



Chiropractic Adjustments Resolve Infertility

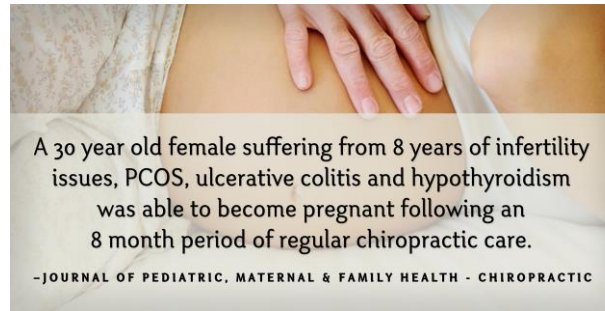
Approximately 6 million couples struggle with infertility in the United States. Infertility is the inability to conceive or carry a pregnancy for an entire term after one year of unprotected intercourse. Polycystic ovarian syndrome (PCOS) is a common form of anovulatory infertility (ovaries do not release an egg during the menstrual cycle) and affects 6.6% of reproductive-aged women. The medical options for treatment involve the use of hormone therapy, artificial fertilization and surgical intervention. Each carry high costs and are not without concerning health risks to the mother and baby.

This study involved the case report for a 30-year-old female with ulcerative colitis and neck pain that started behind her neck and went all the way down to her middle back. The patient had a history of three motor vehicle accidents which she thought was the cause of her neck pain.

During the initial consultation, the patient reported that she was also diagnosed with hypothyroidism in 2004 and PCOS in 2005. In 2008, she had been diagnosed with Ulcerative Colitis and was prescribed Lialda by her doctor.

The patient was trying to get pregnant at the time and through an ultrasound, the obstetrician told her that both of her ovaries were “covered with cysts.”

The obstetrician presented her with the following course of treatment:



- a) begin taking fertility drugs (injected hormones)
- b) initiate in vitro fertilization (manually combining an egg and sperm in a laboratory dish, and then transferring the embryo to the uterus)
- c) undergo “ovarian drilling surgery” (a surgical procedure with general anesthesia where the ovaries are punctured.)

Upon examination by the doctor of chiropractic it was determined that the patient had a forward head posture, high right shoulder, and high right hip. A leg length analysis showed that the patient’s left leg was $\frac{1}{2}$ inch shorter when lying face down and $\frac{1}{4}$ inch shorter when lying face up. The chiropractor found taut and tender muscles on the entire left side of the patient’s neck with restricted range of motion in her neck.

Establishing and Advancing the Chiropractic Family Wellness Lifestyle

The doctor of chiropractic identified spinal misalignments in the patient's neck, middle back, and sacrum. The patient began chiropractic care and her neck, middle back, and sacrum were adjusted using high velocity, low amplitude thrusts to restore the motion in those joints and function to the nervous system.

She was seen 45 times over a ten month period. After the first adjustment, she reported that her neck was a little sore on the left side; she still had a headache, and was experiencing a "flare up" of her ulcerative colitis.

At her 8th visit, the patient rated her headaches and neck pain a 0/10. Throughout the rest of the patient's care, her headaches and neck pain continued to range from 0 to 1 out of 10.

At the patient's 14th visit, the patient rated her ulcerative colitis a 0/10. At her final re-assessment, she rated 0/10 for all three complaints. The patient continued chiropractic care on an on-going, wellness plan.

At this time, the patient and her husband started monitoring her ovulation again. They discovered she was ovulating again (after 8 years) and decided to try to get pregnant. She reported that after their first attempt at conception she became pregnant. At 40 weeks gestation, the patient gave birth to a healthy baby boy.

To provide women with safer and effective options in health and well-being, more research on chiropractic care, infertility and PCOS is warranted.

Kent Metzger, Dana. "Resolution of Infertility in a Patient with Polycystic Ovarian Syndrome, Hypothyroidism, and Ulcerative Colitis Following Subluxation-Based Chiropractic Care: A Case Study & Review of Literature." *Journal of Pediatric, Maternal, & Family Health*. [2016.4 \(2016\): 68-74](#). Print.

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