Approaches
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manipulation
therapy

Edited by

JEROME S. TOBIS

This volume is an up-to-date summary of knowledge on the efficacy of manipulation as a treatment for back pain. The contributors consist of scientists who have studied the effectivenes of manipulation and experts on the pathophysiology of the back.

The 1-xt recognizes that many physicians continue to reject manipulation on the grounds that it has no therapeutic value, but suggests that this is due to the dearth, thus far, of controlled clinical and experimental evidence. Through these discussions the editors and contributes recommend methods which will establish the effect of manipulation as well as the mechanism which might underlie its therapeutic use.

Approaches to the validation of manipulation therapy

Edited by
A. A. BUERGER and
JEROME S. TOBIS



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INTRODUCTION

M ANIPULATION was used for the treatment of paravertebral pain over one thousand years ago, and it is still widely used today. However, no method for the appraisal of the therapeutic effect of manipulation has been widely accepted by a majority of the interested basic and clinical scientists. Furthermore, with some noteworthy exceptions, relatively few carefully organized attempts have been made to use the available methods. In addition, the mechanisms which might be responsible for the continuing use of manipulation are unclear.

At the conference which resulted in this volume, we gathered many of the scientists who have studied the effectiveness of manipulation together with experts on the pathophysiology of the back. We hope that this volume will yield a clearer understanding of the methods required to establish the effect of manipulation, as well as of the mechanisms which might underlie manipulation's therapeutic use.*

Alfred A. Buerger, Ph.D. Jerome S. Tobis, M.D.

^{*}Note added in proof: A monograph edited by Murray Goldstein, D.O., M.P.H. and entitled, "The Research Status of Spinal Manipulative Therapy" has recently been published by the Department of Health, Education, and Welfare. It is an excellent complement to this book. It is available from:

Office of Scientific and Health Reports
National Institute of Neurological and Communicative
Disorders and Stroke
Room 8A16, Building 31
National Institutes of Health
Bethesda, Maryland 20014

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> A.A.B. J.S.T.

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Approaches to the validation of manipulation therapy

SECTION I

BACK PAIN: AN INTRODUCTION

OUR understanding of the pathophysiology of the vertebral column is incomplete. To quote Hollinshead for example, "There has been no careful clinical or physiologic study of the individual actions of the various muscles of the vertebral column, therefore statements of their action are based merely upon observations of the anatomical dispositions of the muscles."

We have, therefore, begun this volume with discussions by recognized experts on normal and abnormal back function.

¹Hollinshead, W. H.: *Anatomy For Surgeons*. New York, Hoeber-Harper, 1958, vol. 3, p. 173.

CHAPTER 1

A MATHEMATICAL MODEL OF THE SOFT TISSUE MECHANISMS OF THE LUMBAR SPINE*

H. F. FARFAN, M.D. AND C. LAMY, B. ENG.

THE purpose of this study is to quantify the activity of the musculature of the lumbar spine.† At present, there is no method of measuring directly *in vivo* the actual vector value of a muscle or a ligament. Nevertheless, quantitation of muscle activity would determine the relative importance of each muscle and place in perspective the functional value of ligamentous intervertebral connections including discs and ligaments.

Because the spine is a mechanical structure, it is obvious that the laws of mechanics must apply to its members. Thus, the active muscle and passive ligament allow the physician to set up a mechanical model and from this deduce with some accuracy the basic kinesiology of the spinal musculature in the performance of certain tasks.

Preliminary calculations have already demonstrated that, in the static erect posture, the anterior turning moment of the abdominals almost balanced the posterior turning moment of the extensors because of their larger area but smaller lever arm (Farfan, 1973). These calculations were recently supported by the almost identical conclusion reached by Stauffer (Stauffer et al., 1975).

Such large abdominal moments would obviously interfere with the extensor turning moment of the erectors and also produce unacceptably high compression and shear loads on the intervertebral joint.

^{*}This project was supported by Shell Canada, Ltd.

[†]The editors also recommend Dr. Farfan's excellent book entitled *Mechanical Disorders of the Low Back*, Philadelphia, Pennsylvania, Lea and Febiger, 1973, for a more complete treatment of this subject.

It seems obvious that some other mechanism is required to support forward moment of body weight and other external load. The author has proposed that these additional moments could be supported by the posterior ligamentous system because this ligamentous system can develop high tensions when stretched (Farfan, 1975a, b).

In addition, it was thought that it would be unlikely that all muscle groups would act with the same force per unit area.

As regards the ligamentous system, the behavior of this



Figure 1-1.

structure could be studied in the laboratory and its effects estimated *in vivo* with some degree of accuracy.

However, for the problem of determining the force per unit area of the various muscles, there is no known solution.

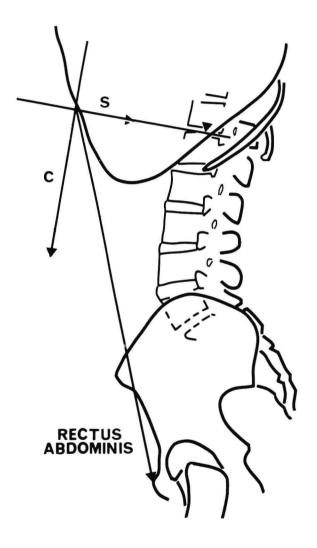


Figure 1-2a.