

Spondylolisthesis

A new approach to the upper cervical specific, knee-chest adjusting Procedure: Part I Kessinger, RC; Boneva, DV; *Chiropractic Research Journal* 2000 SPR Vol. 7(1) Pgs. 14-32

This is the case of a 30-year-old man who had indigestion, low back pain, and a spondylolisthesis L5/S1. His examination indicated a C1 subluxation. Patient received the upper cervical knee-chest procedure described in this paper. Patients receiving this care repeatedly demonstrated correction of their upper cervical subluxation via pre and post Blair protracto x-ray views, spinal thermography, and pelvic balance leg length equality examinations.

Spondylolisthesis correction of the 4th on 5th lumbar vertebra. Henderson S., *Journal of Chiropractic Case Reports* Vol 1 Issue 1 Jan 1993.

From the abstract:

A 56 year old female presented with low back, left buttock and left upper leg pain as well as pain and stiffness in the neck and shoulders. A standing lateral lumbo-sacral X-ray revealed a normal lordotic curvature with no measurable subluxations.

The seated lateral lumbo-sacral x-ray revealed that there was a complete loss of the lumbar lordosis with a grade 2 spondylolisthesis of the 4th lumbar vertebrae on the 5th, and a 90% loss of the cervical curve. Adjustive and rehabilitative procedures were initiated and continued for a period of one year. At that time, all ranges of motion were normal and pain free. Orthopedic and neurological tests were normal.

A 75% improvement in the cervical lordosis was seen in the seated 5-view x-ray series. Lateral lumbo-sacral x-ray revealed that there is now a normal lordosis and that the spondylolisthesis of 4th on 5th lumbar is now completely corrected.

Spondylolisthesis in today's chiropractic: a case report. Foster A, Ferrell RG, Foster P, *ACA Journal of Chiropractic*/November 1990.

This is the case of a 48-year-old male with a recent trauma with severe low back pain, headaches, constipation and excessive gas as chief complaints. The patient had 21 adjustments over a 9 week period with marked improvement of the patient's complaints.

From the abstract:

A case of lumbar facet capsulitis and right hip arthritis coexisting with a symptomatic grade 11 spondylolisthesis is presented. Therapeutic manipulation has proven to be successful in case management for spondylolisthesis.

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