

A retrospective pre and postassessment of cervical spine ranges-ofmotion in 32 patients following the cervical stairstep technique intervention: A case report

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Objective: The cervical stairstep technique (CST) developed by DeJarnette in 1971, is an integral part of the Sacro Occipital Technique assessment and treatment for the cervical spine. CST's presumed function is to treat hypermobile/hypomobile cervical spine segmental dysfunction. It is currently taught in many chiropractic colleges as an alternative for the HVLA diversified cervical adjustment. No studies have assessed whether the CST might demonstrate a change in pre and post-cervical ranges-of-motion.

Methods: Pre and post-assessment of cervical ranges-of-motion were performed with a validated inclinometer (JTECH Dualer PlusTM) on 32-patients in one-day by a chiropractor trained in sacro occipital technique using the CST as the primary intervention. IRB approval was attained through Cleveland University Kansas City (#90721-1).

Results: Of the 32 patients in this retrospective study 24 patients demonstrated significant improvement in cervical ranges of motion post-CST intervention with 8 patients demonstrating no change or an incremental decrease in ranges-of-motion.

Conclusion: This retrospective study represents the first attempt of validating the CST, which is commonly utilised in the chiropractic profession. Further studies with larger cohorts are needed with controls and sham interventions as a means to more thoroughly assess this novel method of assessing and treating the cervical spine.

Indexing terms: Chiropractic; cervical spine; stairstep technique; range of motion; sacro-occipital technique.





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Cite: Kierstyn S, Blum CL. A retrospective pre and post-assessment of cervical spine ranges-of-motion in 32-patients following the cervical stairstep technique intervention: A case report [Abstract]. Asia-Pac Chiropr J. 2022;3.1 URL apcj.net/SOT-Abstracts-2022/#KierstynBlumCxROM