Standing posture and upper cervical misalignment: a practice-based retrospective review of 300 cases

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Introduction

- Standing posture and upper cervical alignment have long been clinically recognized as inter-related factors by orthogonally-based upper cervical chiropractors.
- A practice-based, pre-post-adjustment retrospective study of assessment measures by Quantum Spinal Mechanics chiropractic procedures collected measured aspects of standing posture and orthogonally-based upper cervical radiographs.
- Attempts to describe these misalignment assessments & their relationships in a presenting upper cervical care patient population will help guide future studies.

Methods

- Assessment measurement, data double entry verified, of 300 randomly selected case files from 2009-2011 were analyzed.
- Data Recorded
  - Standing posture data included: bilateral weight balance, pelvic anteriors/posteriorly and C7/T1 spinous movement in the frontal plane, were recorded.
  - Orthogonally-based upper cervical radiographs with defined radiographic measures of the upper cervical spine and skull were used.
  - Statistical analysis compared datasets to determine if any associations or correlations were present.

Discussion

- Notable changes in patient assessment measured variables have been clinically observed in the pre- and post-data measurements, interpreted as a successful patient intervention.
- Relationships regarding reduction of upper cervical misalignments with return to postural alignment with the vertical axis were examined.
- Identified were a descriptive analysis of the chiropractic realignment data of this patient sample.
- The presence of significant change in alignment pre- to post-treatment was observed.
- Pre- to post-intervention assessments were analyzed to detect decreases or increases or no change in misalignment variables.

Conclusion

- More study needed to resolve clinically apparent observations of assessments and relationships,
- Studies to resolve reliability & validity of the assessment measures are needed.
- Comparison of significant assessment changes to Quality of Life measures may reveal clinical significance of changes.