back problem. Your treatment regime should begin promptly.

The rule of thumb is that **you should feel 50%** (less for certain serious conditions in which 30% can be good - Konstantinou K et al, *The Spine J* 2018;18(6):1030-40) **relief of your back or leg pain symptoms within 3 to 4 weeks of continued, cooperative care.** Periodic re-exams will track and document your progress. If you do not show signs of 50% relief within 3 to 4 weeks, a referral for neurosurgical consultation or further testing may be made.

You must follow the instructions for care at home:

- Do not sit!
- Wear a back brace if recommended.
- Use hot and cold pack therapy.
- Take nutritional supplements as recommended.
- Do the exercises as directed.
- Do not work if your job can be aggravating to your back condition.
- Come to your appointments to receive the full benefit of your doctor's treatment protocol.



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# Treatment of the Lumbar Spine

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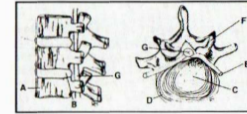


## The Lumbar Spine

### Back Pain and Sciatic Leg Pain

Vertebrae (A), discs (B), nerves (E), articulations (F), and a spinal cord (G) make up your spine. Any of them could become a source of pain in an accident, in doing an everyday activity or in playing a sport.

The vertebrae (A) are the bony parts of your spine: the ones that you can see and feel up and down your back. They are sensitive. They become even more sensitive if a disc (B) that separates them "slips" or "degenerates" due to lack of nutrition, deterioration, or injury.



If the disc "slips," the inner nucleus (C — a gel-like material) escapes into the annular fibers (D — rubberband-like and elastic so as to allow spinal movement) and can cause just low back pain or press back into the spinal canal to compress a nerve (E) which causes pain down the leg where the nerve travels. This leg pain is called sciatica. Cox® Technic may gently open the disc space enough to give space for the nerve to "breathe" and not cause pain.

Nutrition can play a part in your back pain treatment. Research shows a loss of some nutrients within the disc before degeneration occurs, so you may be given supplements to aid in your healing.

### What Is Cox® Technic? (aka Cox® Technic Flexion Distraction Decompression [CTFDD], flexion-distraction, FD)

Cox® Technic is non-surgical, non-hospital, gentle, well-researched, well-referenced, hands-on chiropractic spinal adjusting manipulation for decompressing spinal nerves and treating spine pain. It dropped intradiscal pressures to -192 mmHg and increased the foraminal area. Further, Cox® Technic realigns and restores ranges of motion inherent to the spine while reducing low back pain, especially in radiculopathy patients, better than active exercise therapy. (Gudavalli et al, *Integ Med Reports*. Nov 2022.209-214)

### Flexion-Distraction Relieves Back Pain Better Than Medical Conservative Care

Further, the *European Spine Journal* \* published results of the US Health Resources and Services Administration-funded comparison study between chiropractic care (flexion-distraction) and medical care (active exercise physical therapy) for low back pain. It reports that "patients with radiculopathy (leg pain) did significantly better with FD," that subjects randomly allocated to the FD group had significantly greater relief from pain than those in the exercise program, and that "overall, FD provided more pain relief than active exercise."

\* *European Spine Journal* 2006; 15: 070-1082

Motion is usually lost when in pain. A healthy spine and its joints have five motions: flexion, extension, lateral (side-to-side) flexion, rotation, and circumduction (circular motion). The goal is to return healthy, painfree motion to the spine.

Further, to help the disc(s) assume a more normal position, to help the spine regain its lost motions, and to enhance muscle and ligament healing with minimum scar tissue damage, Cox® Technic is the treatment of choice.

According to a **study of 1000 patient cases of back pain** treated by 30 different chiropractors, 93% of whom used the Cox® Technic to care for the patients' back pain, this technique is successful and well tolerated by patients according to their responses to the technique:

Excellent	47%
Very Good	14%
Good	10%
Fair	7%
Poor	4%
Surgery	4%
Stop, Did Not Start Care	10%
Examined, Not Treated	4%

Maximum Improvement  
average number of days - 29 days.  
average number of visits - 12 visits.

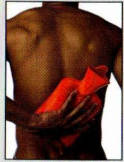
(The statistics are from *Topics in Clinical Chiropractic* 1996, 3(3):45-59, 79-81.)

# COX® TECHNIC FLEXION DISTRACTION DECOMPRESSION (CTFDD)

documented treatment protocol for low back and leg pain through all the stages of healing

## The Healing Process

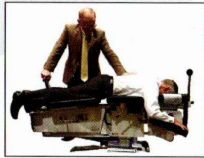
**Stage One** — The first 72 hours after your back injury are important to reduce inflammation using ice and/or electrical stimulation on the affected areas.



The doctor will do a thorough examination which may include any or all of the following: a history of any back and health problems in your past or your family's past; physical, orthopedic, and neurologic testing; and x-ray. (Bring any MRI's, x-rays, CAT scans, myelograms, etc., that you have had taken recently.) When the examination is complete, your diagnosis and suggested treatment plan will be shared with you and your family.

**Stage Two** — For up to 6 weeks, your body begins to heal itself and is the most crucial to your back's future health. You should feel and sleep better.

The injured muscles and fascia between muscle layers heal with scar tissue which forms differently than normal tissue. This scar tissue is not as strong or elastic as normal tissue. **DON'T BE DISCOURAGED** if pangs of the *old* pain return. It is natural and makes it important to continue working with those muscles in a controlled fashion - using Cox® Technic CTFDD, physical therapy, exercise, electrical stimulation, hot/cold therapy, etc. - to regain pain-free, pre-injury movement with strength and full range of motion.



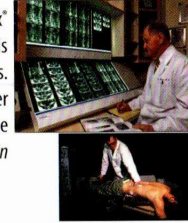
**Stage Three** — For 6 weeks to 12 months, your spine continues to heal. You should continue as instructed in Stage 2. It is very important to continue rehabilitation and exercises. Research shows that patients who continue rehabilitation even after "feeling better" have less scar tissue formation and have more strength, flexibility, better cartilage nutrition, & less chance of recurrence of injury.



Less than 1% of 497,822 patients with symptomatic lumbar stenosis or spondylolisthesis required spinal surgery. (Adogwa, Spine 2019; 44(6):424-30)

## The Research

Close to 50 years of research, experience, and technology have contributed to the development and evolution of Cox® Technic. 63.7% of chiropractors report that they use this technique. 25% of chiropractic patients receive care with this technique. (National Board of Chiropractic Examiners) Chiropractors, engineers, and researchers continue to document its benefits. The latest findings from the federally funded research projects at the National University of Health Sciences, Palmer Research Center, and Loyola Stritch School of Medicine/Hines VA show that flexion-distraction (FD) (Cox®) technique allows (1) a reduction of intradiscal pressure, (2) an increase in intervertebral disc height, and (3) an increase in intervertebral foramen size. Other authors and researchers (More can be read at [www.coxtechnic.com](http://www.coxtechnic.com).) report:

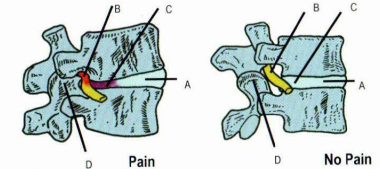


- Flexion distraction (CTFDD) significantly reduced intervertebral disc pressures which may draw a protruded nucleus pulposus back to the disc's center and allow for nutrient flow into the disc. (Gudavalli et al, Integrative Medicine Reports, Nov 2022, 209-214)
- In the randomized, clinical trial funded by the U.S. Health Resources and Services Administration, patients with radiculopathy did significantly better with FD. Overall, FD provided more pain relief than active exercise. (Gudavalli et al, Euro Sp, 2006; 15:1070-82)
- One year later, chiropractic participants attended significantly fewer healthcare visits than those who received physical therapy. (Cambron et al, Osteopathy & Chiropractic, 2006; 4:19)
- 13 of 18 low back patients felt greater positive effect of FD over placebo. (Hawk, JMPT 1997 Feb; 20(2):73-9)
- Relief for post-surgical continued back pain is reported in 12 treatments (mean) in a study of 32 post-surgical patients. (Krusc, Cambron, JMPT 2011; 34(6):408-12; One such patient reports pain as "0" after 13 visits. (Krusc, Cambron, JChiro Med 2011; 18(4):251-60)
- A retrospective study of 69 post-surgical continued back pain patients treated with CTFDD reported that 81% had more than 50% relief of pain in 49 days and 11 treatments. At 24 months, 82% did. Mean percent of relief was 71.6%. (Gudavalli et al, JCM 2016; 151(3):121-8)
- FD is rated as an "Established" technique, one of only two techniques in chiropractic with this rating. (Merzy Ctr Consensus Conference on Chiropractic Practice)
- "Only Cox" flexion-distraction technique...has been described in a reviewed text & a number of well-respected, peer-reviewed journals." (Bergman, JMPT 1993; 16(1):33-37)
- A 61 year old bedridden female with low back, hip, and sciatic pain for five years reports no leg or back pain and is able to walk and function again after just 4 weeks of Cox® treatment. (Hayden, Georgia Chiropr., 1996)
- FD resulted in at least 50% low back pain improvement as well as better function than high velocity low amplitude manipulation for back pain sufferers. (Carrasco-Martinez et al, Comp Therapies Medicine 2019; 44:61-7)
- 80% of cervical and lumbar spine disc herniations were helped by FD adjustment. 63% showed MRI reduction in size. (Eliyahu, JMPT 1996; 19(9):597-606)
- After 5 years of low back pain, leg pain and testicular pain, a patient finds relief of varied symptoms with Cox® Technic in 1 to 19 treatments. (Rowell, Rylander, J Altern Complement Med 2012; 18(4):420-422)
- Physicians train with real-time feedback force sensing technology to learn the feel of proper force application for optimal clinical results. (Gudavalli, Cox, J Can Chiro Assoc 2014; 58(2):193-197)
- FD manipulation appears to be an effective intervention for pain and disability among patients with lumbar spinal stenosis. (Choi et al, J of Physical Therapy Science, 2015; 27(6):1937-38)
- After 3 years of pain, a patient finds relief of back pain related to synovial cyst in 4 visits, 80% relief in 3 months. (Cox, J Chiro Med 2012; 11(1):7-15)
- Surface EMG studies revealed a decrease in asymmetry ratios of low back pain patients after FD treatment. (Hwang, J Korea CHUNA, Man Med 2006; 5:243-249)
- FD - described as 'low velocity low amplitude' SMT - resulted in short-term, remote antinociceptive effect on pain in a rat study. (Onifer et al, Evid Based Complement Alt Med 2015; 20:56-67)
- In 16 treatments, a chronic low back pain patient unable to lie prone responded well to modified Cox® Technic FD treatment delivered in a side-lying position reduced pain, improved sleep, increased mobility. (Scialano et al, J of Contemp Chiro 2021; 4(1):35-39)
- CTFDD treatment provided significant improvement of balance confidence and postural sway in lumbar spinal stenosis patients (average age: 83.5 y/o). (Smith, Olding et al, J of Bodywork & Movement Therapies 2022; 32:56-67)
- Initial ultrasound studies of CTFDD measured spinous process separations at L3L4, L4L5, L5S1. (Gudavalli/Krusc poster at NCMPT May 2022 and Gudavalli poster at North American Congress on Biomechanics in Ottawa, August 2022)

## The Benefits of Cox® Technic

Cox® Technic creates a "push, pull, pumping" effect on the intervertebral disc space and allows these documented benefits:

- Increases the intervertebral disc height to remove tension on the annular fibers and the spinal nerve by making more room and improving circulation;
- Drops pressure within the nucleus pulposus of the intervertebral disc;
- Increases the area of the intervertebral foramen up to 28%;
- Restores vertebral joints to their physiological relationships of motion (realigns the spine).

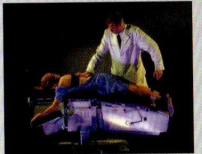


Less than 5% of patients with low back and leg pain require surgery. (Johnson, Arch Phys Med Rehabil 1981)

## The Cox® Technic Protocol

Some patients are heard to say "Oh, I wish someone could just pull me apart!"

This technique does just that and much more in a safe, controlled manner.



This technique is a gentle, non-force procedure which aids the spine in healing properly and to ensure a painfree future. Cox® Technic is the well-documented, researched, proven effective, non-surgical technique for decompressing spinal nerves & treating low back pain.

During treatment on this instrument, you will lie on your stomach (above or, as pictured at the left, on your side if pregnant or in acute pain) while the doctor manipulates your spine to relieve nerve pressure.

The doctor may use the instrument's caudal (the part the legs lie on) section to allow lateral motion (to the side as shown in the picture to the right) & circular motion which returns normal motion to the spine with reduced pain.

LUMBAR SPINE PAIN CONDITIONS: Spinal Stenosis | Disc Herniation | Headache | Sciatica | Facet Syndrome | Back Pain | Leg Pain | Post-Surgical Continued Pain (FBSS) | Spondylolisthesis | Tropism | and others...