



Musculoskeletal

Manual therapy for cervicogenic dizziness

What are the outcomes in the long term?

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Manual therapy can be beneficial in the treatment of cervicogenic dizziness. However, until today there is only evidence for short term effects.

Treatments such as passive joint mobilizations (PJMs) and sustained natural apophyseal glides (SNAGs) have shown to be effective in reducing severity and frequency of dizziness after treatment. The SNAGs have been shown to improve range of motion (ROM) in the cervical spine, which is often related to cervical dizziness.

The purpose of this study was to study whether there is a certain treatment that is more effective on the long term. Therefore, SNAGs were compared to PJMs and a placebo group that did not receive any treatment. The follow-up period was 12 months.

The participants with chronic cervicogenic dizziness were randomized in to the three groups. and received up to 6 intervention sessions during 6 weeks.

The primary outcome of this study was the intensity of the dizziness, measured with a VAS-scale. Other outcomes were the frequency of the dizziness, the Dizziness Handicap Inventory (DHI), the intensity of the cervical spine pain, cervical spine ROM, balance and head repositioning accuracy.

The cervical range of motion improved more with the SNAG technique in comparison to the PJM technique, however when compared at the 12 month follow-up, there was no significant difference. The SNAG group improved immediately after treatment and the PJM group improved at a slower rate.

When the groups were compared to the placebo group they both showed a significant improvement in dizziness, ROM, the frequency of the dizziness and they both had better reductions on the DHI.



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