

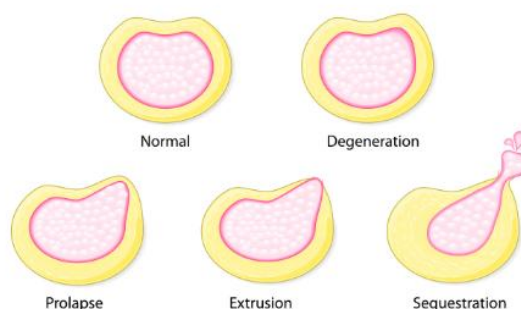
Stan's Story

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By Dr. Derek Conte

Stan, 66, limped into the office on January 4th with a friend accompanying him because he could not drive due to intense pain and lack of muscle control in the leg. His gait was strange. He had to swing his right leg around and forward in an arc from the hip in a 'circumduction gait' because of as Stan said, "the heaviness of the leg". This gait is often seen in those afflicted with polio. But Stan did not have polio, as we will see.

STAGES TO A DISC HERNIATION



These symptoms had come on suddenly two weeks earlier: Stunning, bolting, cramping, aching pain with paresthesia, numbness, weakness and some loss of function in the lower right leg muscles. The examination showed that coughing, sneezing or bearing down with breath held produced pain and, together with other symptoms, strongly suggested a disc bulge or disc bulges at several levels of the lower spine. Stan also carried 98 pounds on the left and 83 pounds on the right when standing on bi-lateral scales with significant postural distortion. The pain scale was 7 - 10 out of 10 depending on the moment or position he was in. Stan found it very difficult to find an un-painful sleeping position.

We began that day with gentle, specific adjustments twice a week. After the first adjustment Stan weighed equal 90 pounds on each of the bi-lateral scales and was experiencing intermittent improvement. After the 2nd adjustment the pain went from 7 out of 10 to 0 out of 10. By the 3rd visit, the pain had gone up to 5 out of 10, but he improved again after that 3rd adjustment. By the 4th visit, Stan was doing well enough to drive himself to his appointments.

Out of an abundance of caution, I sent Stan to an orthopedist for a consult and MRI, but x-rays were done instead and revealed only minor degenerative changes... nothing that could explain the severity of Stan's symptoms.

By the 6th adjustment the painful episodes decreased significantly. We now reduced Stan's schedule to 1X per week. An MRI was finally done after the 6th adjustment and revealed what I had suspected: five disc bulges at 5 levels of the lower spine including a disc protrusion and a disc extrusion, all pressing on the spinal cord, fully explaining the severity of the symptoms.

In light of his progress, the orthopedist urged Stan continue with chiropractic care, but also suggested a cortisone shot and physical therapy. I had no objection to this plan, but Stan didn't want the cortisone shot. The 7th and 8th adjustments brought him continued, steady improvement.

By the 9th adjustment, Stan could sleep in any position without pain and his gait was now completely normal. By the 10th adjustment, Stan's symptoms had improved by 98% and he had not received the cortisone shot. We reduced his adjustments to 2X a month and Stan lost no ground at all.

By the 12th visit, Stan was walking for exercise and doing steep hills as well. He is now being seen every three weeks. I expect he will be in maintenance care soon and seen only once a month to keep him strong and able to fully heal over time now that his spine is stabilized.

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