



Vibrating TractionTM

Instruction Manual

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Vibrating Traction[™]

Instructional Manual Copyright 2019

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Table of Contents

Warranty & Repair Information	•	•	5
About Vibe For Health [™]	•		6
The Science Behind Vibration Therapy .	•		9
Instructions for Assembly and Maintenance			13
Using the Vibrating Traction™ in your Clinic	•	•	13
Research & Literature on Vibration Therapy	•		16

Welcome!

Thank you for purchasing the Vibrating Traction[™] from Vibe For Health.

This Instruction Manual will help you to maximize the benefit of the Vibrating Traction[™] and familiarize you with its many possible applications. Please take a moment to review the contents of this booklet before you begin using the Vibration Traction[™]. In no time at all, you will be ready to take your spinal rehabilitation protocols to the next level.

Let's get started by reviewing the contents of your package. Inside the box that your new Vibrating Traction[™] arrived in, you should find:

One (1) Vibrating Traction[™] motor unit One (1) VT flex cable with attached cylinder One (1) Cervical Traction Halter with Weight Bag One (1) Foam Roll with Cover ... and, of course, this Instruction Manual

If you are missing any of this equipment, please contact Vibe For Health immediately at (866) 520-4270, ext. 1, or <u>care@VibeForHealth.com</u>.

If your package arrived with signs of damage, please contact the shipping company (typically UPS) immediately to file a claim. It is the standard policy of all major shipping companies to require that the recipient (not the shipper) notify the company of any damage that occurred to the package or its contents while in transit.

Warranty and Repair Information

Satisfaction Guarantee (30 days) – all products sold through Vibe For Health are guaranteed to meet or exceed your expectations. If you are dissatisfied with your purchase, we encourage you to contact us directly at (866) 520-4270, ext. 1, or <u>care@VibeForHealth.com</u> to give us the opportunity to make it right. In the unlikely and unfortunate event that we cannot resolve your problem, we will provide you with a complete refund, provided that 1) Vibe For Health was provided with information regarding the issue, and given an opportunity to remedy the problem to your satisfaction, and 2) the purchase was made no more than thirty (30) days prior to the refund request.

Limited Warranty (1 year) – for up to one year from the date of purchase, all parts & accessories are covered against the risk of manufacturing defects, equipment malfunction, and normal wear & tear resulting from using the Vibrating Traction[™] in accordance with the instructions herein. Damage caused to the unit by using the Vibrating Traction[™] in a manner that is not consistent with the protocols outlined in this Instruction Manual will NOT be covered. Furthermore, any modifications, alterations, or tampering with the unit will void the warranty. All repairs and procedures performed on the Vibrating Traction[™] MUST be performed by a Vibe For Health-approved repair facility. Any unauthorized repairs done on the unit will void the warranty. The dollar amount of Vibe For Health's financial responsibility to the customer under this limited warranty is limited to the total retail price of the equipment.

In Case of Malfunction/Breakage – first, please replace the fuse as described on page 14. If the problem persists, please notify Vibe For Health directly at (866) 520-4270, ext. 1, or <u>care@VibeForHealth.com</u>. You will be provided with a Repair Order Form, packaging to return the unit (if necessary), and additional instructions.

Vibe For Health reserves the right to ultimately decide whether to provide compensation and/or repair service on any and all of its products.

About Vibe For Health

In 2000, Dr. Dennis Woggon founded the CLEAR Institute, an organization he established to provide advanced training to chiropractors specializing in structural corrective care techniques. One of the first conditions that Dr. Woggon and his colleagues would focus on was scoliosis. Although initially the focus of CLEAR Institute was simply on improving the understanding of spinal biomechanics, the unique aspects of the scoliotic spine make it a particularly challenging condition for



corrective care doctor to work with, and many doctors, such as Dr. Gary Lawrence, sought out Dr. Woggon's assistance in working with cases of scoliosis. Realizing that there was very little research that currently existed in the field of corrective care chiropractic and scoliosis, and no formal chiropractic protocol for treating it, Dr. Woggon began a long and arduous process of evaluating the current medical & chiropractic literature, learning (many times through trial and error) which methods were effective in scoliosis care, and which ones were not.

Over the course of the next few years, Dr. Dennis Woggon went on to invent The Vibe, the Vibrating Traction, the Scoliosis Traction Chair, and the Mechanical Drop Piece. Each item was created in response to a specific need that Dr. Woggon observed in the patients in his practice, and each item, as it was introduced into the patients' care plan, resulted in better consistency and permanency in their results.

By 2003, the new scoliosis treatment protocol had advanced sufficiently to merit inclusion into the Post-Graduate curriculum of Parker University in Dallas, Texas, and Dr. Woggon continues to teach this 3-part seminar series twice each year. One of the main tenets of chiropractic corrective care for scoliosis is sagittal curve restoration; without first restoring normal sagittal alignment, the coronal scoliotic curve will not reduce.

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In 2007, the CLEAR Scoliosis Clinic of Dallas, was founded on the campus of Parker University, the first and only clinic devoted exclusively to scoliosis to be established on the campus of a chiropractic college. This clinic would go on to serve as the fountainhead for CLEAR Institute's research efforts. To support the goal of advancing research and education, CLEAR Institute applied for and received official 501(c)3 Non-Profit Status. In 2008, the patents for the equipment were transferred from CLEAR Institute to a new corporation – Vibe For Health.

Our Mission

The mission of Vibe For Health is:

To serve chiropractors specializing in structural corrective care as a trustworthy source

for evidence-based information, equipment, and other clinical resources.

To achieve this goal, Vibe For Health works very closely with a large team of chiropractors who maintain active clinical practices focused around pre & post x-ray analysis and specialized adjusting procedures. Through the objective data and professional feedback shared by these doctors, Vibe For Health acquires information about what works, what doesn't, and why. The ultimate test that each piece of equipment must pass before being offered through Vibe For Health is simple: it must be a product that the structural care chiropractors on our team use on a regular basis in their own active practices, and it must have been proven effective in a manner that is objective, testable, and reproducible (in other words, testimonials from our customers and patients are not sufficient).

Why is this important?

First, by moving away from a technique-based model towards an outcome-based model, the doctor is not limited to only one skillset, and the focus is purely on the results achieved by the patient. Vibe For Health aims to serve chiropractors who specialize in ANY technique that revolves around pre & post x-ray analysis and postural rehabilitation; while the applications may vary, the end goals are the same, and so the equipment sold through Vibe For Health serves as a useful compliment to all of them.

Second, researchers have called attention to the lack of quality control and/or assurance on healthcare products sold in the offices of chiropractors. Many of these products have not been independently evaluated for proof of their effectiveness, and the chiropractor selling the products, not the company, is the one whose reputation ultimately suffers when these products fail to deliver on their promises. Vibe For Health is committed to doing our homework on the products that we sell, so that you can consistently rely upon us to deliver products that will result in a measurable improvement in your patients' results, and thus increased patient satisfaction with your care.

Third, the "gap" between scientific research and clinical application has long been recognized to be a major obstacle when implementing innovative care plans, such as spinal structural correction. The perceived lack of evidence results in many chiropractors providing valuable services to their patients, which are then deemed "non-covered" or "not medically necessary" by third-party payers. When the patient is reluctant to pay for these services out of their own pocket, their care plan may suffer, or even be rendered ineffective. Vibe For Health understands that many corrective care chiropractors encounter this frustrating situation on a regular basis. For this reason, Vibe For Health has built and actively continues to build an ongoing database of clinical trials, pragmatic research, and peer-reviewed published scientific articles that illustrates the science and the benefit of structural corrective care, as well as the specific benefits of our products, and we readily share this information to assist our customers.



Written by Dr. A. Joshua Woggon DC

Many chiropractors and healthcare professionals are familiar with the concept of Whole-Body Vibration (WBV) therapy; The Vibe[™] created by Vibe For Health is an example of a WBV platform. When properly applied, WBV therapy is an excellent complement to chiropractic care. Many people use WBV therapy as a way to improve balance & posture, prevent falls, and increase bone density without using drugs.¹ It can also speed the healing of sprains, strains, fractures, and other injuries.²

The Vibrating Traction[™], however, is not a form of WBV therapy, as the whole body of the patient is not being stimulated, and the patient is also non-weight-bearing when the vibration is applied. The theory and principles behind WBV therapy and the Vibrating Traction[™] are not identical; in fact, research suggests that if a patient was exposed to the frequencies used by the Vibrating Traction in a standing or seated position, it could have a potentially deleterious effect upon the body.³

A vibration is like a wave, repeated over and over again. Scientists quantify this wave through its frequency (the number of waves per second, measured in Hertz) and its amplitude (which is the size of the wave) – just like a radio receiver captures radio waves based upon their amplitude (AM) or frequency (FM).



These two factors also determine the effect of vibration upon the body; different tissues in the body will respond to different frequencies. For instance, research has shown that the collagen which makes up the cartilage of your joints and the discs between the bones of the spine responds to a slow pulse of 4 Hertz (four pulses per second).⁴ This is the foundation behind the Vibration Traction[™]. The muscles respond best to frequencies between 30 and 50 Hertz,⁵ and the ideal frequency window for stimulating bone growth and rehabilitating posture, balance, & co-ordination is 30 Hertz (which is the basis of The Vibe[™]).^{6,7} With a thorough understanding of - and control over - the parameters of vibrational frequencies, various different vibration therapy methods can be used in different positions and applied to different aspects of the body, and achieve consistently good results.

Research on vibration began back in the 1970's, with the creation of the Occupational Safety and Health Administration (OSHA) under President Nixon. The first studies focused primarily on the potential damage that vibration exposure in the workplace could inflict upon the musculo-skeletal system in occupational workers. After reading the conclusions of these studies, the International Standard Organization recognized in Section 2631-1 that different types of vibration – such as rotating, oscillating, or vertical – are tolerated differently by the body, and introduced a complex series of formulae designed to measure the forces transmitted into the human frame from each type of vibratory stimulus.

Early research, conducted back in the 1980's, found that the discs of the lumbar spine were particularly vulnerable when subjected to a certain combination of factors; sitting, flexion, rotation, and vibration all negatively influenced the ability of the IVD to resist prolonged loading.⁸ In particular, vibrational frequencies in the range of 4 to 5 Hertz were found to be particularly damaging.⁹ While the mechanism is not fully understood, we know that from the work of Panjabi *et al* that the spine resonates at a similar frequency,¹⁰ and more recent research demonstrated that collagen fibers exposed to vibration at this level exhibited an increased magnitude of deformation.¹¹

This work was very helpful in assisting occupational safety personnel with designing new, ergonomically-friendly workforces that minimized the risk of injury. Decades after the original findings were published, it would also go on to stimulate a new innovation in scoliosis care.

In the condition of scoliosis, the ligaments experience a "bowstring" effect on the concavity of the curve - shortening, tightening, and through the process of creep, gradually becoming resistant to attempts to lengthen them and straighten the curve. In addition, the wedging of the intervertebral discs has been found to play a major role in the progression of the curve.¹² In the typical adolescent, ligaments are actually stronger than bones,¹³ suggesting that if only brute force is used, the bones will fail before the ligaments. Rehabilitation of acutely-injured ligaments is well-understood if a bit simplistic, with most approaches revolving primarily around the "RICE" principle (rest, ice, compress, elevate). The scoliotic disc and ligament, by comparison, are not truly "injured," but nonetheless are in need of rehabilitation. However, the literature behind the proper rehabilitation of an uninjured but deformed ligament is lacking.

The research on vibration clearly demonstrated that vibration in the realm of 4 to 5 Hertz affected the spine; furthermore, it was clear that the effect was decidedly negative when the individual was sitting, standing, or in a position of flexion or rotation – all risk factors promoting the occurrence of disc injury. However, the effect of vibration was not dependent upon the position – the relaxation effect occurred in each subject regardless of seated versus standing. Logically, then, vibration at 4 to 5 Hertz should have the same beneficial effect in terms of relaxing the collagen that makes up the ligaments, discs, and tendons; but unlike in a seated or standing position, it will not compress the discs and collapse the spine as the surrounding ligaments relax.

Putting this theory to the test, Dr. Dennis Woggon began utilizing the Vibration Traction[™] on the patients with scoliosis under his care.

The results were nothing short of astounding. Before introducing the Vibrating Traction into the patients' care, the typical scoliosis treatment plan was around four-and-a-half months. With the Vibrating Traction[™] helping to relax the spine faster, it became possible to introduce a two-week treatment protocol that could achieve similar results in a drastically reduced timeframe. Currently, the Vibration Traction[™] is the only device in the world to take advantage of this specific frequency to facilitate ligament rehab. The only other method of rehabilitating discs and ligaments is the prolonged application of forces over extended periods of time; namely, bracing.

The applications of the VT are not limited to scoliosis, however. The same biomechanical principles that apply to the scoliotic spine, in this instance, can also be applied to the non-scoliotic spine. Using the Vibrating Traction[™] on your patients with disc, ligament, or tendon injuries can result in a substantially quicker recovery time. Patients who have been involved in motor vehicle crashes, or who suffer from whiplash-associated disorders, can sometimes find relief with the Vibrating Traction[™] when all else fails. In addition, numerous doctors from around world have noticed in their clinical practices that, when the Vibrating Traction[™] is used as part of the care plan, lordotic restoration can occur in a fraction of the time that might be expected.

Vibration therapy, as distinct from WBV therapy, is one of the most recent scientific advances in spinal rehabilitation. Only recently have scientists begun to explore the potential of vibration therapy in the treatment of herniated discs. First hypothesized in 2003,¹⁴ recent studies published in *Spine* documented improved extracellular matrix gene expression after a specific protocol of vibration therapy, providing evidence of a therapeutic benefit.^{15,16}

While research is ongoing in the field (as tends to be the case with cutting-edge therapies), the clinical successes reported by hundreds of chiropractors using the Vibrating Traction[™] suggest that the addition of vibration therapy to existing spinal rehabilitation protocols drastically enhances the rate at, and degree to, which the patient responds to chiropractic corrective care.

Directions for Assembly and Maintenance

The Vibrating Traction[™] was first developed and patented in 2002. In 2011, the design was upgraded to add greatly to its durability, ease-of-use, and professional appearance.

When your Vibrating Traction[™] arrives, the motor unit will be separate from the flex cable and cylinder. Whenever you move or transport the Vibrating Traction[™], you should always disconnect the cylinder from the motor unit first in order to avoid any potential damage to the connection.



The motor in the Vibrating Traction[™] requires no maintenance, and has an estimated life of over 10,000 hours. **There are no user-serviceable parts inside the motor unit.** The cover on the motor unit is fiberglass with applied gray-scale decals, making it resistant to scratches, marks, and cosmetic damage. If a stain does occur, always start with the least abrasive cleaner (such as soap and water) before trying more powerful chemicals, and always remove the plug from the wall before performing any type of cleaning or maintenance upon the unit. The black head harness and weight bag, as well as the foam roll cover, are machine-washable and can also be cleaned easily by hand with soap and water.

You can order replacement head harnesses, weight bags, and foam rolls & covers by contacting

Vibe For Health at (866) 520-4270, ext. 1, email: <u>care@VibeForHealth.com</u>. Online at: <u>www.vibeforhealth.com</u>

Using the Vibrating Traction[™] in Your Clinic

DISCLAIMER: The information in this section is intended to serve as a helpful resource for licensed physicians when utilizing the Vibrating TractionTM on patients in a clinical setting. It is not intended to replace or supplant the decision-making ability of the treating doctor, and Vibe For Health cannot be held liable for any injury or outcome resulting from use or non-use of the guidelines provided herein. If you have any questions regarding the clinical usage of the Vibrating TractionTM after reading this manual, please contact Vibe For Health at (866) 520-4270, ext. 1, or <u>care@VibeForHealth.com</u>.

Getting Started

Step One: Establishing the Indication for Care

First, it is important to understand when the Vibrating Traction[™] is indicated for treatment. Based upon the research behind the function of the Vibrating Traction[™] and the clinical experience of the chiropractors using it, Vibe For Health has compiled the following suggested indications for including the Vibrating Traction[™] in the patient's care plan.

- Loss of the cervical or lumbar lordosis
- Forward Head Posture/Upper Cross Syndrome
- Radiographic evidence of Loss of Motion Segment Integrity (LMSI) on flexion/extension films
- Suspected alar or transverse ligament damage
- Radiculopathy/referred pain syndromes
- Cervical or lumbar stenosis/foraminal encroachment
- Spondylolisthesis/Retrolisthesis
- Herniated disc, disc wedging, or injury to the IVD
- Decreased IVD height (less than 40% of the vertebral body height in the cervical spine, 20% in the thoracic, or 33% in the lumbar spine)

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- Arthritis/inflammation of a joint, tendon, ligament, or disc
- Loss of the arch of the foot
- Plantar fasciitis
- Hyperkyphosis/Scheuermann's Disease
- Joint hypomobility syndromes
- Scoliosis

Step Two: BEFORE or AFTER the adjustment (or both)

Once the indication for care has been established, the next step is to determine whether to apply the Vibrating Traction[™] BEFORE or AFTER the doctor provides the chiropractic adjusting procedures.

The Vibrating Traction[™] should be used BEFORE the adjustment in instances where:

- The clinical goal of the procedure is to increase spinal flexibility and ranges of motion;
- There is evidence of instability or hypermobility;
- The clinical goal is sagittal curve restoration and/or postural rehabilitation;
- The condition is more chronic than acute.

Cases where the Vibrating Traction[™] is more effective when provided AFTER the adjustment include when:

- There is a suspected disc injury or herniation;
- The patient is currently experiencing neck or low back pain;
- The condition is more acute than chronic.

The principles behind these recommendations are simple. In most cases, the Vibrating Traction[™] will be used before the adjustment is delivered. However, if the clinical goal is to rehabilitate a disc injury, the adjustment should first be applied to mobilize the spinal region and restore the balanced transmission of forces through the spinal column. The

(cont.)

Vibrating Traction[™] is applied subsequently in this instance to then strengthen the disc and encourage the process of osmosis and imbibition, thus promoting disc healing. Similarly, if the patient is currently experiencing neck or low back pain or suffering from an acute condition, the adjustment will help to relieve these symptoms faster, with the Vibrating Traction[™] then helping to promote healing of the injured tissue, rather than rehabilitation of a chronic deformation.

Step Three: Determining the Frequency & Duration of Care

The next step is to determine how often vibration therapy should be included in the patient's care plan, and how long each therapy session should last.

In most cases, the Vibrating Traction[™] will be used once or twice per visit, although some patients may use the Vibrating Traction[™] for three (or more) distinct purposes on three (or more) distinct regions.

The various applications of the Vibrating Traction[™] are discussed on the following pages, along with recommended therapy times.



Procedure:

Position the patent supine with the cylinder positioned low in the cervical spine, just above the shoulders. The patient's head should rest on the table. The head harness is placed under the patient's chin with the strap across the forehead with approximately 3# to 8# of weight, depending upon patient size. The purpose of the weight is not to provide cervical traction, but to ensure adequate transmission of the vibration into the cervical spine. To determine if the weight is adequate, observe the patient's head for signs of motion. If the head appears to move up and down, increase the weight slightly. Never exceed patient tolerance, or more than 15# of traction.

- A foam roll may be placed under the patient's low back to maintain the lumbar lordosis.
- Patients with more severe loss of curve, forward head posture, or ligament hypermobility will require additional therapy time.
- ◆ Patients with a severe loss of the cervical curve or forward head posture may experience some initial discomfort when first using the Vibrating Traction[™]. It may be helpful to place foam blocks under the patient's head, and gradually remove them as the cervical curve is restored.
- After the therapy time is concluded, allow the patient to remain on the Vibrating Traction[™] for 20 – 30 seconds before standing up. This gives the ligaments time to stabilize.

Under the Low Back (5 - 20 min)

Procedure:

Position the patent supine with the cylinder positioned in the hollow of the patient's low back in the lumbar spine, at the level of L3. A foam roll should be placed under the patient's cervical lordosis. The head harness is not used.

- Wedges may be positioned high under the posterior hip and low under the ischial tuberosity on the side of the anterior hip to aid in pelvic de-rotation, or under the sacrum for a retro/spondy.
- A 15# 25# abdominal weight will aid in the correction of a spondylolisthesis.
- Patients with a more severe loss of the lumbar curve, spondylolisthesis/retrolisthesis, disc herniation, or pelvic instability may require additional therapy time.
- ◆ Patients with a severe loss of the lumbar curve or a retrolisthesis may experience some initial discomfort when first using the Vibrating Traction[™]. If this occurs, having the patient bend their knees, or placing a support under their knees, may help to alleviate the pain.
- After the therapy time is concluded, allow the patient to remain on the Vibrating Traction[™] for 20 – 30 seconds before standing up. This gives the ligaments time to stabilize.



Under the Knees (5 - 10 min)

Procedure:

Position the patient supine with the cylinder placed under the knees. A 5# to 15# weight should be placed on top of the knees to aid in the transmission of the vibration into the joints.

- A spinal support should be placed beneath the patient's neck to maintain the cervical lordosis. A lumbar support may also be used, unless the patient has a spondylolisthesis or hyperlordosis of the lumbar spine.
- Wedges may be positioned high under the posterior hip and low under the ischial tuberosity on the side of the anterior hip to aid in pelvic de-rotation, or under the sacrum for a retro/spondy.
- Patients with severe or chronic knee conditions may benefit from utilizing the Vibrating TractionTM both before and after the adjustment.



Under the Feet (5 - 10 min)

Procedure:

Position the patient supine with the knees bent, and the cylinder underneath the arches of the feet. The patient should be instructed to keep the weight of their feet on the cylinder to ensure adequate vibration transference.

- A spinal support should be placed beneath the patient's neck to maintain the cervical lordosis. A lumbar support may also be used, unless the patient has a spondylolisthesis or hyperlordosis of the lumbar spine.
- Wedges may be positioned high under the posterior hip and low under the ischial tuberosity on the side of the anterior hip to aid in pelvic de-rotation, or under the sacrum for a retro/spondy.
- ♦ It is very important to ensure the patient has proper arch support after using the Vibrating Traction[™]. Avoid flip-flops!
- Be sure to sanitize the cover on the cylinder before the next patient uses the Vibrating TractionTM.



Under the Shoulder (5 - 10 min)

Procedure:

Position the patient prone with the cylinder underneath the front of the shoulder. The patient's arms may hang freely off the table, or may be placed at their sides.

- A 5# to 15# weight can be placed over the shoulder to aid in vibration transference, although is typically only necessary with very small patients.
- If the shoulder in need of rehabilitation is on the side of the low shoulder (opposite the Cervico-Dorsal angle), the patient may lie on the cylinder supine. Do note that this position tends to be a little more uncomfortable than lying prone with the cylinder underneath the shoulder. Additional foam blocks, spinal supports, and wedges may be used as appropriate.



Under The Hands (5 - 10 min)

Procedure:

The patient may be placed in a variety of positions; standing, seated, or prone, as preferred. It is important to ensure that the patient is in a comfortable position that maintains ideal spinal alignment; having the patient sit or stand with their head looking down, for instance, is not a good position. The patient should place their hands on the Vibrating Traction[™], and press down slightly to aid in the transfer of the vibration to the joints in the hands.

Notes:

Patients with severe arthritis or joint inflammation in the hands may benefit from multiple therapy sessions in one visit. In this case, allow at least five minutes between therapy sessions.

Research & Literature on Vibration Therapy

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