



## ***Spinal Unloading Devices***

<b>Origination:</b> 03/30/09	<b>Revised:</b> 10/03/17	<b>Annual Review:</b> 11/07/19
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### **Purpose:**

The Medical Technology Assessment Committee will review published scientific literature and information from appropriate government regulatory bodies (when available) related to Spinal Unloading Devices in order to determine inclusion in the benefit plan.

### ***Compliance Status***

- This procedure is in compliance with current Centers for Medicare & Medicaid Services (CMS): Medicare has a national coverage policy that states the non-coverage of Vertebral Axial Decompression (VAX-D) regulatory requirements

### **Recommendation:**

A recommendation was made by the MTAC following discussion by committee members based on current literature:

- The use of *devices for spinal unloading* is considered experimental and investigational. Reimbursement for their use and any associated modalities and visits is not a covered benefit.

### ***Definition***

- Spinal unloading devices are advocated for non-surgical treatment of back pain and other back ailments. These devices come in various forms, including patient operated ones, and usually utilize computer-controlled mechanical tables to apply tension or stretching along the spinal axis. Currently there is insufficient evidence to indicate that they are useful in treating back pain or preventing surgery.

### ***Example of devices used for spinal unloading (this list is not to be considered all-inclusive)***

Accu-Spina System	LTX 3000
Antalgic-Trak	Orthotrac Pneumatic Vest
AxiomWorldWide (DRX-2000, DRX-3000, DRX-5000, DRX-9000)	NuChoice Medical Healthstar Elite Decompression Therapy
Cert Health Services SpineMEDDecompression Table	Saunder 3D ActiveTrac
Decompression Reduction Stabilization (DRS) System	Spinerx LDM
Internal Disc Decompression (IDD) Therapy	Tru Trak 401
Lordex Traction Unit	VAX-D



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### **References:**

1. U.S. Department of Health and Human Services, Health Care Financing Administration (HCFA). HCFA Technology Advisory Committee Minutes, August 6 - 7, 1996. Baltimore, MD: HCFA; 1996.
2. F-D-C Reports. FDA Recalls & Court Actions: Manuals for VAX-D Therapeutic Table. The Gray Sheet. 1996 Aug;22(34).
3. Gose EE, Naguszewski WK, Naguszewski RK. Vertebral axial decompression therapy for pain associated with herniated or degenerated discs or facet syndrome: An outcome study. *Neurol Res.* 1998;20(3):186-190.
4. Ramos G, Martin W. Effects of vertebral axial decompression on intradiscal pressure. *J Neurosurg.* 1994;81(3):350-353.
5. Shealy CN, Borgmeyer V. Decompression, reduction, and stabilization of the lumbar spine: A cost-effective treatment for lumbosacral pain. *Am J Pain Mgmt.* 1997;7(2):63-65.
6. Sherry E, Kitchener P, Smart R. A prospective randomized controlled study of VAX-D and TENS for the treatment of chronic low back pain. *Neurol Res.* 2001;23(7):780-784.
7. Medical Services Advisory Committee (MSAC). Vertebral axial decompression (VAX-D) therapy for low back pain. Assessment Report. MSAC application 1012. Canberra, ACT: MSAC; June 2001.
8. Tilaro F. An overview of vertebral axial decompression. *Canadian J Clin Med.* 1998;5(1):1-7.
9. Tilaro F, Miskovich D. The effects of vertebral axial decompression on sensory nerve dysfunction in patients with low back pain and radiculopathy. *Canadian J Clin Med.* 1999;6(1):2-7.
10. Naguszewski WK, Naguszewski RK, Gose EE. Dermatosomal somatosensory evoked potential demonstration of nerve root decompression after VAX-D therapy. *Neurol Res.* 2001;23(7):706-714.
11. Washington State Department of Labor and Industries, Office of the Medical Director. Vertebral axial decompression (Vax-D). Technology Assessment. Olympia, WA: Washington State Department of Labor and Industries; 1999.
12. Deen HG Jr, Rizzo TD, Fenton DS. Sudden progression of lumbar disk protrusion during vertebral axial decompression traction therapy. *Mayo Clin Proc.* 2003;78(12):1554-1556.



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13. Wang G. Powered traction devices for intervertebral decompression. Health Technology Assessment Update. Olympia, WA: Washington State Department of Labor and Industries, Office of the Medical Director; June 14, 2004. Martin CW; Workers Compensation Board of British Columbia (WCB) Evidence Based Practice Group. Vertebral axial decompression for low back pain. Report. Richmond, BC: Workers Compensation Board of British Columbia (WorkSafe BC); 2005.
14. Jurecki-Tiller M, Bruening W, Tregear S, et al. Decompression therapy for the treatment of lumbosacral pain. Prepared by the ECRI Institute Evidence-Based Practice Center for the Agency for Healthcare Research and Quality (AHRQ) (Contract No. 290-02-0019). Rockville, MD: AHRQ; April 26, 2007.

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