

ABSTRACT

The Relationship between Participation in a Manual Therapy Treatment Program and Changes in Cervical Range of Motion And Dizziness, in Patients with Suspected Servicogenic Dizziness

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Purpose

The purpose of the present study was to determine the extent to which changes occurred in selected variables associated with cervical range of motion and dizziness in subjects who were suspected to have cervicogenic dizziness and who participated in a Manual Therapy treatment program.

Selected variables included left and right upper cervical, cervical flexion and extension, left and right lateral flexion, and gross cervical left and right range of motion measurements; plus functional, physical, emotional, and total dizziness, as measured by the Dizziness Handicap Inventory.

Methodology

The research design was a single group experimental design with repeated measures. Range of motion and dizziness measurements were obtained both prior to and following participation in the Manual Therapy treatment program.

Five males and seven females were selected for the study based on their clinical diagnosis of cervicogenic dizziness and on their compatibility with the other inclusion and exclusion criteria.

The Wilcoxon signed ranks test was used to determine whether observed differences between pre and post treatment measures on the selected variables were statistically significant.

Findings

Results of the tests of significance for each of the hypotheses indicated that the observed changes exceeded the 0.05 level of confidence, therefore all 12 of the null hypotheses were rejected. Thus, this study found that the subjects who participated in the Manual Therapy treatment program improved to a statistically significant extent on the selected variables of functional, physical, emotional, and overall dizziness, and for left and right upper cervical, flexion and extension, left and right lateral flexion, and gross left and right range of motion.

Conclusions

Although no studies were found in the current literature that were identical to the current study, a few studies were found that addressed the purpose of this study in some way. Findings of the current study agree with these previous studies but additional research needs to be conducted in order to develop a more complete picture of the relationship between range of motion and dizziness and participation in Manual Therapy treatment programs. Such studies could include replicating the current study: using a control group; using the VAS and compare scores with the DHI; and adding the inclusion criterion of a positive vestibular test.