

News & Views

Update

ABOUT DR. PETER RAY

Background

Dr. Peter Ray has been in practice since 1991. He is located in Westminster CO. As a Chiropractor and Acupuncturist, he sees mostly cases that deal with spinal trauma, muscle strains, joint pain and nerve injuries. He specializes in Trigger Point Dry Needling, a technique that uses acupuncture needles to eliminate muscle trigger points and pain in both acute and chronic conditions.

Most of his referrals come from Medical Providers in the area that have established a good understanding of how an alternative approach to medication can be of benefit to the patient. There is rarely a "one-sided" treatment approach to a condition. Effective care is achieved by combining various forms of treatment and provider cooperation.

Next Issue:

- Tension Headaches
- Why are headaches and cervical pain often inter-related
- What can a patient do?

Cervical Facet Syndrome

Clinical Presentation

Sharp neck pain exacerbated with movement, mainly in extension and rotation (looking up to the right or left) often accompanied with shoulder and arm pain.

Deep achy pain at the base of the skull, upper back, shoulders, mid-back and lower neck from tender and stiff muscles. Palpable muscle trigger points in these areas.

Arm pain, numbness and tingling is often present that refers to the arm, forearm and fingers (4th and 5th digits frequently) with pain between the shoulder blades.

Pain is more dominant on one side, referring in facet joint patterns. Moderate to severe range of motion limitation in the neck is found because of joint pain and spasms.

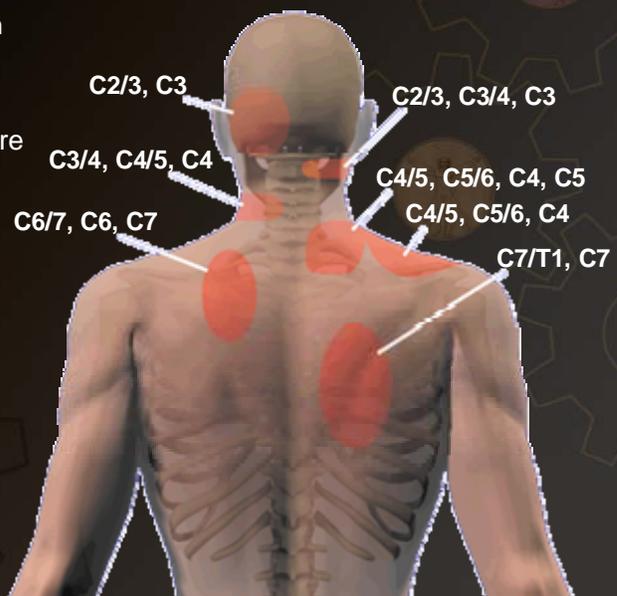
While the patient complains of symptoms of nerve root irritation and muscle spasms, the primary pain generator is the inflamed, often sprained cervical facet joint.

Referred Pain Patterns

"... the prevalence of cervical facet joint pain was 60%."

The most common facets to be injured were at C2/C3 and C5/C6.

Wallis BJ, Lord SM, Bogduk N. Resolution of psychological distress of whiplash patients following treatment by radiofrequency neurotomy: a randomised, double-blind, placebo-controlled trial. Pain 1997;73:15-22.





Pain & Rehabilitation Center

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We're on the web:
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Types of treatment
offered at the clinic

Chiropractic

Acupuncture

Massage therapy

Physical therapy

WHAT IS TDN?

TDN stands for Trigger Point Dry Needling. This technique restores normal nerve and muscle function after injury. TDN was largely developed by Dr. Chan Gunn, MD. It involves the insertion of acupuncture needles into tight muscle tissue. It is similar to trigger point injection, but without injecting medication into the muscle. It has been shown to have a similar therapeutic effect. It is the needle and not the medication that produces the effect.

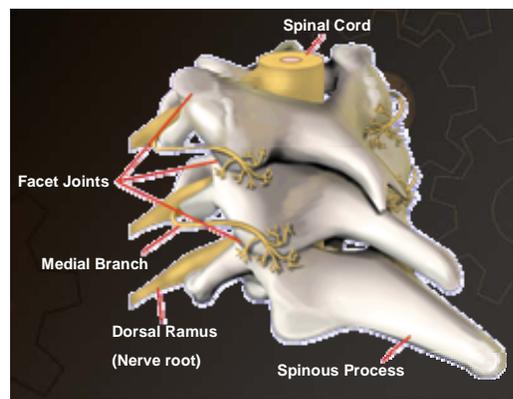
History and Causes

Prevalence of neck pain is 34% and chronic neck pain is 14%, most commonly associated to the facets joints.

Patients usually complain of previous neck trauma or recent trauma such as whiplash, a sport injury or strain to the shoulder and neck from physical activities.

Long-term postural strain (computer, repetitive motions) is a common contributor.

Objective neurological signs are absent.



The medial branch of the dorsal ramus innervates the facet joint

Differential Diagnoses, Workup

Cervical disc injury, discogenic pain syndrome, cervical radiculopathy and cervical sprain/train injury. Laboratory studies are generally not indicated for the diagnosis of cervical facet joint syndrome. Imaging studies usually are not helpful, with the exception of ruling out other sources of pain, such as fractures, disc rupture or tumors. Signs of cervical spondylosis, narrowing of the intervertebral foramina, osteophytes, and other degenerative changes are equally prevalent in people with and without neck pain.

Treatment, A multi-prong approach

Conservative treatment first, makes sense

The goals are to reduce pain and inflammation and to increase the pain-free ROM. Ice is indicated during the acute phase to decrease blood flow and subsequent hemorrhage into the injured tissues, as well as reducing local edema. Chiropractic manipulation, soft-tissue massage, and muscle stretching alleviate joint pain and strained muscles. Therapeutic modalities such as interferential electrical stimulation may also reduce painful muscle spasms. Intramuscular Stimulation with acupuncture needles to the trigger points is very effective in acute cases that often require medication.

Treatment duration and expectations

Most cervical facet syndromes respond within 4 visits. Initially, the sharp stabbing pain in the neck disappears and ROM improves. Referred pain in the shoulders, arms and hands progressively fade. Morning stiffness also begins to taper but dull achy pain persists in the muscles until they are fully stretched and strengthened - this could take weeks or longer. A history of neck trauma and many previous episodes tends to lengthen treatment considerably as injured and fibrotic tissues heal slower.

If the patient does not respond to conservative care, more diagnostic testing and or other treatments should be considered. These include medial branch blocks, intra-articular facet joint injections and percutaneous radiofrequency neurotomy.