DMR Method™ Case Study





Lumbar Disc Herniation with Back Pain

Sandra developed acute severe lower back pain after bending forward to lift a very light object. After failing to improve with standard physical therapy and chiropractic treatment, she had an MRI scan done and came in for a DMR Method Evaluation.

DIAGNOSIS

The MRI scan confirmed a large 14mm x 4mm L2-3 disc herniation that extruded outward and upward (see image above). DMR Method Evaluation revealed joint immobility and misalignment/subluxation in the lumbar spine. Muscle imbalance and spasm was indicative of a structural condition that had been developing over a long period of time.

TREATMENT

Because of the new disc herniation, Sandra first completed the acute lumbar DMR Method Protocol with a focus on Integrated Progressive Mobilization (IPM). As her condition improved, her chiropractors and physical therapists transitioned her to a care program that focused on the correction of the long-term joint and muscle imbalance that was the true underlying cause of the new disc herniation.

OUTCOME

Sandra's back and leg pain resolved. A follow-up MRI showed a marked regression of the L2-3 disc herniation with 3mm x 3mm residual. Her six-year follow-up confirmed continued symptom resolution.