<u>Counterstrain and Traditional Osteopathic Examination of the</u> <u>Cervical Spine Compared</u>

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This study addresses five questions: what is the inter-examiner reliability of diagnostic tests used in strain-counterstrain (S-CS) technique; how does this compare with the reliability of the traditional osteopathic examinations ('TART' exam); how reliable are different aspects of the TART exam; do positive findings of Jones's points correlate with positive findings of spinal dysfunction; are osteopathic students more reliable with S-CS diagnosis or TART tests? Two blinded examiners examined S-CS Jones's points' locate din the upper cervical region in 18 subjects – either symptomatic patients with chronic neck pain or non-symptomatic control subjects. TART tests studied here included palpation for restriction of motion (ROM), local tissue texture changes (TTC) and joint capsule tenderness (JT). Reliability was computed using percent agreement and Cohen's kappa ratio (K).

The results show that S-CS diagnosis is more reliable than traditional (TART) tests when evaluating symptomatic patients. S-CS produced 72.7% agreement (K = 0.45) between examiners, whereas TART scored 67.5% (K = 0.38). But S-CS is less reliable than TART when evaluating non-symptomatic patients. Among the three TART tests, JT was the most reliable (76.9%, 0.529), followed by TTC (70.4%, 0.190) and ROM (66.7%, 0.344). At individual vertebral levels, agreement was greatest at C_0 C_1 (75.9%, 0.49) and poorest at C_2 C_3 (63.9%, 0.24). Few of the Jones's points correlated well with the cervical articulations which they ostensibly represent. Second-year osteopathic students performed much better at S-CS diagnosis (64.2%, 0.20) than TART diagnosis (56.2%, 0.12).