Clinical Practice Guideline: **Nasium and Vertex X-ray Views**

Date of Implementation: **February 9, 2006**

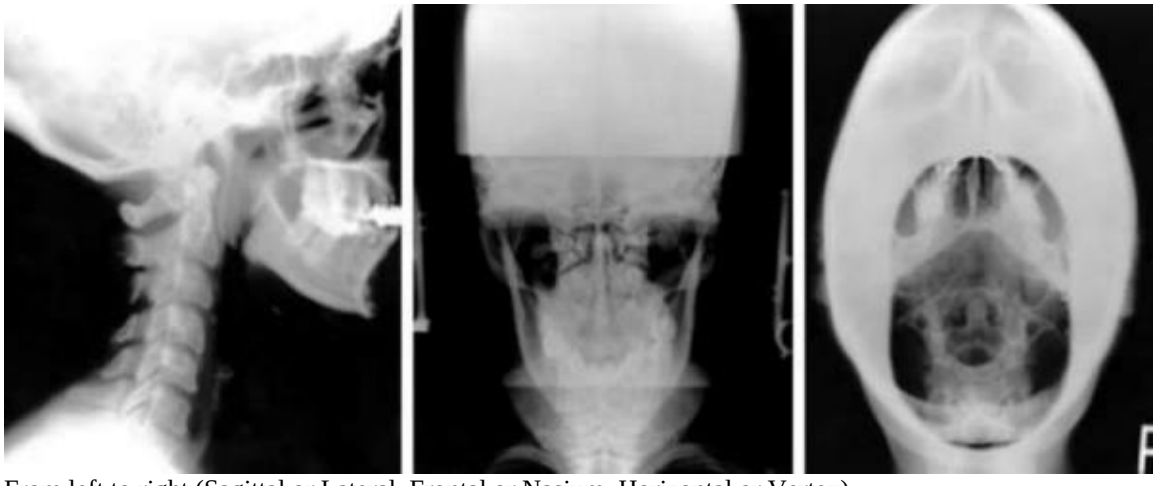
Product: **Specialty**

GUIDELINES

American Specialty Health – Specialty (ASH) considers Nasium and Vertex X-ray views acquired solely for the purpose of detection of chiropractic subluxation, spinal postural and/or segmental juxtaposition measurements as unproven. The evidence available fails to demonstrate adequate reliability, validity, unique clinical utility, and improved patient outcomes to counterbalance the risks they pose. For more information, see ASH *X-Ray Guidelines (CPG 1 – S)* and *Radiographic Quality and Safety Parameters (CPG 102 – S)* clinical practice guidelines.

DESCRIPTION/BACKGROUND

Certain upper cervical specific adjusting techniques may include obtaining and evaluating Nasium and Vertex x-ray views (as well as additional views, depending on the technique). Practitioners of such x-ray dependent techniques believe these views enable one to optimally visualize the position of the atlas (first cervical vertebra). Proponents claim this information permits them to better adjust the patient's upper cervical subluxation(s) as demonstrated on the x-ray films. Both views involve significant radiation exposure to vital tissues such as the brain and, for the Nasium view, the eyes. Some techniques also require repeated x-rays (pre- and post-treatment films) that expose the patient to additional ionizing radiation.



From left to right (Sagittal or Lateral, Frontal or Nasium, Horizontal or Vertex)

CPG 58 Revision 21 – S
Nasium and Vertex X-ray Views
Revised – November 16, 2023
To CQT for review 10/09/2023
CQT reviewed 10/09/2023
To QIC for review and approval 11/07/2023
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QOC reviewed and approved 11/16/2023

THE ATLAS ORTHOGONAL RADIOGRAPHS

Practitioners of these x-ray-driven upper cervical techniques believe the Nasium and Vertex views provide the most accurate information about specific vertebral positioning for adjusting (pre-treatment films) as well as confirming the subluxation has been removed (post-treatment films). Given the proximity of the brain and spinal cord to the upper cervical vertebrae, some techniques place a greater emphasis on the alleged value of using x-rays to identify subluxations (vs. other less invasive methods) than they do to the known health risks of ionizing radiation.

EVIDENCE REVIEW

Based on the review conducted, ASH is unaware of any valid, published, peer reviewed studies sufficiently supporting the diagnostic utility of this specific procedure or any evidence on the clinical effectiveness of interventions using this technique.

References

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