

# The Diagnosis and Treatment of Chronic and Recurrent Low Back Pain Caused by Pelvic Tilt

By Harry Oxenhandler, MD, Dipl.Ac. (NCCAOM)

*Pelvic Tilt is a very common yet frequently an unrecognized cause of chronic and recurring low back pain, being present in two out of every three low back pain sufferers. Unfortunately, in most instances, neither the patient nor the health care professional knows that it is present. The good news is that Pelvic Tilt is easy to recognize and simple to treat.*

Lower back pain affects approximately 80% of adults at some time during their lives. On an annual basis, 5% of the United States population (300,000,000 million) experiences a significant episode of lower back pain. This means that yearly, about 15-16 million people are affected. Low back pain is the most common cause of disability under the age of forty-five, and is the second most common reason for visits to a health care professional. The annual cost of medical care, including diagnosis and treatment, in the USA, is upwards of \$35-40 billion. This does not include moneys paid out in disability and in lost wages to those injured. It was previously thought that most people with acute lower back pain recovered within 30 days, with or without treatment. It is now known that up to 25% of those who have an acute low back pain episode go on to develop a chronic or recurrent low back condition. Think of that for a minute. Four million people every year develop a chronic or recurring lower back condition.

The typical low back, pain patient is someone who injures him/herself by lifting, carrying or straining while performing a common daily activity. They will usually start looking for help by going to the local MD, where a diagnosis of low back strain is made. The initial treatment will probably consist of rest,

heat, anti-inflammatory and muscle relaxant medications. The patient may recover within 1-4 weeks, only to have a recurrence 2-3 months later. This pattern may repeat again and again with the patient having undergone physical therapy, lower back x-rays, an MRI, and, of course, a consultation with an orthopedic surgeon. All of the above examinations usually result in one or more of the following diagnoses: lumbar degenerative disk disease, lumbar facet arthritis, bulging or even protrusion of a lumbar disk, lumbar scoliosis, spondylolisthesis or spinal stenosis. By now, the patient may have constant lower back pain. The patient is eventually told that they are just going to have to learn to live with it.

Unwilling to accept the above verdict and, upon the advice of a trusted friend, the patient is willing to try chiropractic manipulation or acupuncture. These are many of the people you see in your practices. Chiropractic and acupuncture may prove helpful by giving temporary relief, however the positive effects may not be long lasting and the patient must return again and again for treatment.

Starting to sound at all familiar? This scenario used to be all too common in my practice, however, not nearly so often any more. There are reasons why people have chronic/recurrent, non-surgical low back pain, other than those that show up on x-rays and MRIs. There are specific mechanical causes of low back pain that almost all MDs and even many DOs, DCs and Acupuncturists don't know about. Dr. Oxenhandler presented *The Diagnosis and Treatment of Chronic and Recurrent Low Back Pain Caused by Pelvic Tilt* at AAOM's Annual Event 2004. If you missed this workshop, you may purchase Dr. Oxenhandler's book on this subject. Contact information is provided.

---

Harry Oxenhandler, MD, Dipl. Ac. (NCCAOM): Dr. Oxenhandler graduated from medical school in 1967, and did his internship in medicine and surgery at Kings County Hospital, Brooklyn, N.Y. After graduating from the Naval Aerospace Medical Institute in Pensacola, Florida, he served as a US naval flight surgeon from 1969-71. He began a private practice in California in 1971. He began a full-time didactic and clinical apprenticeship in acupuncture and Oriental Medicine with Dr. Miriam Lee in Palo Alto, California in 1972 and completed his studies in 1974. He practiced in California for a few years before moving to Corvallis, Oregon in 1977, where he still practices today. His primary method of treatment is acupuncture. In 1986, he completed 3 years of study and over 500 hours of training in spinal manipulation through the Michigan State Univ. College of Osteopathic Medicine. His new book, entitled *The Humpty Dumpty Syndrome*, describing the diagnosis and treatment of Pelvic Tilt syndrome, was released in 2003. You may contact Dr. Harry Oxenhandler at [mastersplanpublishing@earthlink.com](mailto:mastersplanpublishing@earthlink.com).

## E-MAIL UPDATE!

Have you recently changed your email address—  
or just gotten online with your new computer?

Please remember to update your email address with the AAOM office. You can call us toll-free at 866-455-7999 or email [info@aaom.org](mailto:info@aaom.org).