VAX-D Clinical Studies & Publications

Peer Reviewed and Published in Respected Medical Journals:

Archives of Physical Medicine (Vol. 89, Issue 2, Pages 269-274, February 2008)
Outcomes after a Prone Lumbar Traction Protocol for Patients with Activity limiting Low Back Pain: A prospective Case Series Study, Archives of Physical Medicine. Paul Beattie, PhD, PT , OCS, Roger M. Nelson, PhD, PT Lori A. Michner, PhD,PT,ATC, SCS, Joseph Cammarata, DC , Jonathan Donley, DPT
OUTCOME: On the 180-day follow up, patients reported significantly improved pain after 16-24 daily VAX-D treatment sessions.

Journal of Orthopedic & Sports Physical Therapy (Vol. 35.No. 1 January 2005)
Short and Long-term Outcomes following Treatment with the VAX-D Protocol for Patients with Chronic, Activity- Limiting Low Back Pain P.F. Beattie, PT,PhD, OCS; R. Nelson MS, PhD; L. Michener, PT, PhD; J. Cammaratta, BS, DC; J. Donelly.
OUTCOME: Significant improvements were reported in a sample of 118 patients with unfavorable prognosis due to chronic low back pain.

Journal of Neurological Research (Vol. 26, April 2004)
Efficacy of Vertebral Axial Decompression on Chronic Low Back Pain: Study of Dosage Regimen. Dr. Gustava Ramos, MD.
OUTCOME: This 142 patient study showed 76% achieved remission of pain with 18 treatment sessions, versus 43% remission with 9 treatments. Except in emergent conditions, VAX-D should be utilized before surgery is undertaken. Success correlates with number of sessions administered.

Anesthesiology News, (Vol. 29, No. 3 March 2003)
VAX-D reduces Chronic Discogenic Low Back Pain. Robert H. Odell, M.D., PhD., Daniel Boudreau, D.O.
OUTCOME: Four years after VAX-D, Patients show a sustained 86% reduction in pain; 91% of patients resumed their normal activities.

Journal of Neurological Research (Vol. 23, No. 7 October 2001)
Dermatomal Somatosensory Evoked Potential Demonstration of Nerve Root Decompression after VAX-D Therapy. William Naguszewski, MD; Earl Gose, PhD.
OUTCOME: Of the study group, 77% reported pain reduction with successful decompression of the nerve roots at multiple Levels.

Neurological Research Journal (Vol. 23, p. 780-784, October 2001)
A prospective randomized Controlled Study of VAX-D and TENS for the treatment of Chronic Low Back Pain. Eugene Sherry, MD, FRACS; Peter Kitchener, MD, FRANZCR; Russell Smart, MB,ChB
OUTCOME: VAX-D Treatment obtained a statistically significant reduction in pain and improvement in functional outcome in patients with disc-related chronic low back pain. TENS treatment recorded 0% improvement, while VAX-D treatment yielded a success rate of 68.4%.

Canadian Journal of Clinical Medicine (Vol. 6, No. 1 January 1999)
An Overview of Vertebral Axial Decompression. Frank Tilaro, M.D.
OUTCOME: Average pain reduction in patients after VAX-D treatment was 77%.

Canadian Journal of Clinical Medicine (Vol. 5, No. 1, January 1998)
The Effects of VAX-D on Sensory Nerve Dysfunction in patients with Low Back pain and Ridiculopathy. Frank Tilaro, MD: Dennis Miscovich, MD.
OUTCOME: VAX-D is significantly capable of influencing sensory nerve Dysfunction associated with compressive radiculopathy. Complete remission was achieved by 64% of the study group.

Journal of Neurological research (Vol. 20, No. 3 April 1998)
Vertebral Axial Decompression Therapy of pain associated with Herniated or Degenerative Discs or Facet Syndrome: An outcome Study. Earl Gose, PhD; William Naguszewski, MD.
OUTCOME: in 778 cases, VAX-D achieved a success rate of 71%. The authors consider VAX_D to be a primary modality for low back pain for lumbar herniations, degenerative discs, facet arthropathy, and decreased spinal mobility.

Journal of Neurosurgery (Vol. 81: No. 3, 1994)
Effects of Vertebral Axial Decompression on Intradiscal Pressure. Gustavo Ramos, MD; William Martin, MD.
OUTCOME: VAX-D creates a negative pressure force as low as –160 mmHg.