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Improvement in spinal curvature and quality of life in a 30-year-old male with hip pain and immobility: A case report

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Background: A thirty year old male presented for care with chief concerns relating to hip pain and mobility, despite his young age. His pain worsened with walking, thus contributing to reduced levels of physical activity.

Intervention: The patient underwent a course of care during which he was checked and adjusted using the Advanced Biostructural Correction technique.

Outcomes: The patient was able to achieve significant improvements in posture and pain, thus enabling him to re-engage with aspects of his life he found difficult prior to care.

Conclusion: This progression highlights the interplay between pain, posture, and neurological function, and the importance of a stepwise approach to care in complex cases.

Indexing Terms: Chiropractic; Subluxation; Advanced Biostructural Correction Technique; ABC; hip pain; mobility; Quality of Life.

Introduction

To the average patient it may seem that the pain appeared first and the dysfunction followed. But according to the Chiropractic understanding, dysfunction can exist long before pain and noticeable altered function manifest.

Spinal curvature is one such issue. It plays a crucial role in distributing mechanical loads, maintaining balance, and supporting efficient movement. Alterations to normal curvature, whether through postural changes, degenerative processes, or injury, can lead to compensatory stress throughout the musculoskeletal system.

Subluxation plays a pivotal role as it shows us how the spine and nervous system is responding and adapting to the environment around it. When these changes affect the pelvis and hips, they can significantly impact mobility and quality of life. Abnormal spinal alignment often creates uneven forces across the hip joints, contributing to joint irritation, muscular imbalance, and pain. (Kendall et al., 2005) Over time, these stress patterns may limit movement,

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reduce activity levels, and increase the risk of secondary problems such as osteoarthritis or gait dysfunction. (Levine et al., 2016)

Chiropractic care addresses subluxations and restores optimal function thus improving joint motion, alignment, and neurological signalling. This may may reduce uneven loading through the spine and pelvis, improving both posture and movement patterns. This, in turn, may help to decrease pain and improve function in adjacent regions such as the hips.

> Pain is not the problem. It is the result. Research has demonstrated that targeted manual interventions can positively influence spinal curvature and mobility, with downstream benefits to overall biomechanical health. (Haavik & Murphy, 2012; Oakley et al, 2015)

For individuals with chronic hip pain and restricted mobility, addressing spinal curvature is an important consideration. Improvements in spinal alignment may enhance weight-bearing symmetry, reduce compensatory muscle tension, and create a more stable foundation for functional movement.

This case report describes the Chiropractic management of a patient who experienced a measurable improvement in spinal curvature, along with a significant reduction in hip pain and immobility. The case highlights how a comprehensive, subluxation-based approach can influence both local symptoms and global postural health.

Case details

A 30-year-old male presented for Chiropractic care with a chief complaint of right hip pain radiating down the back of the leg, to the knee, which worsened while walking. He was a biotechnician who reported minimal levels of physical activity, and had only limited experience with Chiropractic care. While the sciatica-type pain was his chief complaint, he also reported secondary complaints of body aches, poor flexibility and tension-type neck pain which required 'clicking' for relief.

Upon presentation he underwent a full examination according to the Advanced Biostructural Correction Protocol. This included range of motion tests and postural photos as well as reflex tests and myotome examinations. Clinical findings returned during this examination included reduced cervical lateral flexion and rotation bilaterally. (HTT ES/QL). Sacroiliac provocation tests were negative, but the patient was unable to perform some tests due to significant pain levels.

Postural photos revealed significant loss of all spinal curvature, and thus significant subluxation findings were present through-out the spine.

Management

The patient commenced a course of care during which he was managed using Advanced Biostructural Correction Techniques and protocols, including meningeal releases. He underwent first and second rib adjustments, anterior wall and table adjusting, hip and pelvis adjusting, and peripheral adjustments to the ankles fee, knees and anterior ribs.

Additional care recommendations included ergonomic changes to his sitting and sleep postures. He was seen twice a week, with a review examination every six weeks. Care focussed on meningeal stretches, and re-alignment of osseous structures which the body could not self-correct. Aims of care were to reduce pain and improve overall wellbeing and quality of life.

While official reviews with photographic postural analysis occurred every six weeks, the chiropractor undertook assessments of subluxations and symptoms at every appointment.

Outcomes

Over the course of care, postural changes occurred alongside a consistent reduction in symptoms until the latter had completely resolved. This included a resolution of hip, neck and knee pain, as well as the 'sciatica' and body aches. This occurred alongside subluxation-based care with a focus on postural balance.

Photographs and patient reports were taken at each treatment. The patient's response to treatment and body changes were observed before and after adjustment. The patient filled out forms prior to each 6 week review to rate key improvement. The forms assessed his self-reported progress across each symptomatic area. These included questions regarding primary concerns (sciatica, back pain, overall symptomatic progress), as well as postural progress, sleep, ergonomic changes at the office and at home, and footwear. The patient was also asked to report on movement, flexibility, reduction of pain, improvement in physical functioning, activities of daily life, and overall physicality

At the one year review he stated that he had noticed a consistent improvement and was feeling much more balanced. He also stated that he would like to reduce his frequency of care but still maintain his results

Discussion

Over the course of care the patient experienced a significant reduction in hip pain which allowed him to return to his daily activities with confidence. He was able to walk to work without discomfort and reported less concern about the long-term state of his body. This change was not only about pain relief but also about restoring his trust in his own movement and functional capacity.

At the start of care the patient's pain levels limited his ability to fully participate in certain corrective positions. As his pain decreased, his range of motion and ease of positioning improved, enabling more effective adjustments. This progression highlights the interplay between pain, posture, and neurological function, and the importance of a stepwise approach to care in complex cases.

As care progressed notable improvements in posture were documented through postural photographs. This case underscores how imbalances in posture can generate ongoing strain on the nervous system and musculoskeletal structures, and how subluxation-based care can help alleviate these patterns by restoring balance and alignment.

Conclusion

Future research using dynamic imaging such as moving MRI, would be valuable to further explore the effects of specific Chiropractic techniques, particularly those aimed at meningeal release, on both posture and pain outcomes. Such studies could help clarify the mechanisms behind the improvements seen in this case and others like it.

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References

1. Haavik, H., & Murphy, B. (2012). The role of spinal manipulation in addressing disordered sensorimotor integration and altered motor control. Journal of Electromyography and Kinesiology, 22(5), 768-776. https://doi.org/10.1016/j.jelekin.2012.02.012
2. Kendall, F. P., McCreary, E. K., Provance, P. G., Rodgers, M. M., & Romani, W. A. (2005). Muscles: Testing and function with posture and pain (5th ed.). Lippincott Williams & Wilkins.
3. Levine, D., Whittle, M. W., & Richards, J. (2016). Whittle's gait analysis (6th ed.). Elsevier Health Sciences.
4. Oakley, P. A., Harrison, D. E., & Harrison, D. D. (2015). Evidence-based protocol for structural rehabilitation of the spine and posture: Review of clinical biomechanics of posture (CBP) publications. Journal of Contemporary Chiropractic, 1, 33-40.

About the Chiropractor

Dr Jonathan Camm holds a Bachelor of Health Science/Bachelor of Applied Science (Chiropractic), having graduated with distinction at RMIT University. He also holds a Bachelor of Science in Nursing from La Trobe University.

A keen sportsman, with special interests in golf, cycling, AFL and rock climbing, Jonathan is dedicated to improving health through chiropractic care. He has a twenty year nursing career behind him, during which his experience included Emergency Nursing, Hyperbaric Nursing, Wound care specialist and Clinical teacher. It was these focus areas that ultimately led him to Chiropractic. Having been a speaker at ABCA's Singapore conference in 2019, Jonathan is passionate about ABC technique and philosophy.