Case Report

Dizziness Post Chiropractic Manipulation of Spine-A Case Report

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Abstract

In recent years, chiropractic therapy over the spine has become a popular alternative treatment for headache, neck pain and backache. While not denying its effects in a selected group of patients, it also has its inherent list of side effects. This case report looks at a 72-years-old woman who complained of dizziness for three days after undergoing continuous chiropractic spinal manipulation therapy for her chronic back pain for two weeks.

Keywords: Chiropractic; Spine; Dizziness; Vertigo; Prochlorperazine

1. Introduction

Chiropractic therapy is being touted as an alternative treatment for pain and aches around the spine for more than a century now, since its inception in 1895. It is defined as a medical discipline that focuses on the relationship between spinal structure and body function. There is good evidence that supports the use of chiropractic therapy for low back pain and tension-type headache, but limited evidence exists for its use in other condition such as thoracic or shoulder pain, vision impairment and whiplash injury [1]. There is a load full of side effects associated with this alternative therapy, one of which will be discussed in this case.

2. Case Report

A 72-years-old woman was seen at a primary care clinic complaining of dizziness for three days. She describes the dizziness as the sensation of the room spinning around i.e. vertiginous reaction. There was no fever, hearing loss, upper respiratory tract symptoms or blurring of vision. This is the first time this is having this kind of symptoms. She has underlying hypertension currently on a calcium channel blocker for more than 5 years now. There was no change in her medication list this past few months. She is not taking any supplements or traditional medications.
On physical examination, she is alert and not pale. Her blood pressure in the sitting position was 129/78 mmHg and 125/76 mmHg in the standing position. Other vital signs were stable as well, with a pulse rate of 74 beats per minute, respiratory rate of 18 breaths per minute and temperature of 36.5°C. Systemic examination, including full neurological examination, cardiovascular and respiratory were all normal as well as vision, hearing and Romberg’s test.

On further questioning, she noticed her symptoms commence after she started to have a chiropractic session for the long standing thoracic region pain due to an old compression fracture of T12 for the past two weeks. She has this fracture for more than 15 years now and had completed her treatment with a bisphosphonate for a period of 5 years. She has stopped going to the chiropractic session since yesterday. A diagnosis of vertigo secondary to chiropractic spinal manipulative therapy was made. She was prescribed with an anti-labyrinth agent, prochlorperazine 5 mg three times a day for symptomatic relief. She was also given fall preventive advice and an appointment to be seen again if symptoms worsens or doesn’t show any improvement.

3. Discussion
Side effects can be a common sequel post spinal manipulative therapy. Although most can be benign, such as nausea, dizziness, fatigue, headache or just local area discomfort, there have been reports of serious and life-threatening adverse events that includes cervical herniation with possible compression of the spinal cord, cervical haematoma, vertebral fracture, cranial nerve palsy as well as subclavian artery occlusion [1, 2]. Other serious adverse effects reported so far include intracranial hypotension, epidural hematoma and arterial dissection [3, 4]. Therefore, managing common ailments such as back pain should go back to the good and tested evidence-based medicine algorithm which will advise for relative rest, physiotherapy or use of analgesics while allowing room for alternative therapies as chiropractic treatment or acupuncture as an add on therapy if evidence favors their use. Patients must be informed of the risk of undergoing such alternative therapy before it is commenced by qualified therapists. A common differential diagnosis is rheumatological diseases, where they may be many pitfalls in diagnosis and need a few encounters with the physicians to reach the diagnosis [5-8].

4. Conclusion
In summary, this was an interesting case of chiropractic spinal manipulation induced vertigo in an elderly lady that presented relatively early and how the diagnosis was arrived at after a full examination.

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References

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