

Spinal Manipulation

What is manual therapy?

Manual therapy is a method of assessment and treatment that is commonly used by trained musculoskeletal Chartered Physiotherapists. It aims to quickly reduce pain and improve movement. Manual therapy treatment can include techniques that glide joints in a rhythmic manner (mobilisation), gap joint surfaces (manipulation) and/or use muscle contractions to restrict or loosen joints.

What are the effects of manual therapy?

Manual therapy rapidly reduces pain and muscle spasm and helps with movement. Additionally, manual therapy can help you use muscles that are not working due to the pain – this can help with your exercises. The effects of treatment can be short-lived and it is important that you regularly undertake stretches and exercises given to you by your Chartered Physiotherapist, which will work well with the manual therapy treatment.

What is the effectiveness of manual therapy?

Manual therapy is effective in treating neck and back pain and is recommended in national and international treatment guidelines. The majority of patients with spinal pain can expect to see a reduction in pain and improvement in function following a course of manual therapy.

What are the risks of manual therapy?

The commonest adverse reaction to manual therapy is some treatment soreness, which can last a day or two. This is a normal, temporary response to having a stiff area of the spine stretched or weak muscles exercised.

What about quick manipulative thrust techniques of the neck?

Manipulative thrust techniques involve gapping joint surfaces to effectively reduce joint stiffness, muscle spasm and pain. There are very rare cases of patients having serious adverse events, including stroke and death, following these techniques. These events are associated with damage to the arteries running through the neck. The 'average' risk of such events is estimated to be approximately 1.3 in 100,000 patients. Although it is difficult to be absolutely certain about your personal risk of a serious adverse event, your Chartered Physiotherapy is able to use current evidence as a guide to make the best possible judgement for you, given your presenting features.

There has also been a reported risk of lumbar disc herniation following a manipulative thrust technique of 1 in 8,369,129 manipulations. Also a serious complication of spinal cord compression known as Cauda Equina Syndrome (CES) has been reported in 1 in > 1,000,000-128,000,000 manipulations.

What can be done to minimise risk and optimise benefit?

Your Chartered Physiotherapist will be trained in manual therapy and will ask you a series of questions before moving your neck, to consider if manual therapy is indicated and to consider if your risk of having a serious adverse event is higher than average. Techniques will be selected that minimise the risks to the neck arteries and optimise the effects of treatment. Manipulative thrusts will only be undertaken after a thorough discussion of these issues and after gaining your consent for the technique.

What are the alternatives to manipulative thrust techniques?

Similar levels of improvement can be obtained with slow speed “mobilisation” movements and specific exercises of the neck. These techniques have not been found to cause serious damage to the arteries of the neck. Your Chartered Physiotherapist will discuss your treatment preferences before commencing treatment.



Coventry Adult Physiotherapy Service - 024 7696 1335

The information in this leaflet is based on the leaflet by the Musculoskeletal Association of Chartered Physiotherapists (MACP) 'Manual Therapy and Manipulation of the Neck 2014'. References are available on the MACP website: www.macpweb.org



The Musculoskeletal Association of Chartered Physiotherapists (MACP) is a group of over 1,100 physiotherapists, who are members of the Chartered Society of Physiotherapy. In addition to their undergraduate training they have all undertaken extensive postgraduate study and reached a recognised standard of excellence in musculoskeletal physiotherapy.

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