



P O R T L A N D

CHIROPRACTIC · NEUROLOGY

Case Study 3: “Pinched Nerve” after a pool diving incident

Previous diagnosis: none

Previous suggested course of treatment: none

History:

Initial complaint is neck pain and is of a constant nature. Pain is sharp and felt deeper on the right as an 8 out of 10 on the VAS. Pain on the left is dull and more constant and is between 5 and 7 on VAS. Initial onset was two years ago, when the patient dove into a pool and hyper-extended his neck while rotated to the right. This caused pain immediately, but then subsided over the next few weeks. However, pain became more apparent after 3 months and has been present ever since. Patient describes that relaxing shoulders causes increased pain in the lower neck. Patient also experiences headaches starting at the base of the skull and radiating into temple region and behind eyes.

What was found during examination:

- Patient has decreased range of motion and extension produces pain in the mid right cervical area.
- Upon neutral positioning pain is felt on the left lower cervical area.
- Rotation to the left and right causes pain, decreased rotation to the left.
- Decreased lateral flexion to the left and pain is felt in the right mid cervical area.
- Myospasm in the right mid-cervical paraspinal musculature, as well as the left lower paraspinal musculature.
- Patient has an anterior head carriage due to increased pain in extension

Summary of Presenting Case:

Patient's injury created hyperextension and rotation in the apex of the cervical curve. This damaged the ligaments, joints and muscles of this region creating inflammation and swelling that caused a reduction in normal joint motion. After just one treatment, patient could extend his head much further than before and without pain. After a few more treatments, patient did not have any more neck complaints and was released from care.

End Result- Patient no longer experiences neck pain and can move his head through normal range of motion once again