

Neurodynamics of vertebrogenic somatosensory activation and Autonomic Reflexes - a review:

Preface - The introduction to a clinical series

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Abstract: A series of 12 review papers are presented in order to assess some of the available evidence relating to the vertebrogenic effects of a vertebral subluxation. The offered material includes the neurophysiology, pathoneurophysiology, neural reflexes, and clinical presentations.

The Parts are:

- Part 1 Introduction
- Part 2 Autonomic nervous system and somatic reflexes
- Part 3 A Central connection
- Part 4 Vertebrogenicity - The Vertebral Subluxation Complex
- Part 5 Diversity in vertebral subluxations
- Part 6 International medical literature - clinical application of the somatovisceral model
- Part 7 The cervicogenic factor
- Part 8 The cranial nerves and the cervical spine - Including Cr 0, XIII, and XIV
- Part 9 Cervicogenic headaches
- Part 10 Clinical management The Vertebral Adjustment
- Part 11 The vertebral (somatic) autonomic influence upon other organs and functions
- Part 12 General considerations
- Part 13 Summary and Conclusion

Indexing terms: Vertebral subluxation; Neurophysiology; Somatosensory; Autonomic nervous system.

Introduction

Chiropractic was founded by DD Palmer in 1895 and based on the premise that the nervous system was integral to well-being, and that vertebrogenic pathoneurophysiology may lead to dysfunctions and discomfort.

His method of removing that disturbance was to adjust specific joints of the spine to restore normal neurological tone and thereby support the body to self-heal. The spinal entity that was adjusted became known as the *Vertebral Subluxation* with the word *Complex* added over time, to become the 'VSC'. This phrase has remained as the primary identifying feature of what chiropractors manage

...A state-of-the-knowledge series of papers as a contextualised and directed literature overview of clinical relevance'



in their day to day practices.

One of the reservations about the chiropractic model has been the claim that there is a lack of evidence to support what chiropractors do. The bulk of research underpinning chiropractic has in fact existed in the medical literature, and more recently from published medical cases involving medical manipulation. The 13 papers which follow in this series are drafted to assist with the understanding and relevance of the VSC in relation to health, and the wealth of independent research papers that demonstrate subluxation as a clinical finding, and its relationship to a range of biological conditions.

The authors acknowledge drawing on the extensive research conducted by Sato A, Sato Y, Schmidt, and Jänig from their neurophysiology facilities in Japan and Germany, and from other physiological research. It is astounding that such esteemed researchers and their mountain of research has not attracted greater respect and recognition, with only limited research adopted by conventional medical professionals. We would respectfully suggest that such a model of primary care based on work by these physiologists greatly benefits many patients, and provides additional health care options to a stressed medical system.

This series is offered as a means of identifying and demonstrating some of the evidence in support of the chiropractic model, namely the vertebral subluxation and the vertebral adjustment. In doing so, it can be noted that apart from the chiropractic material, the primary supporting evidence in this series originates from medical literature. Due to the rather extensive medical references, claims that there is no evidence to support the chiropractic model can be readily dismissed, and for this reason alone we call for retraction of such tenuous claims. This series also validates the claims by patients themselves who experience benefits from a range of conditions under chiropractic care.

We also call for the recognition of refereed evidence to be granted on equal terms for all health professions.

This series is offered in order to demonstrate the wealth of papers supporting the hypothesis of chiropractic and the VSC, and that so much of this evidence comes from medical sources, which should go some way toward repudiating the assertion that evidence does not exist. Such assertions are clearly shown to be clearly and factually wrong.

It is also important to note that patient outcome narratives are now being recognised and recognised as being more than just anecdotes.



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