Focus on TBI & Concussion

May 3, 2019
Case Presentation
49 y.o. male

• Initial visit: 3/10/2011
• Referred for chronic headaches, not well controlled on medications
• Heavy, pounding, pressure, fluctuates
• Exacerbated by lack of sleep, colder months
• Headaches started after trauma in 1991
• Seen by worker’s comp, neuro
49 y.o. male

• Other traumas
  – Fall from ladder mid 2000s, injured back
  – Hit by a car with LOC late 2000s

• Medications tried throughout course:
  – Beta blocker, sertraline, topiramate, Toradol injections, verapamil, nortriptyline, ibuprofen, Fioricet
49 y.o. male

• PMH:
  – Obesity
  – HTN
  – Hyperlipidemia
  – Back pain

• No surgeries

• Family Hx: Leukemia, lung cancer

• Social Hx: Chewing tobacco, denies alcohol, illicit drug use
49 y.o. male

- Exam:
  - General: NAD, obese
  - Neuro: complete exam performed - normal
  - Structural: SBS compression, bilateral OM compression, condylar compression, frontal, nasal, and ethmoid restrictions; T5, T7; L5; Sacral torsion; pubic symphysis
49 y.o. male

• Diagnoses:
  – Post concussive syndrome
  – Somatic dysfunctions
  – Obesity
49 y.o. male

- OMT performed:
  - 3/10/11: initial
  - 3/24/11:
    - Reduction in duration of headaches, no change in intensity
    - Different dysfunctions noted
  - 4/1/11:
    - No longer debilitated all day, HAs last only hours, medications more effective
    - Different dysfunctions noted
49 y.o. male

• OMT performed:
  – 4/18/11:
    - Reduction in severity, medications more effective
    - Different dysfunctions noted
  – 5/24/11:
    - Able to return to work full time***
    - different dysfunctions noted
49 y.o. male

- OMT performed:
  - 3/15/12: (1 year from initial OMT)
    - Headaches at least 50% improved
    - Monthly OMT visits
    - Lifestyle changes
  - 6/25/12
    - New injury – fall off 15 foot ladder, reinjured back
    - Ultimately medically retired due to back
    - No longer seeing NB due insurance as of 2016
49 y.o. male post concussive syndrome

- **Role of OMM**
  - Addresses structural issues that can affect function
  - Medications
    - may become more effective
    - dosage may be able to be reduced
  - Chronic issues may require regular treatments for long periods of time at appropriate intervals
  - Can be effective for old traumas