

Chiropractic BioPhysics CBP—The Science of Spinal Health

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Instructions for Wall Mounted Compression Extension 2-Way Traction Unit

- 1. Mount the Rail-Track into a wall stud using 4-5 wood screws. See Figure 1.
- 2. The Bottom of the Rail-Track Should be approximately 35 inches from the floor. See Figure 1.
- 3. Place a chair approximately 2-3 feet from the rail. See Figure 1.
- 4. A backboard should be place in front of the back of the chair so that the mid-scapular level is supported. Also, a wedged fulcrum (thicker at the top and tapering towards the bottom) can be used to prevent Thoracic Extension in the Chair. In other words most chair backs tilt backwards and it is beneficial to keep the patient in a nearly vertical orientated thoracic posture. See Figure 1.
- 5. The Backboard and Thoracic wedge can be ordered through Harrison Chiropractic Supply (<u>www.Harrisonchirosupply.com</u> or phone 1-800-525-6634.
- 6. You were provided with 5 Weight bags. You need to fill these weight bags with lead shot. It is recommended that you place the shot in a zip-lock bag prior to being placed in the weight bag. You should make a 3, 5, 7, 10, and 15 lb weight bag to start with. If you need more weight bags, these can be ordered through Harrison Supply as in #5 above.
- 7. If the patient's arms do not touch on the arm-rests of the chair, a foam block should be placed between the arm-rest and the patient's arms. This relieves shoulder tension.



Figure 1.



General Compression Extension 2-Way Traction Procedures:

- 1. It is up to you, the treating Chiropractor, to decide if your patient is a candidate for compression extension 2-way traction. Generally, contra-indications to Cervical Spine Manipulation and Cervical Spine Extension postures are also Contra-indications to Compression Extension 2-Way Traction.
- 2. Patients should be started without the forehead/chin compression Weight and only 10-12 lbs on the front depending on size of the person. Once they can tolerate this for 5-10 minutes, then weight is added to the forehead/chin compression harness.
- 3. <u>General Rule</u>: Approximate 2 to 1 Front to Back weight ratio. Start with 1-5 lbs on the back and 10 lbs on the front for 1-2 minutes. Build 1 min each session (to tolerance) to 20 min. Then increase weight, decrease time. Usually, 15 lbs 30 lbs. is the maximum tolerable weights for the average person.
- <u>Note</u>: This setup/ weight ratio can be modified depending upon the patients curve, sagittal plane posture, and flexibility in the traction setup.

Indications: Generally Type 4 and Type 5 Lateral Cervical Curvatures Respond Best to This Type of Traction—see Ch 6 Cervical Rehab book by Harrison DE et al.

- 1) Most versatile, most effective, usually best for elastic females, cervical kyphosis, neck's that did not change in the other traction setups.
- 2) Angle of front pull strap relative to horizontal is based on the following criteria:
 - \circ 0-10° for lower cervical spine,
 - \circ 10-20° for mid cervical spine
 - 20-30° for upper cervical spine.
 - Flexible necks need a slightly increase angle of front pull and/or less weight on the head.

Contraindications In Addition to Other Contraindications as stated above:

- 1) Canal Stenosis with radicular symptoms and upper motor neuron lesions,
- 2) Anterolisthesis that is unstable,
- 3) Large anterior head translations,
- 4) Non-flexible or rigid necks.
- 5) Dizziness, Nausea, Vertigo, Nystagmus.
- 6) Surgically or congenitally altered vertebral alignments.

Pictures of Setup Examples Where the Angle of Front Pull is Changed for Different Cervical Spine Curvatures. See CBP[®] Cervical Rehab Book Chapter 6 for Details.

