

Chiropractic care for a patient preparing for a Norwegian Trek when she couldn't walk up stairs: A case report [Abstract]

Michelle Greene

Indexing terms: Chiropractic; SOT; humeral head; radial head; Category Two blocking.



Objective:

To present a case report on a 68-year-old female unable to walk up stairs without using her arms in distress due to a planned vacation involving hiking who was successfully treated with chiropractic care.

Clinical Features:

A 68-year-old female presented for care at this office complaining of relatively severe pain in her left elbow beginning three weeks prior which does not allow her to use her left hand. A more urgent complaint to her was her chronic worsening of extreme weakness in her both her hips and oedema in both her ankles. She was deeply concerned because had a 'trek' in Norway coming up and she needed to be able to hike though now due to her weakness struggles to walk up stairs and needs to pull herself up with her arms using side rails. The patient reported a past history of a right ankle fracture 8 years prior and had only minimal physical therapy with no supervision following the injury.

Intervention and Outcome:

The patient's hip and lumbar ranges of motion were difficult to assess due to her apprehension and muscle weakness. Arm fossa test positive indicative of a posterior sacroiliac joint hypermobility syndrome with pelvic torsion. Assessment of her upper left extremity found that she had a left humeral head was anterior displaced and her left radial head posterior subluxation. She was treated with chiropractic care that included sacro occipital technique category two block

treatment, therapeutic massage, orthopaedic blocking, Activator™ instrument, and her extremities were also adjusted.

At second visit two days later the patient reported she had regained the use of her left hand though she continued to have achiness in the left elbow but did not limit her movement. She noted that her hips felt stronger as well but the right hip continued to feel like it was 'catching'. Following the first office visit she reported that her 'hip' felt better for about two hours but she felt it destabilise while standing when shopping. She also noted that the oedema in ankles had resolved. On the second office visit the category two basic cranial was performed while she was being treated supine with pelvic blocks. She was also given home exercises to strengthen and rehabilitate her gluteus medius muscles.

By the third visit she was able to walk up the stairs without using her arms. Her left shoulder and elbow were significantly improved with only tenderness at left elbow that were treated with adjustments and ultrasound therapy. She was seen three times for the first week, then two times per week the following week, with one more treatment the third week at which time she felt confident that she was capable to function on her Norwegian trek.

Conclusion:

This patient presented with a chronic weakness in her lower back and hips that was progressively limiting her ability to walk and function most notably walking up stairs. She also had left arm pain, limited range of motion, and weakness but was most concerned about her limitation in walking due to a planned hiking vacation trip. Following 6 office visits over two weeks she had recovered good function of her legs that she felt should could confidently go on her trip and be able to fully function.

Michelle Greene

DC

Private practice Santa Monica CA

drmichelle.appts@gmail.com

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About the practitioner



Michelle Greene DC graduated from Cleveland Chiropractic College – Los Angeles in December 1992. She has been practicing in the Los Angeles area since that time. She was introduced to chiropractic as a teenager while running with the Santa Monica Track Club. She continues to compete in the aqua-bike division of Triathlons and focuses her practice on combining soft tissue work with chiropractic adjustments..



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