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Spine & Sports: Do you really need that X-ray?

Every day, patients with neck and back pain erroneously receive an X-ray as part of a routine examination. The doctor says, "Let's take a look," and people are comforted knowing that a high-tech machine is going to peer into their body and produce a picture showing the cause of their pain.

Understandably, people want to know what is causing their neck or back problem, but unless there is viable suspicion of a dislocation or broken bone, an S-ray serves no purpose in diagnosing neck or back pain.

X-ray is a very limited tool. It only shows the black and white of bones. It does not show muscles, tendons, ligaments, blood vessels, nerves, joint cartilage, discs or connective tissues. It also doesn't always show fractures or other problems, so the "false negative" rate on an X-ray is a problem. In other words, an X-ray of the bone could look normal, but a CT (computed tomography) scan could show several fractures that the X-ray missed.

It was once deemed appropriate to X-ray the spine to look for arthritis or misalignment, since these findings were presumed to be the cause of the neck or back pain. But, research over the past 20 years has proven no correlation between altered spine alignment or degenerative arthritic changes and back pain.

Conversely, many people have terrible back pain and have completely normal X-rays. Unless there is fracture, dislocation, or a serious disease like cancer, X-rays cannot dictate how treatment should proceed. Also, since the X-ray is not very sensitive, bone changes from diseases like cancer can be easily missed. Therefore, for spine conditions, it is a mistake to hold up an X-ray and discuss treatment.

To this day, doctors inappropriately X-ray neck and back pain patients and go through an outdated protocol: "You have some arthritis, and you have a misalignment and an altered curve; I'll prescribe Drug-B; you need six weeks of therapy ... ," etc. In many cases the patient would be better off skipping the doctor's visit in favor of improving their diet and getting some exercise.

So here are the basic guidelines: It is inappropriate for doctors to X-ray a patient without clear evidence that the patient has a potentially serious or life-threatening disorder that an X-ray would show, e.g. you fell off your roof and need to know if you fractured your pelvis. It is inappropriate to use an X-ray primarily for determining the need for chiropractic or physical therapy, or for posture analysis or as a routine screening procedure or repeat procedure to measure progress. X-rays have adverse health risks, namely, exposure to ionizing radiation. Only when X-rays are used appropriately are the small adverse health risks significantly outweighed by the positive benefits. Otherwise, they are a waste of time and healthcare dollars.

We can discover a lot about a neck or back condition by taking a careful medical history and providing a thorough, hands-on physical examination. Only then should treatment or imaging (X-ray or MRI) be considered. For some joints, like hips and shoulders, X-rays may help guide treatment. Not so for the spine. A well-trained doctor of chiropractic or an astute medical PCP should know the guidelines on when to order an X-ray.

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