

The Arizona Quarterly Spine The 2010 McKenzie Institute Conference of the Americas



A Note from Shane

I recently attended the 2010 McKenzie Institute Conference of the Americas in Baltimore, MD. The purpose of this conference was to present, discuss, and analyze the current evidence regarding musculoskeletal management of the spine and extremities. This newsletter will summarize Dr. Ron Donelson's presentation titled: Rapidly Reversible Low Back Pain.

LBP Clinical Guidelines

Our greatest challenge is that we don't know the cause of most low back and neck pain.

The Quebec Task Force was the first published comprehensive review of the low back pain literature. It concluded that our initial low back assessment and diagnosis is so variable, and therefore so inaccurate, that physical therapists then make one error after another in their decisions on how to treat it.

The bad news is that not much has changed for most physical therapists and for their patients since 1987 when that report was published. Subsequent clinical guidelines have been of little further help in distinguishing one patient from another in a way that would improve individualized care rather than continuing to offer the currently available wide variety of one-size-fits-all solutions.

There is some very good news however. Over those same years, numerous studies, unfortunately still ignored by most clinical guidelines, have documented a way for physical therapists to examine patients that reliably identifies very effective treatment for nearly 90% of acute and 50% of chronic LBP without needing to depend on the mere passage of time for their recovery. That same physical therapy examination also directs your decisions for the remainder of your patients.

Mechanical Diagnosis and Therapy (MDT)

This special form of physical therapy examination and subsequent treatment methods are known as "Mechanical Diagnosis and Therapy (MDT). This is the first step in a uniquely informative type of care first described in 1981 by Robin McKenzie, a physical therapist from New Zealand (see photo).

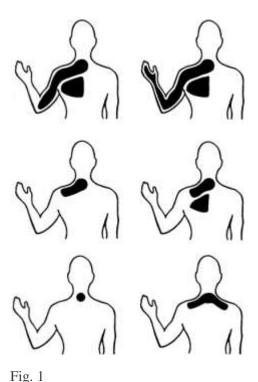
The MDT examination is simple and safe. The primary intent of the examination is to determine the mechanical characteristics of the underlying cause of the patient's pain and, more specifically, whether the patient has a rapidly reversible condition that they can reverse on their own.



The MDT evaluation is a dynamic examination that monitors changes in pain. It is dynamic by directing individuals to perform a series of very specific and repeated back or neck-bending tests while monitoring the effect of those movements on the pain itself. The pain typically responds to these tests in very clear patterns that are very informative clues that directly reflect the status and characteristics of the underlying pain generator. By monitoring these patterns, both pain-producing and pain-relieving mechanical characteristics of the underlying condition can be determined.

Directional Preference and Centralization

The two very common and informative clues or pain patterns found during the MDT examination are called "directional preference" and pain "centralization." Directional preference refers to a single direction of back or neck bending that, if done repeatedly and fully, are often able to reduce or eliminate the patient's pain. Pain centralization refers to pain moving or retreating back toward the midline or center of the patient's neck (fig. 1) or back (fig. 2), typically as a result of performing that single direction of testing that is your directional preference. So pain centralization is the best sign that a back or neck disorder has a directional preference. When back and neck pain conditions have a directional preference, the underlying problem is "rapidly reversible." This rapidly reversible characteristic of the underlying pain source can only be identified by using this dynamic MDT evaluation.



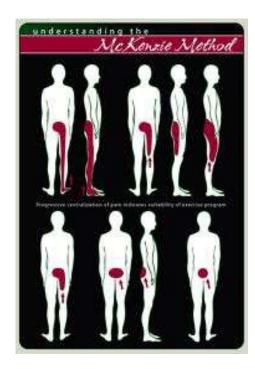


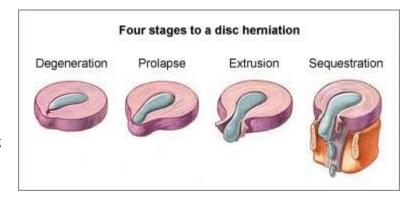
Fig. 2

What is "rapidly reversible back and neck pain" and how common is it?

Rapidly reversible low back (or neck) pain means the pain can increase or reduce quickly, and even be eliminated. This characteristic reflects the reversibility of the underlying problem that, in many cases, can happen rapidly. Multiple studies show that 70-90% of recent onset (acute) back and neck pain and as much as 50% of longstanding (chronic) back and neck pain, is rapidly reversible.

What is the anatomic diagnosis for rapidly reversible back pain?

Disc herniations. Discs are widely regarded as a common pain source of back and neck pain, especially once the pain spreads down past the elbow or down the leg past the knee. Pain begins when one direction of bending is performed excessively causing abnormally greater nuclear displacement. If that force continues, the annulus further weakens allowing further displacement to occur and the annulus to balloon creating a bulging disc. The pain begins long before bulging is seen on an MRI when nerve endings within the annulus itself complain about the over-stretch and early damage to the annulus.



The majority of patients seek care while the annular wall is still intact and the tissue displacement can still be reversed. This is the group in which 70-90% have been reported to have a directional preference where the displacement can still be corrected.

How do I find an MDT clinician

It's important for physicians to be able to identify who is and who is not fully trained in MDT methods. Beware that many physical therapists claim to know or be trained in these methods when they have had only partial formal training.

The McKenzie Institute Internationals is an educational, non-profit organization that teaches a standardized serried of four three and four day courses in more than 30 countries. Completion of these four courses qualifies a clinician to take a comprehensive examination. Those passing this examination are awarded the title of "Credentialed in MDT" and may add "Cert. MDT" after their name. A list of trained MDT clinicians can be found at www.mckenziemdt.org



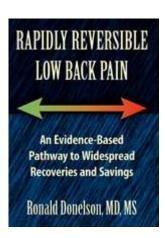
About the presentor: Ron Donelson

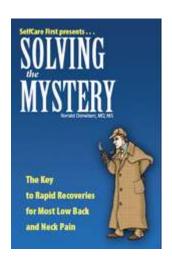
Dr. Ronald Donelson is a board-certified orthopedic surgeon who specialized in non-operative spine care for 20 years, first in private practice and then at the Institute for Spine Care at the State University of New York in Syracuse. He was granted the Diploma in Mechanical Diagnosis & Therapy in 1991 and attained a Master of Science

degree in 1998 at Dartmouth Medical School's Center for Evaluative Clinical Sciences. He is the Founder and President of SelfCare First, a consulting, publishing, and low back pain disease management company.

His numerous research publications have focused on the assessment, classification, and non-operative treatment of neck and low back pain. He has also written many chapters, review articles, and presented more than one hundred research papers, conference workshops, courses and symposia in more than 15 countries. He has written two books: the widely acclaimed "Rapidly Reversible Low Back Pain" and the recently published "Solving the Mystery: The Key to Rapid Recoveries for Most Back and Neck Pain", written for individuals struggling with back or neck pain.

Dr. Donelson is an Advisory Editor with the journal Spine, a member of the American College of Occupational and Environmental Medicine neck pain guideline panel, the International Society for the Study of the Lumbar Spine, the North American Spine Society, active with the International Forum for Primary Care Research in Low Back Pain, and is currently the Vice President of the American Back Society.





Using the Internet

SpineScottsdale is now using the internet to connect with the community. We are on Facebook, Twitter, Posterous, and Yelp! You can learn more about these internet sites below:



Facebook: Are you a fan?

Perhaps you have heard of this social networking site that is gaining popularity...FACEBOOK. Well, SpineScottsdale has decided to be a part of the trend. You can find a link at our website, www.spinescottsdale.com, to become a fan. You can post comments, view pictures, read articles, and tell your friends.



Twitter: Providing your patients tips on how to keep your spine healthy

Every day, millions of people use Twitter to create, discover and share ideas with others. Now, SpineScottsdale is turning to Twitter as an effective way to provide your patients and members of the community tips on how to keep your spine healthy. You can find a link to our Twitter page at: www.spinescottsdale.com



Posterous: Evidence-based blog designed for health care professionals

Too busy to keep up with all the spine related research? I will be posting a weekly blog discussing the most recent evidence-based material on spine related issues. You can view this blog by going to: spinescottsdale.posterous.com



Yelp: The purpose of YELP is to connect people with great local businesses.

- 1. Yelp was founded in 2004 to help people find great local businesses.
- 2. As of May 2010, more than 32 million people visited Yelp in the past 30 days.
- 3. Yelpers have written over 11 million local reviews.
- 4. Your patients will be able to review SpineScottsdale Physical Therapy at www.yelp.com



Moving in the Right Direction

What your patients are saying?

"Amazing service, top notch staff and very effective. Would highly recommend!"

-Tom

"SpineScottsdale was an excellent place to go for therapy. I will miss the people and the care I received."

-Robert

"Shane came highly recommended. After treatment of my shoulder I see why. It was a success!"

-Boh

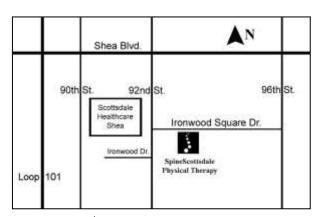
"My experience at SpineScottsdale was excellent! I would strongly recommend anyone needing physical therapy to this facility."

-Leonard

"The SpineScottsdale staff provided me with therapy that quickly provided relief, along with a program to continually improve my symptoms. I'm more than satisfied and have referred friends to SpineScottsdale." -Jan

"After years of lower back pain I was on my way to being completely pain free after the first two sessions at SpineScottsdale. I now have the 'tools' to use myself at home to remain pain free! I'm able to once again do things I love to do. Many, many thanks to Shane!

-Marijean



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