

# Manipulation

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## **STANDARDS & GUIDELINES FOR THE USE OF HIGH VELOCITY LOW AMPLITUDE THRUST SPINAL MANIPULATION IN NATUROPATHIC PRACTICE**

### **I DESCRIPTION OF PURPOSE OF STANDARD/GUIDELINE:**

The purpose of the standard/guideline is to minimize the risk to the public from harm from high velocity thrust procedures.

### **II DESCRIPTION OF STANDARD/GUIDELINE:**

Definition of an “absolute contraindication” is a standard of a clinical intervention which is inappropriate because it places the patient at undue risk. A “relative contraindication” on the other hand is a guideline and describes circumstances which may place the patient at risk unless the clinical intervention is modified. Relative contraindications indicate scenarios where practitioners must use their own professional judgment. They represent “red flags” and often are absolute contraindications. Practitioners should be cautious and practice in a conservative manner erring on the side of patient safety.

### **III GENERAL STANDARD**

In accordance with the Board’s Standards of Practice, all patients must have had a complete naturopathic work-up including case history, appropriate physical examination, diagnosis, plan of treatment and informed consent before spinal manipulation is initiated.

(Nov. 1996)

## **ABSOLUTE & RELATIVE CONTRAINDICATIONS FOR MANIPULATION**

### **GENERAL RELATIVE CONTRAINDICATIONS**

- 1) the use of a technique or to administer manipulation in a more complicated case or area which is beyond the Registrant's expertise or training;
- 2) when it is in the patient's best interest to be treated by a practitioner with more specialized training; and
- 3) lack of radiographic examination or the results of radiographic examination of the areas to be manipulated.

<b>Absolute Contraindications (Standard)</b>	<b>Relative Contraindications (Guideline)</b>
<b>I Arthritides</b>	
Atlantoaxial instability <ul style="list-style-type: none"> <li>• rheumatoid arthritis</li> <li>• Down Syndrome</li> <li>• Marfan's Syndrome</li> </ul>	Inflammatory arthritis Rheumatoid arthritis and ankylosing spondylitis Atlantoaxialoccipital osteoarthritis
<b>II Bone Weakening &amp; Destructive Bone Disorders/Diseases</b>	
Destructive Bone Disorders <ul style="list-style-type: none"> <li>• avascular necrosis</li> <li>• malignant bone tumours-neoplasms</li> <li>• infection of the bone at the joint</li> <li>• fractures</li> <li>• anatomical dislocation</li> </ul> Congenital malformation <ul style="list-style-type: none"> <li>• aplasia of the posterior arch of atlas and os odontoideum</li> </ul>	Congenital malformation Articular hypermobility-instability Benign bone tumours Demineralization of the bone <ul style="list-style-type: none"> <li>• osteoporosis</li> <li>• osteopenia</li> <li>• long-term steroid use</li> </ul> Calcification of the ligaments of the upper cervical spine Spondylolisthesis
<b>III Neurological Disorders/Diseases</b>	
Cauda Equina Syndrome Neurological deficits after cervical spine high velocity thrust procedures	Neurological deficits as a result of discopathy
<b>IV Circulatory/Cardiovascular Disorders/Diseases</b>	
Clinical manifestations of vertebral basilar insufficiency (cervical manipulation) An aneurysm involving a major blood vessel in the general area of manipulation	An aneurysm involving a major blood vessel Anti-coagulant therapy and some blood dyscrasias
<b>V Miscellaneous</b>	
Lack of signed patient consent Intoxicated patient Recent surgery in/near area of planned manipulation	Discopathies: acute and chronic Lateral stenosis of lumbar spine Fused vertebrae

(rev. August 2004)