

Non-Musculoskeletal Conditions

This page only includes articles published in the last 5 years.

Effect of mobilization on autonomic nervous system

- A 2014 systematic review found that evidence suggests that spinal mobilization in asymptomatic populations has an excitatory effect on the sympathetic nervous system, regardless of which segment is mobilized.¹

Asthma

- The 2014 update of the 2010 UK report found that evidence is inconclusive rather than negative for SMT for asthma. It also found inconclusive but favorable evidence for osteopathic manual therapy and inconclusive favorable evidence for cranio-sacral therapy.²

Cervicogenic vertigo

- A 2016 analysis of National Health Interview Survey data indicated that for the 11% of respondents reported having had a balance or dizziness problem, the odds ratio of perceiving being helped by a chiropractor was 4.36 (95% CI, 1.17-16.31).³
- The 2014 update of the 2010 UK report found inconclusive but favorable evidence for SMT/mobilization for cervicogenic dizziness.²
- The same update found inconclusive evidence for evidence for diversified chiropractic manipulation for the improvement of balance in older adults.²

Gastrointestinal conditions

A 2015 narrative review reported mild to moderate improvements in presenting symptoms and no adverse effects. Conditions included were GERD, infantile colic, colitis, inflammatory bowel disease and constipation (in children only). The review suggests chiropractic care can be considered as an adjunctive therapy for such conditions if there are no co-morbidities.⁴

Hypertension

- A 2016 meta-analysis found that massage contributes to significantly enhanced reduction in both systolic blood pressure (mean difference, -7.39 mm Hg) and diastolic blood pressure (mean difference, -5.04 mm Hg) as compared with control treatments in patients with hypertension and prehypertension. The authors concluded that the effect was medium on systolic BP and small on diastolic BP.⁵
- The 2014 update of the 2010 UK report found inconclusive but favorable evidence for upper cervical NUCCA manipulation for stage 1 hypertension; inconclusive evidence for instrument assisted, Gonstead full spine or osteopathic SMT.³

Infantile colic

- The 2014 update of the 2010 UK report found inconclusive but favorable evidence spinal manipulative therapy (SMT) and also for cranial osteopathic manual therapy.²
- A 2012 Cochrane database systematic review stated, "... it [is] impossible to arrive at a definitive conclusion about the effectiveness of manipulative therapies for infantile colic."⁶

Ischemic stroke

A 2016 randomized controlled trial found that adding eye-movement training to aspirin therapy resulted in improved outcomes for patients with acute middle cerebral artery infarction.⁷

Menopause symptoms

A 2012 position statement on the nonhormonal management of menopause-associated vasomotor symptoms (VMS) by the North American Menopause Society states that chiropractic interventions are not recommended due to the absence of any clinical trials and the finding of no association between use of chiropractic and VMS.⁸

Otitis media

A 2012 narrative review stated, “there [is] currently no evidence to support or refute using SMT for OM and no evidence to suggest that SMT produces serious adverse effects for children with OM.”⁹

Respiratory disease including chronic obstructive pulmonary disease (COPD)

- A 2016 systematic review found that there was a significant correlation between the presence of LBP and the presence of respiratory diseases such as dyspnea, asthma, different forms of allergy, and respiratory infections. No correlation was found between Chronic Obstructive Pulmonary Disease (COPD) and LBP, and no articles were found on the correlation between hyperventilation and LBP. Immunological, biomechanical, psychosocial and socio-economic factors might explain this correlation. Smoking is likely to contribute. Future studies must reveal the causative relationship.¹⁰
- A 2015 systematic review of SMT for COPD stated that although there were a small number of studies with small samples sizes, 5 of the 6 studies found improvements in lung function and exercise performance. All 3 randomized controlled trials used SMT combined with exercise from a pulmonary rehabilitation program.¹¹
- A 2013 systematic review of manual therapy for pediatric respiratory disease indicated that it appears to be beneficial; the most commonly used manual therapies for this population are chiropractic and osteopathic manipulation and massage.¹²

References

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