

Infertility and Gonstead Chiropractic: A case report

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Abstract: Infertility is not sterility and is defined where a couple has not conceived after 12 months of unprotected intercourse. For a family trying to conceive, a delay in achieving pregnancy is distressing and can damage relationships. This case study describes chiropractic management of a patient experiencing infertility.

Indexing Terms: infertility; back pain; headaches; pregnant; Gonstead; Chiropractic

Introduction

Infertility infers potential, and therefore raises questions as to what insult or interference influences this sluggish outcome. Interference in physiological function, as viewed by the application of chiropractic principles, suggests a neurological etiology and is approached through the mechanism of detection of vertebral subluxation and subsequent appropriate and specific adjustments to promote potential and function. The desire to have a child is a strong biological drive essential to the sustenance of life, and the desire to parent is a dream shared by many. Today infertility affects about 10% of the population. (1)

The Gonstead system of chiropractic approaches each clinical situation with a meticulous analysis of the patient, and then on the basis of all knowledge attained decides what steps need to be taken to correct the vertebral subluxation.

History

A 33 year old female office worker presented with lower back pain and occasional headaches. She explained that she and her husband had been trying to fall pregnant for over 12 months. Her back pain was aggravated after long periods of sitting but was only mild in pain intensity. This pain was often relieved by gentle exercise, i.e. walking.

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Figures 1a and 1b: AP and Left Lateral full spine views

Examination

Lumbar extension was slightly limited and exhibited slight pain at the end range. Neurological findings were unremarkable. Both psoas muscles were tight and tender to palpate. Suboccipital muscle tension was noted. Nervoscope readings were found at levels: C2, L2 and her right sacroiliac joint. Segmental restriction was found at each of these levels. Oedema and tenderness was greatest at her right SI joint and at L2.

X-Ray analysis revealed decrease in her lumbar and cervical lordosis along with a slight scoliosis. No significant degenerative changes were seen. Her listings were noted as C2 PLS, L2 PLI-M and P-R2 sacrum. (Figures 1a, 1b, 2)



Figure2: R) Lateral cervical spine



Management, Treatment and Outcome

On the first visit a P-A adjustment was given at the sacrum in sidelying position on the pelvic bench with involved side up. Instructions were given to reduce the amount of lengthy sitting at work (ie to rise every 20-30 minutes and have a quick walk) and to stretch her psoas muscle when possible. Advice on using ice when necessary was also given.

Three days later, the patient returned and the sacrum was adjusted once more. Another sacral adjustment was given on the third visit along with a C2 adjustment. On the fourth visit the L2 was adjusted also side posture on the pelvic bench, at this point the sacrum was not showing any signs of subluxation so there was no indication for adjusting.

L2 was adjusted 4 more times over then next 5 weeks according to subluxation signs. At this point the patient had 2 weeks holiday.

After returning from holiday the patient explained that she was 4 weeks pregnant. This was 9 weeks after initially presenting for Chiropractic Care and having no other intervention. It clearly did not relate to the holiday as she was obviously successfully impregnated prior to her departure. The patient also explained that the frequency of her presenting headaches had decreased.

Discussion

Infertility is a subject in which is fraught with anxiety, charged with emotion and laced with many possibilities. From a Chiropractic perspective it is a topic that requires much thought and a thorough analysis of all the findings on whatever the presenting case. A fully functioning nervous system is paramount in the maintenance and sustainability of reproductive success.

In this case it was important to begin by stabilising the pelvis. By adjusting the sacrum a level foundation is established and the pelvis allows the forces of gravity to maintain any spinal Chiropractic adjustment without working against it.

A Sacral adjustment would also have an influence on the sacral plexus and thus possibly having an effect on the pelvic organs to increase chances of fertility (2). After the 3rd visit L2 was adjusted. L2 plays a significant role in normal lumbar lordosis. Normal Lumbar lordosis provides stability for neurological integrity. The spinal nerves at this level are part of the lumbar plexus which branches innervate the pelvic organs.

Subluxations of the spinal vertebra can affect different parts of the reproductive system:

- An inadequately functioning thyroid gland can lead to hypothyroidism, which is associated with infertility.
- If the adrenal gland is not functioning optimally, the body will be unable to handle stress and ovulation may be delayed or absent.
- Subluxation may cause fallopian tube malfunction which may result in infertility or ectopic pregnancy; there is also a chance that endometriosis might result. (3)
- Ovarian function may also be compromised with resulting problems with egg maturation and egg release during ovulation. Also, the corpus luteum may not produce enough progesterone to maintain the pregnancy.
- Uterine malfunction may cause problems with the development of an adequate endometrial lining for implantation of the embryo and problems with the placenta.
- Sacral subluxations can affect the functioning of the cervix. Fertile cervical fluid, essential for conception to occur, may not be adequately produced. (3)

One might argue that these years (the '30s) are some of the best to be having a baby. There has been a remarkable improvement on the outcome for both mother and infant. During the last decade, health care providers have made great strides in the ability to diagnose and treat infertility. IVF and other fertility treatments have resulted in an increase in multiple births, provoking ethical analysis because of the link between multiple pregnancies, premature birth, and a host of health problems.

Chiropractic in itself is not a 'cure' or a treatment for infertility. However, what chiropractic does is to correct distortions in the parts of the body where the reproductive organs are located and improves or restores normal neurological function. It seems that doing so can sometimes lead to fertility, as demonstrated by this case study.

Parental health and wellness prior to conception influences reproductive success and sustainability, begging efficient, effective consideration and interpretation of overall state and any biomechanical distortion which may be present.

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