

Spinal Joint Dysfunction (Segmental Dysfunction)

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What Is Segmental Dysfunction?

Segmental dysfunction refers to a problem with how a specific joint is moving. The bones are still intact, but one or more joints may not be moving normally. This can lead to pain, stiffness, and muscle tightness in the surrounding area. It is sometimes called:

- Joint dysfunction
- Spinal restriction
- Subluxation (Chiropractic term)

Common Symptoms

Symptoms may include:

- Localized pain
- Stiffness or “tightness” in the area affected
- Reduced ability to bend, twist, or move comfortably
- Muscle tightness or spasms around the affected area
- Pain that worsens with certain movements or prolonged positions
- Feeling “stuck” or “out of place”

What Causes It?

Segmental dysfunction can develop from:

- Poor posture (sitting, standing, or sleeping positions)
- Repetitive movements or overuse
- Sudden awkward movements or minor injuries
- Muscle imbalances or weakness
- Prolonged sitting or inactivity
- Protective muscle guarding after strain or injury

How Is It Diagnosed?

This condition is diagnosed through a physical examination and review of your symptoms.

Your healthcare provider may check for:

- Areas of tenderness in the spine

- Reduced or restricted movement in specific joints
- Muscle tightness or imbalance
- Posture and movement patterns

Imaging such as X-rays or MRI is usually not needed unless another condition is suspected.

Treatment Options

Treatment is focused on improving joint movement, reducing pain, and restoring normal function.

Common Conservative Treatments

- Chiropractic adjustments or joint mobilization
- Soft tissue therapy (massage or muscle release techniques)
- Stretching and mobility exercises
- Strengthening exercises for supporting muscles
- Posture and ergonomic correction
- Heat, ice, or other symptom-relief therapies
- Home exercise programs

What Is the Outlook?

The outlook is generally very good.

- Many people improve quickly with conservative care
- Pain and stiffness often decrease as movement improves
- Ongoing exercise and posture correction help prevent symptoms from returning

Typical Treatment Schedule

Many patients are seen:

- **2–3 visits per week for 2–3 weeks**
- Progress is reassessed regularly and care is adjusted as needed

Long-term improvement depends on continuing exercises, improving posture, and maintaining spinal mobility.

Contact Your Healthcare Provider If You Experience:

- Severe or worsening pain
- Pain that travels into the arms or legs with weakness or numbness
- Loss of bladder or bowel control
- Symptoms that do not improve with care