



2016 Annual Meeting

Orange County Convention Center – Orlando, Florida

Meeting Dates: March 1-5

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Presentation Abstract

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Session: 556-570-Spine V

Session Time: Thursday, Mar 03, 2016, 10:30 AM -12:30 PM

Location Room W304A

Presentation Time: 11:54 AM - 12:00 PM

Presentation Number: Paper 567

Title: Effects of Mechanical Stimulation of C5 for Referred Shoulder Pain: A Randomized Double-Blinded Clinical Trial

Classification: +Nonoperative/functional restoration/injections (Spine)

Keywords: Cervical; New Technique / Device; Instrumentation; Outcomes

Author(s): **George Hardas**, Sutherland, Australia

Abstract: INTRODUCTION: Manipulating the C5 facet joints is a popular chiropractic treatment for referred shoulder pain, however there are no clinical trials evaluating its efficacy. The aim of this study was to determine the effects of applying a force to the C5 facet joints by a mechanically assisted instrument (MAI) in patients presenting with referred shoulder pain.

METHODS: A prospective, randomized, double blind, placebo controlled trial was conducted to assess the effects of applying a force to the C5 facet joints by a MAI to patients with referred shoulder pain. The treatment cohort had the MAI set at the maximum setting (5 rings) to transmit a force into the spine; the placebo cohort had the MAI turned off (0 ring). Primary outcome measures were frequency and severity of extreme shoulder pain obtained via a patient reported questionnaire; secondary outcome measures were patient ranked pain and functional outcomes as well as examiner assessed range of motion and strength. Assessment procedures were completed at 24 weeks post-treatment and data were analyzed with an intent to treat protocol.

RESULTS: A total of 125 patients were recruited for this trial, 65 were in the treatment cohort and 60 in the placebo cohort. There was a reduction in the frequency but not severity of extreme shoulder pain in the treatment cohort, with average ranking reducing from weekly to monthly ($p<0.05$). Patients treated with the MAI had 10 N ($p=0.04$) better internal rotation strength after 6 months post-treatment (figure 1). There were, however, no differences with any other outcome measures between the two cohorts at the 24-week study period.

DISCUSSION AND CONCLUSION: The major effect of applying a MAI to the C5 facet joints in referred shoulder pain is improved shoulder strength for internal rotation in this randomized double-blinded clinical trial.

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