

Hearing Loss, Otalgia and Neck Pain: A Case Report on Long-Term Chiropractic Care That Helped to Improve Quality of Life

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ABSTRACT: *Objective:* to describe symptom reports, multiple chiropractic assessments and adjustments over 7 years with a patient experiencing neck pain and complex ear symptoms consistent with Meniere's syndrome. *Clinical Features:* a 43-year-old female, injured years earlier in a motor vehicle collision, suffered recurrent exacerbations of otherwise continuous neck pain. Later she developed aural symptoms of severe otalgia, hearing difficulty, tinnitus and dizziness that increased and decreased in severity with her neck pain. *Intervention and Outcome:* The intervention was repeated application of chiropractic adjustments using a modified Pettibon adjusting device. Over 7 years of observation, the subject consistently reported reduction in symptom severity after adjustments, with relief lasting up to 2 months. Consistent with the natural history of Meniere's syndrome, an overall deterioration was noted during the observation period. Hearing fluctuated in approximate synchrony with changes in angular displacements of upper cervical vertebrae during the treatment period. *Conclusion:* Observation over an extended period assists in understanding the progression of chronic disorders. This patient experienced substantially reduced symptoms with chiropractic care during the 7-year observation period. Of note is the repeated exacerbation of neck pain that often precedes exacerbation in ear symptoms, along with the relief of both following adjustment and an association between improved hearing and improved cervical alignment.

INDEX TERMS: (MeSH): CHIROPRACTIC; NECK PAIN; TINNITUS; DEAFNESS; HEARING DISORDERS; WHIPLASH INJURIES; MENIERE'S DISEASE; DIZZINESS.

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INTRODUCTION

The association between mechanical musculoskeletal problems and visceral symptoms remains tenuous, particularly when assessed by the standards of science. Many in the chiropractic profession accept as a useful clinical premise that such an association exists. Clarifying the issue is important and can proceed only by documenting examples of such associations. In the first instance, this evidence is gathered by case reports and cross-sectional surveys. To date, cross-sectional surveys suggest that between 1% and 10% of persons seeking chiropractic care do so for a problem not directly associated with the spine.¹⁻³

Case reports serve to illustrate exceptional individual situations, often those that challenge the *status quo*. Together with other case reports or other evidence, newer and more complex theories can be developed to provide an explanation for such exceptions. The case presented here, linking the neck with ear symptoms, fits into this category. Generally, ear symptoms, such as hearing loss, tinnitus and dizziness, are seldom thought of as being associated with the spine.

The neck and ear are sources of many health complaints. Chronic or recurrent neck pain affects between 14% and 33% of the population.⁴ Eisenberg *et al.*⁵ found that neck problems are reported by 57% of persons seeking non-medical therapy and that chiropractic is the most used non-medical therapy. It has been estimated that between 24% and 35% of persons seeking chiropractic care do so for neck complaints.^{6,7} Up to 50% of neck pain sufferers relate their condition to prior injury, most commonly incurred in a motor vehicle collision.⁶