Non-Surgical Spinal Decompression
Treatment of Low Back Pain by Spinal Decompression and Spinal Exercises

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INTRODUCTION

Low back pain is the third common problem present with back and neck clinic. It was awarded as the U.S. based concept of decompression of the spine is known as decompression equipment known as DRX 9000. This paper is presented by Ms. Malti, Physiotherapist, with extensive back care. The hypothesis proposed were:

1. There is a significant difference in the condition of right Slumps before and after the treatment. This is also a test to confirm that the back pain is related to the disc or not. The hypotheses proposed were:

Null Hypothesis ==> H0: There is no significant difference between the means of before right Slumps and after right Slumps

Hence, we reject the null hypothesis. Alternately, we accept that there is a significant difference between before and after right Slumps.

2. There is a significant difference in the left Slumps before and after the treatment. Alternately, it can be inferred that the treatment was effective for the left Slumps, as there is a statistically significant difference in the condition of left Slumps before and after the treatment.

Null Hypothesis ==> H0: There is no significant difference between the means of before left Slumps and after left Slumps

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1. There is a significant difference in the condition of right Slumps before and after the treatment. This is also a test to confirm that the back pain is related to the disc or not. The hypotheses proposed were:

Null Hypothesis ==> H0: There is no significant difference in the right Slumps before and after the treatment at 95% confidence level. Hence, it can be inferred that the treatment was effective for the right Slumps, as there is a statistically significant difference in the condition of right Slumps before and after the treatment.

Before and After Left Slumps

To assess the efficacy of the treatment, scores from the respondents were taken for their right Slumps before and after the treatment. This is a test to confirm that the back pain is related to the disc or not. The hypotheses proposed were:

null Hypothesis ==> H0: There is no significant difference between the means of before left Slumps and after left Slumps

Hence, we reject the null hypothesis. Alternately, we accept that there is a significant difference between before and after left Slumps.

BEFORE & AFTER VAS

To assess the efficacy of the treatment, subjective scores from the respondents were taken for their right and left Slumps. The probability-value for this text is 0.001. Also, the observed difference of means comes out to be 0.238 which falls in the rejection zone, at a significance level of 5%. Hence, we reject the null hypothesis. Alternately, we accept that there is a significant difference between before and after right Slumps.

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LITERATURE REVIEW

• Traditional traction has proven to be less effective and biomechanically inadequate to produce optimal therapeutic results.

One study by Mingal et al concluded that any benefit derived from continuous traction devices was due to placebo effect and not traction per se.

• Weber compared patients treated with traction to a control group that had simulated traction and demonstrated no significant differences. Research confirms that traditional traction does not produce spinal decompression.

• Mattress used on the physiotherapy bed may be thought to have lumber disc protrusion. With applied forces of 120 pounds x 20 minutes, he was able to demonstrate that the contrast material was drawn into the disc spaces by myofascial changes.

• Goldschlag states that the degenerated disc may benefit by lowering intradiscal pressure, affecting the nutritional state of the nucleus pulposus.

• Oral et al reported the positive effects of distraction on the disc as the nucleus pulposus in a discogram remains intact while the annulus fibrosus is being pulled apart. This is a dural tension test that evaluates lesions occurring as the annulus fibrosus protrudes and the disc is physically stretched. When the annulus is in poor condition, it tends to be firmer at the midline and posterior aspects of the disc. The posterior portions of the annulus fibrosus resist distraction, but the anterior portions do not. In the case of annular tear, the disc prolapses into the spinal canal. This is a positive test.

In summary, spinal decompression is effective for the treatment of low back pain. The treatment is effective for the treatment of low back pain, and it is evident from both subjective and objective examination results. Spinal stabilization exercises and back care from the integral part of treatment.