A(nother) Synovial Cyst Successfully Treated with Chiropractic Cox® Technique: A Case Submitted by Fellow Cox® Practitioner

We will see this patient with increasing frequency with surgical fusion and disc arthroplasty growth. This patient is treated with cervical spine long y axis distraction with range of motion at the adjacent levels to the fused segments. High velocity, low amplitude adjusting is probably not as indicated as long y axis distraction delivered to patient tolerance testing.

Respectfully submitted, James M. Cox, D.C., D.A.C.B.R.

Dear Dr. Cox:

Recently I have a Synovial Cyst case, too.

An 81 years old Asian male visited my clinic on this August. He had had back pain and right-sided radiculopaty since this April. He used to take walk 30 minutes with his wife everyday. Suddenly, he could not walk more than 5 minutes on this April. His low back pain was mild but severe pain and cramping on his leg along the posterial side.

MRI of the lumbar spine:

- 1) Degenerative disk bulges at L2-3, L3-4 and L4-5 levels. Congenitally slender central canal and mild to moderate facet osteoarthrosis causing central canal stenosis at L3-4 (moderate) and L2-3 (mild).
- 2) Stenosis of neural foramen at right L3-4 (moderate to severe) and left L4-5 (mild).
- 3) Facet osteoarthrosis at the L5-S1 level (Right greater than Left) with small juxta-articular synovial Cyst near the right L5-S1 facet joint. The described facet hypertrophy and small synovial cyst are mildly effacing the proximal right S1 nerve root just after it exits from the thecal sac.
- 4) Question of a transitional L5 vertebrae.

This patient was given 9 office visits from this August to September (2/week due to at least 1 hour driving to my office) with 100% improvement of his low back and leg pain. Now he can walk 30 minutes every day again only taking more times. He continuously visits this office every 2 week for maintenance. Treatment inclining micro-current stimulating on low back and leg with infrared on low back 30 minutes. Cox® distraction followed the protocol 1. Followed by trigger point therapy. Also the patient takes glucosamine and chondroitin which from his native country. Last Saturday, he told me that he felt the Cox® Distraction really help his condition esp. after distraction.

I hope this case have clinical benefit.

Sincerely, Chuan-Min Wang, D.C., L.Ac.