



Case Report

Dr. Lauren Chattigré



“Copper” 7yr old MN Smooth-Coated Dachshund
Shifting forelimb lameness.

Symptoms: 3-4 month history of shifting forelimb lameness (RF somewhat more than the LF leg) occurring roughly twice a week. The client routinely gave Copper a glucosamine supplement (SynoviG3).

Radiographs of both forelimbs and the entire spine: in-clinic assessment of the radiographs revealed a calcified disc at C3-4, and on the ventrodorsal view there appeared to be narrowing at C4-5, T1-2, T2-3, T10-11, T11-12, and possible mild narrowing at the thoracolumbar junction and lower lumbar region. Both forelimbs appeared normal for the breed.

Copper presented for VOM (Veterinary Orthopedic Manipulation) on 5/1/2007. (Please see last month’s PVMA newsletter for a discussion of spinal manipulation.) The spring-loaded Activator IV adjusting instrument was used which has four force settings; the lowest setting was selected (85 Newtons = 19 pounds) appropriate for children, small frames, and the cervical spine in humans. As the instrument thrust was applied along the spine to each vertebra in a specific manner that stimulates joint mechanoreceptors, reads* in the form of reflex muscle twitches were recorded in areas where facilitation indicated a subluxation; at the same time each thrust provided the therapeutic High-Velocity Low-Amplitude (HVLA) adjustment with the joint in its neutral position. On first pass reads were found at C3-T2, and L4-S; milder reads were also detected throughout the rest of the thoracolumbar spine but these were absent on the second pass. The primary reads found on first pass remained on second pass with reduced magnitude. No reads were detected at the forelimb joints. Since this treatment the client has not seen any forelimb lameness. A second visit on 7/6/07 revealed reads at C3-6, T1-3, T6 (mild), and T10-L7; on second pass reads were all mild at C3-5, T10-12, L2-3 (very mild), and L4-7. A third visit on 8/24/07 revealed reads at C3, C5-7, T1-2 (mild), T8 (mild), T12, and L1-S; on second pass reads were found at C6 (mild) and L4-7; on third pass no reads were found. As of mid-September, the client continues to see no lameness.

*The location of VOM reads often corresponds to problem areas identified on radiographs, but also includes other areas where joint dysfunction cannot be detected on film (or even by palpation). Reads tend to resolve more quickly in areas of secondary compensation, leaving primary reads that can be tracked over time. Sometimes a mild read will appear stronger on the second or third pass, or a new read will emerge; these reads are thought to reveal areas whose milder dysfunction was previously overshadowed by the dynamics of a more severe subluxation elsewhere, or simply a normal joint’s immediate efforts at re-establishing a new norm in the face of shifting spinal mechanics.



Cascade Summit Animal Hospital

22320 Salamo Road, West Linn, OR 97068 Tel: 503-655-1722 / Fax: 503-607-0136

www.cascadesummitvets.com

