

10th Annual Joseph W. Howe Oration in Diagnostic Imaging



“Innovations in Diagnostic Imaging”

Presented By:

Terry R. Yochum, DC, DACBR, Fellow ACCR, FICC

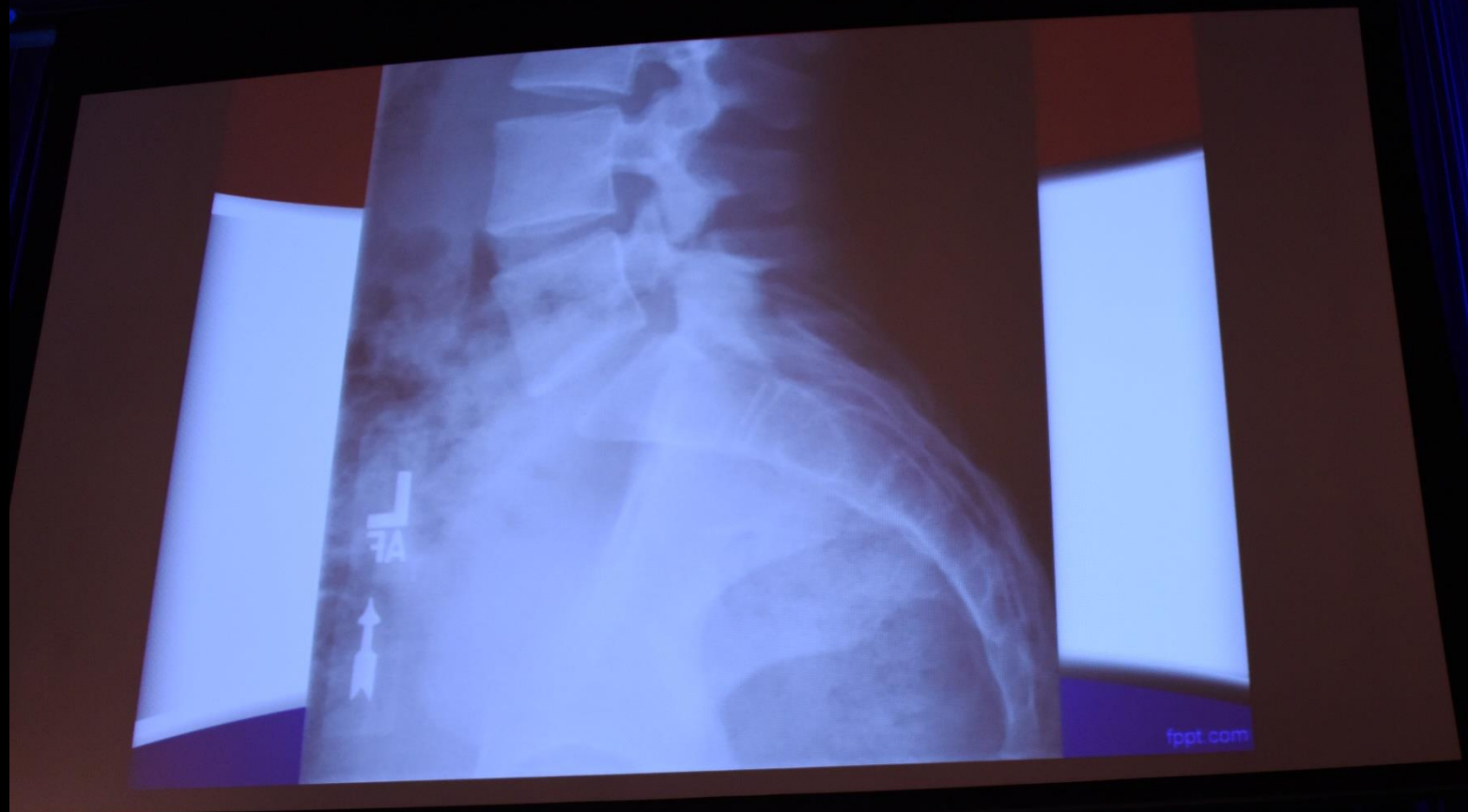
James M. Cox, I, DC, DACBR, FICC

Norman W. Kettner, DC, DACBR, FICC, DCBCN

Thursday, May 25, 2017

10:30 a.m. – 11:30 a.m.

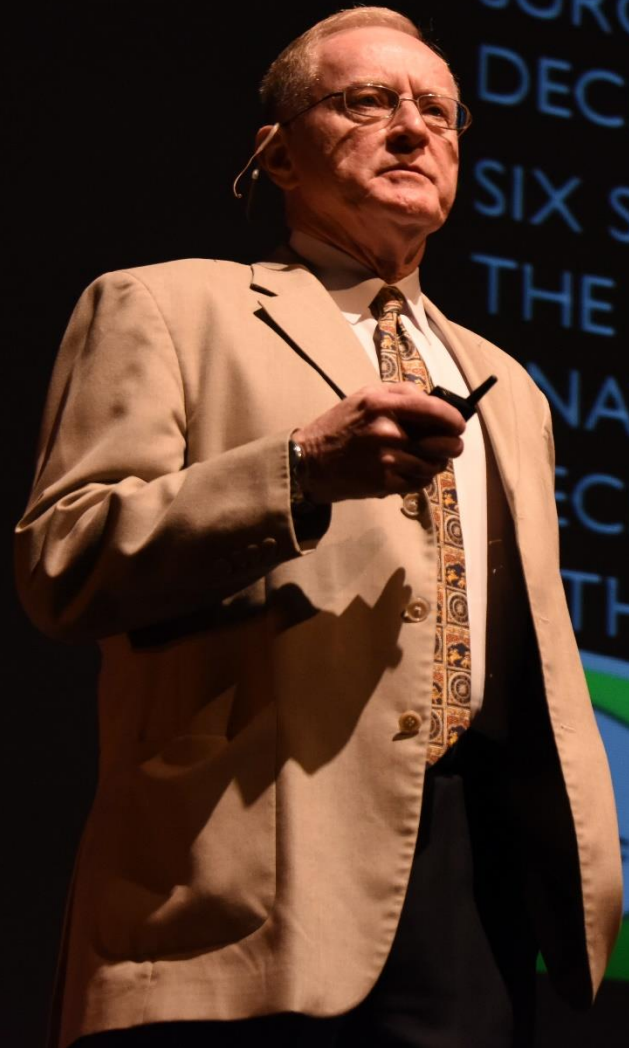












WILSON A, WILSON F. THE AETIOLOGIES OF FAILED BACK SURGERY SYNDROME: A SYSTEMATIC REVIEW. J BACK MUSCULOSKELET REHABIL. 2016 5

- ▶ 4 TO 50% OF LUMBAR SPINE SURGERY PATIENTS DEVELOP FAILED BACK SURGERY SYNDROME (FBSS). SURGERIES LEAD TO ESCALATING COSTS AND DECREASES IN SUCCESS RATE.
- SIX STUDIES OF 663 PATIENTS SHOWED 22% OF THE CAUSES OF FBSS CAN BE ATTRIBUTED TO ANATOMICAL, PERIPHERAL PAIN GENERATING MECHANICAL, NEUROPHYSIOLOGICAL, SOMETIMES OTHER' AETIOLOGIES.

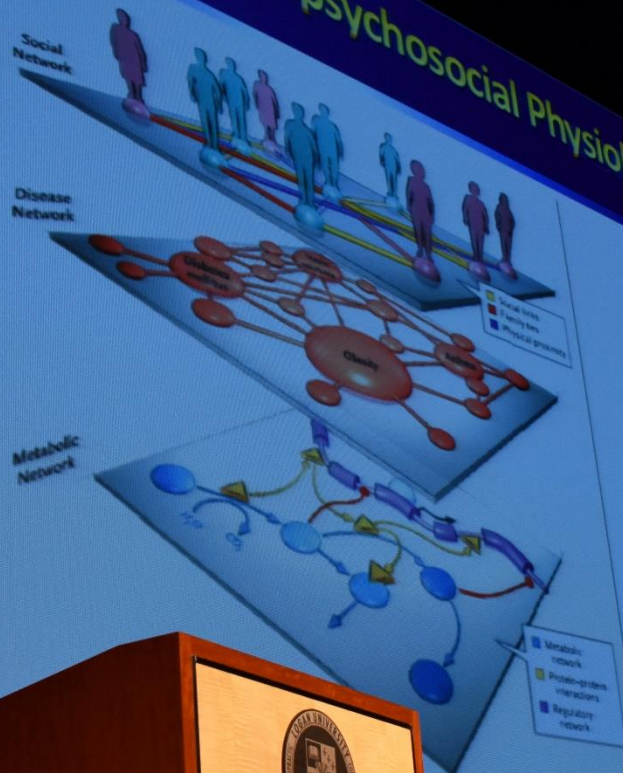


- ▶ The patient
- ▶ Specific F/ administe
- ▶ VAS 0-10 active car
- ▶ The num 24 mont
- ▶ Addition causing p dent's

Cox
Technic



Integrative Biopsychosocial Physiology



Christakis and Fowler, 2007





Norman W. Kettner, DC, DACBR, FICE, DODON

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