

The vertebral spine as the human axis organ, physiological background and pathophysiological disturbances

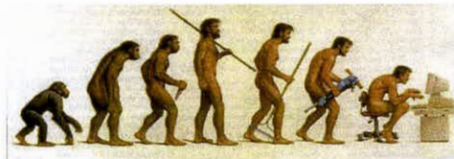
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Introduction



Evolution from „Homo erectus“ to „Homo sedens“

Die Aufrichtung und Entwicklung des Menschen vom "Homo erectus" zum "Homo sedens".

Vertebral column term of the description period of anatomy

Human axis organ central organ of the human body

Human axis organ I Functions

- Carrying the human head with brain and all important sensory organs
- Carrying the human body
- Responsible for movements of the head in all dimensions
- Fixation of shoulder girdle and the upper extremities
- Fixation of pelvis with the lower limbs
- Fixation of inner organs:
 - chest with cardio-respiratory organs
 - abdominal organs

Human axis organ II Regulation for posture and turning movements midbrain-pontine centre

- Adaptation of the human body in the gravity field
- Basis for all movements of the human body in the gravity field
- Readaption of the body position by the postural and turning reflexes due to the vestibular apparatus and the receptors of cervical spine, lumbar and thoracic spine

Phylogenetic development of the axis organ, the vertebral column

- Tunicata, external skeleton
- Development of Chorda dorsalis (amphioxus)
- Development of cartilage fish
- Development of the vertebral column
 - Horizontal position of the vertebral column
 - bone fish, amphibians, reptiles
 - arch bridge construction, partial developed
 - terrestrial tetrapods (mammals, aquatic mammals)
 - arch bridge construction, full developed
 - Vertical position of the vertebral column
 - human being
 - lattice tower construction

Tunicata, insects, echinoderms



Abb. 5. Amphibien (Tunicata gelber).
Abb. 6. Amphibien (Tunicata gelber).



Abb. 5. In Schichten verteilte Amorphosen (Tunicata gelber).

- External skeleton
- Protozoa
- Annelida
- Mollusca
- Insects
- Echinoderms
- Muscles, tendons, inner organs are inside the skeleton

Tetrapods arch bridge construction

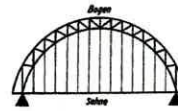


Abb. 6. Schema des Konstruktionsprinzips der Säugerwirbelbalken. Nach Sauer.

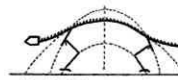


Abb. 4. Schema der Wirbelbalken eines primitiven Säugers. Nach Böhm.

- Bow consists of two parts: upper belt and lower belt
- Upper belt: vertebral arch, spine of vertebra, ligamenti, back muscles
- Lower belt: vertebral body, vertebral disc, ligamenti, short and long tendons, muscles
- bow string: cranial fixed by the ribs (chest), caudal fixed by abdominal muscles

Tetrapods scheme of the arch bridge construction

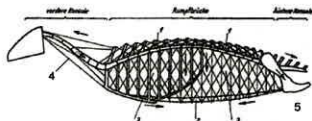


Abb. 7. Schema des Konstruktionsprinzips der Wirbelbalken beim Vierfüßler: 1. Wirbelbalken in Form einer flachen Kyphe; 2. Sehne in Form der langen ventralen Rumpfmuskeln; 3. Querstreifen in Form der Rippen und schrägen Rumpfmuskeln; 4. Anterior console; 5. Posterior console.

- Flat kyphosis of spine (1)
- Bow string long ventral trunk muscles (2)
- Ribs (chest) and diagonal trunk muscles (3)
- Anterior console (4)
- Posterior console (5)

Vertebral column in tetrapods

- Thoracic and lumbar spine
 - Fixation of the extremities for standing and locomotion
 - Support in jumping
 - Fixation of ribs and the diaphragm for respiration
 - Fixation of inner organs
- Cervical spine
 - Carrying the head with brain, sensory organs including vestibular apparatus
 - Responsible for free movement of the head
 - Receptors for gravity (neck muscles, tendons, cervical joints)
- Tail, used for balance
 - special motion receptors
- Balance, continuous regulated by postural and turning reflexes of the midbrain centres

Tetrapods

Spine maximal integrated in the running movement, galloping dog - high speed possible

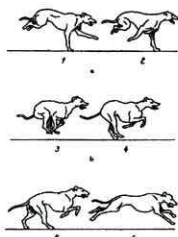


Abb. 8a-e. Bewegungsfolge eines galoppierenden Hundes mit maximaler Biegung der Wirbelbalken.

Tetrapods

big herbivores

spine serves fixation of the four extremities for standing and locomotion

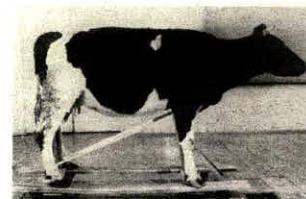


Abb. 9. Ausgestopfte Kuh. Das Präparat zeigt, daß die Bogenbäume auch nach drei Tode noch tragfähig ist.

'Great' vertebrates tetrapod and bipeds in normal gravity



Vertebral column change in special biotops passager lordosis in the lumbar region



- Lithocranium
Walleri
- a) Arch bridge construction
 - b) Lordosis during feeding



Abb. 11a. Girdelgürtel (Lithocranium Walleri) im Stand. Nach Böcker.
Abb. 11b. aufrechte Girdelgürtel (Lithocranium Walleri). Nach Böcker. —
Hier werden die zwei charakteristischen Lordosen

Vertebral column in special situations kangaroo in defence state, lumbar lordosis



Abb. 10. Kangaroo mit Lordosenbildung. Nach Böcker.

Lift-grasp-climbing position neck and lumbar lordosis development of dome construction of vertebral spine



Arch bridge construction
changing to lattice tower construction

Abb. 12. Lordose (schematisch) beim Aufrichten im Zuge des Stemm-Greif-Kletterns.

Lattice tower position



a)



b)

- a) Human: lattice tower position
- b) Gorilla: lattice tower position, rest of vault bridge construction

Homo erectus, lattice tower position dome function of the vertebrates



Cervical lordosis
thoracic kyphosis
thoracic-lumbar lordosis
fixed kyphosis of sacrum

"The design" of the human vertebral column is uncompleted, Koch 1964

Special function of cervical spine turning movements in 3 dim. Development of the Atlas-Axis-system

Three steps:

1. development of 2 condyls on os occipitale (amphibias),
2. development of a second level, the atlas-axis-joint, rebuilding of dens by loss of the first disc (tetrapods),
3. special axis-dens-system, great autonomy, but highly vulnerable (man)

Atlas, the titan giant „Who is carrying“

Son of Lapetos and of
the okeanide Klymene

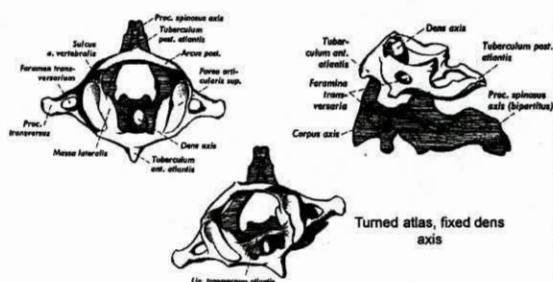


Carrying the globe

Atlas-Axis-system, different positions

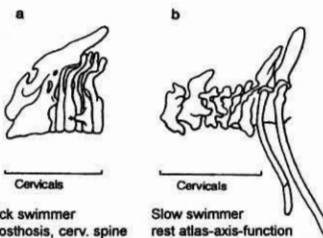
Atlas and Axis, cranial view

Atlas and Axis, view from dorsolateral



Dens-axis construction

Involution in the aqua re-adapted mammals



Free motion of cervical spine of the terrestrial mammals lost in aqua-re-adapted mammals
Only restricted movement possible

Abb. 4a,b. Seitliche Ansicht der HWS von a *Dolphinus delphis* (schneller Hochseeschwimmer)
b *Platanista gangetica* (langsamerer Flußbewohner) (Nach Piller)

Vulnerability of the human vertebral spine incompleted development of lattice tower position, high vulnerability of axis-dens-system

- overloaded due to unphysiological position (industrial life), typical symptoms of cervical spine and lumbar region (Mumenthaler, Schliack)
- psychological factors, influencing regional dysfunction of vertebral spine, mainly upper part
- motion trauma of cervical spine (whiplash injury), mostly including the other parts of vertebral spine (typical acute symptoms, sometimes long-lasting dysfunction, sometimes defect states)

Cervicogenic headache (tension headache) Symptomatology

- Pressure headache, from neck to occipital, mostly to the forehead, both sides, seldom one side,
- Helm-feeling, sometimes ring-shaped feeling
- Pressure feeling in the orbita
- Increase of headaches during coughing, unpleasant position of head and body, during fever state
- Starting possible due to external influence
local cooling, trauma of vertebral spine, etc.
- Additional symptoms:
 - pain in C2 with dysesthesia
 - pseudo-trigeminal pain
 - atypical face pain

Cervicogenic headache

- Neurological findings
 - Dysesthesia on scalp, one side, both sides
 - Dysesthesia in C2 (sometimes)
 - Dysesthesia in trigeminal area (sometimes)
 - first branch or all branches, one side, both sides
 - Pressure pain occipital, one side, both sides
- Neuro-orthopaedic findings
 - blockage occipital/C1, C1/2
 - tensed region upper neck part
 - pressure pain paraspinal upper cervical spine
 - stretch-position of cervical spine
 - dysfunction of other vertebral spine

Cervicogenic headache Differential diagnosis (I)

- Occipital neuralgia, (over diagnosed, Mumenthaler, 1970)
 - differentiation to cervicogenic headache clinically not possible
 - Insertion tendinosis of neck muscles
 - local zones of hyperalgesia
 - often disturbances of occipital joints
- Tension headache, real form
 - differentiation to vertebrogenic headache clinically not possible
 - diagnosis only acceptable:
 - no signs of cervico-occipital irritation
 - no signs of cervical irritation
 - no effect after special vertebral treatment
 - psychic irritation

Cervicogenic headache Differential diagnosis (II) Vasomotoric headache

- Migraine cervicale (old terminology)
- Migraine (different forms)
- Cluster headache
 - Erythropsopalgia = Horton neuralgia
 - Chronic paroxysmal Hemicrania (CPH)
 - Hemicrania continua (HC)
- Rare vasomotoric headache
 - Ice cream headache
 - coughing headache
 - Carotidodynia

Upper cervical syndrome

- Combined symptoms
 - Cervicogenic headache
 - Cervicalgia
 - Migraine cervicale (old terminology)
 - Cervicogenic dizziness
 - attacks of vertigo, spontaneous or due to quick head movement
- in addition:
 - middle and lower cervicale syndrome
 - cervico-dorsalgia, dorsalgia, lumbalgia
 - combination with pseudo-radicular symptoms

Cervicogenic headache Examination program

- Neurological examination
- Manual examination, functional state of vertebral spine, especially cervical spine
- Examination of malstereotypias of body position and body movement
- X-ray of cervical spine with functional radiogram
- X-ray of the additional vertebral spine
- Cervical MRI

X-ray cervical spine female patient, 47^a diagnosis: cervicogenic headache



a) Retroflexion, blockage upper part, dysbalance occipito-atlanto-axial joint



b) Anteroflexion, blockage in upper part and lower part of cervical spine

Cervical MRI

female patient, 47^a
diagnosis: cervicogenic headache

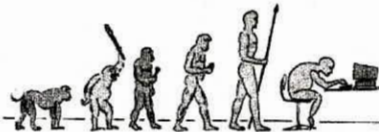


Stretch-position of cervical spine, mostly upper part, multisegmental disc protrusion, incipient vertebral stenosis C5/C6

Cervicogenic headache Therapy program

- Deblockage of blocked cervical spine motion segments, using manual therapeutic methods, mainly postisometric relaxation (Lewit)
- Physio-therapy program for correction of malposition and malstereotypias
- Physio-therapy program for correction of insufficient neck muscles and vertebral muscles
- Local infiltration of tensed muscle areas, tendomyogelosis, etc.,
Xyloneural
"Tilscher scheme"
- Drug treatment
Muscle relaxantia, analgetica, etc.

From tetrapods to homo sedens
high vulnerability of the cervical spine
to direct impacts and to
malfunction due to the industrial life



Die Aufrichtung und Entwicklung des Menschen vom "Homo erectus" zum "Homo sedens".

>>> **POSTER PRESENTATIONS / POSTEROVÉ PREZENTACE**

1. A. Krobot, J. Macháček, D. Horák (Olomouc)
Klasifikace a léčba "cristallin" a "lunární" onemocnění
2. A. Jaskotová (Vysoké Mýto)
Symptomy a léčba onemocnění pohybového aparátu u pacientů s traumatem
3. A. Pech (Brno)
Riziko a léčba onemocnění pohybového aparátu u pacientů s traumatem

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member of the International Federation for Manual/Musculoskeletal Medicine (IFMIM)
on

>>> **A Complex Approach to the Problem of Disturbed Function of the Motor System** <<<



>>> **October 12 - 14, 2006 In the Regional Centre Olomouc** <<<

PROGRAMME



>>> FRIDAY, OCTOBER 13, 2006

CHAIRS: K. LEWIT, V. TOŠNEROVÁ, L. ŠORFOVÁ

- 09.00-09.20 **Vlasta Tošnerová** (Czech Republic), **Kubica Šorfová** (Slovak Republic): Welcome to Olomouc
- 09.20-09.40 **Richard Ellis** (United Kingdom): Is Professor Lewit cost-effective? (Vypíště se Prof. Lewit?)
- 09.40-09.50 **Alena Kobesová** (Czech Republic), **Craig Morris** (USA): Tribute to Prof. Lewit and Prof. Janda (Na počest Prof. Lewita a Prof. Jandy)
- 09.50-10.15 **Karel Lewit** (Czech Republic): 50 let rehabilitačního lékařství: (Rehabilitation doctor for 50 years):
- 10.15-10.45 **discussion and congratulation**
- 10.45-11.15 **coffee break**

CHAIRS: J. JANDOVÁ, J. VACEK

- 11.15-11.35 **Bernard Terrier** (Switzerland): International manual medicine yesterday and tomorrow (Mezinárodní manuální medicína včera a dnes)
- 11.35-11.55 **Mika Hutton** (United Kingdom): The application of complexity theory to soft tissue dysfunctions (Applikace teorie komplexnosti na dysfunkci měkkých tkání)
- 11.55-12.15 **Jacob Padijn** (The Netherlands): Reproducibility studies in manual/musculoskeletal medicine: how necessary are they? (Studie reprodukovatelnosti v manuální/muskulosterní medicíně: do jaké míry jsou nutné?)
- 12.15-12.45 **discussion**
- 12.45-13.45 **lunch break**

CHAIRS: P. KOLÁŘ, J. ROUBALOVÁ

- 13.45-14.05 **Pavel Kolář** (Czech Republic): Spondylolisthesis: diagnosis and therapy (Spondylolisthesis: diagnosis and therapy)
- 14.05-14.25 **Craig Morris** (USA): Lumbopelvic motor control: updates in research and clinical practice (Lumbopáněvní řízení pohybu: novinky ve výzkumu a klinické praxi)
- 14.25-14.45 **Franz Gerstenbrand, Walter Struhal** (Austria): The vertebral spine as the human axis organ, physiological background and its pathophysiological disturbances (Páteř jako osový lidský orgán: fyziologický background a jeho patofyziologické poruchy)
- 14.45-15.15 **discussion**
- 15.15-15.45 **coffee break**

CHAIRS: A. ŠNOPLOVÁ, S. BODNÁŘ

- 15.45-16.05 **Beat Dejung** (Switzerland): Myofascial pain conceptions will help manual medicine to survive (Koncepte myofasciální bolesti pomůže manuální medicíně přežít)
- 16.05-16.25 **Meinhard Berger** (Austria): Whiplash injury – myoskeletal lesion or myth? (Whiplash injury – myoskeletální poranění nebo mýtus?)
- 16.25-16.45 **Nell Osborne** (United Kingdom): Whiplash: I can see it in your eyes (Whiplash injury: vidím to ve vašich očích)
- 16.45-17.05 **Clayton Skaggs** (USA): Masticatory muscle function: new considerations in neck and jaw rehabilitation (Funkce žvýkačkových svalů: nové úvahy o rehabilitaci krku a čelisti)
- 17.05-17.35 **discussion**
- 19.30-22.00 **Welcome party / Společenský večer**

>>> SATURDAY, OCTOBER 14, 2006

CHAIRS: A. KOBESOVÁ, J. JANDOVÁ

- 09.00-09.20 **Mark Webster** (United Kingdom): The art of assessment & therapeutic manual skills – a critical update (Umění manuálního vyšetření a terapeutických dovedností – kritická aktualizace)
- 09.20-09.30 **Jesper Andersen** (Denmark): Influence of the Prague School of thought on chiropractors in Denmark, and some visions (Vliv myšlení pražské školy na chiropraktiky v Dánsku, některé vize)
- 09.30-09.50 **Niels Grunnet-Nilsson** (Denmark): Physical treatments of chronic headache – a Cochrane review of the evidence (Fyzikální léčba chronické bolesti hlavy – přehled průkazů v Cochraneově databázi)
- 09.50-10.10 **Hans van Helvoirt** (The Netherlands): Mechanical diagnostics and therapy in manual medicine (Mechanická diagnostika a terapie v manuální medicíně)
- 10.10-10.30 **Clayton Skaggs** (USA): A functional model for treating musculoskeletal pain in pregnancy (Funkční model pro léčbu muskulosterních bolestí v těhotenství)
- 10.30-11.00 **discussion**
- 11.00-11.30 **coffee break**

CHAIRS: K. VÉLE, P. PUKSA

- 11.30-11.50 **Helena Hermachová** (Austria): About the feet again: More about stability of the feet (Znovu o chodidle. Něco navíc o stabilitě chodidla)
- 11.50-12.10 **Magdalena Lepšíková, Karel Lewit** (Czech Republic): Role of chodidla ve stabilizačním systému (Role of the feet for the stabilizing system)
- 12.10-12.30 **František Véle** (Czech Republic): Role nervového systému v motorice člověka (The importance of the nervous system for motor activity)
- 12.30-13.00 **discussion**
- 13.00-14.00 **lunch break**

CHAIRS: V. TOŠNEROVÁ, E. JANÍKOVÁ

- 14.00-14.15 **A. Lahme** (Germany): Overuse problems of the hand and wrist with musicians (Problématická přetížení ruky a zápěstí u hudebníků)
- 14.15-14.25 **E. Durišová, E. Rexová, P. Rexa, J. Zvarka** (Slovak Republic): Ovlivnitelné rizikové faktory osteoporózy a funkční patologie (Risk factors in osteoporosis and its functional pathology)
- 14.25-14.35 **L. Marič, K. Novotná** (Czech Republic): Vliv léčebné tělovýchovy ve vodě na léčbu bolestivých stavů ramenního kloubu (Influence of the hydrokinesiotherapy on treatment of the painful shoulder)
- 14.35-15.00 **discussion**

Closing of the conference