

Treatment

All treatments are administered with the patient fully clothed. For lumbar treatment, the patient is comfortably positioned on the table, and the (patent pending) Pelvic Restraints are adjusted to comfortably secure the patient's pelvis. The upper torso is captured by a comfortable securing system incorporated into the fixed section of the table. The Pelvic Tilt section will be electronically tilted, so that specific spinal segments can be targeted. With precise and painless computer controlled tension, the specific disc segment is gently distracted to reduce the pressure inside the disc.



For cervical treatments, the cervical unit is first electronically tilted to the angle required to target specific segments of the cervical spine. The patient is then positioned on the table with their head positioned in the cervical cradle unit. The Cervical Restraints (patent pending) are positioned to comfortably capture the base of the patient's skull for controlled distraction.

A typical daily treatment session consists of 30 minutes of decompression on the SpineMED™ Table followed by 15 minutes of ice therapy. The process is painless and safe, and it is not uncommon for patients to fall asleep during treatment.

Most patients will find relief of their symptoms between 15 and 25 sessions, while the average recommended course of treatment is 20 sessions. Ideally, the sessions are performed daily with a rest on the weekend.

At the conclusion of the treatment series, when the disc injury has been corrected, patients are given mobilization and strengthening exercises to avoid repeat injury.

After only a few weeks of treatment, research has shown outstanding results in relieving the debilitating pain caused by degenerative, bulging, herniated or ruptured discs, as well as sciatica, posterior facet syndrome, spinal stenosis, and many failed back surgery cases. Most patients are able to return to normal levels of activity at work or recreation in just a few weeks time.

This process is not a panacea. It is gradual and requires active participation by the patient following the protocol.