

Origination Date: 07/06	Revision Date(s): 07/07, 07/08, 12/09
Developed By: Medical Criteria Committee	

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Approved: Csaba Mera, MD Date: 12/09/09

Description:

Vertebral axial decompression is a type of mechanical lumbar traction that is used to relieve low back pain associated with herniated lumbar discs, degenerative lumbar disc disease, post facet syndrome, sciatica, or radiculopathy. The device creates negative pressure on the spine, so that the vertebrae are elongated, pressure is taken off the roots of the nerve, and a disc herniation may be pulled back into place. It is a noninvasive, nonsurgical approach to treating chronic back pain. The decompression is performed using a specially designed computerized mechanical table. The table is mechanically separated in the middle and a distractive force is applied to relieve the pressure on the spine that may be causing pain. The amount of distractive force used is individually tailored and lasts about 60 seconds per application. Each treatment session lasts 30-40 minutes and typically 15-20 treatment sessions are prescribed. There are several decompression tables approved by the FDA. Examples are: Decompression Reduction Stabilization (DRS) System, DRX 2000 and DRX 9000, Alpha Spina System, VAX-D Table, Lordex Lumbar Spine System, Tru Trac 401, and the Internal Disc Decompression (IDD) Therapy

Criteria:

ODS considers vertebral axial decompression experimental and investigational for the treatment of low back pain or any other indication. There is inconclusive evidence in the peer-reviewed medical literature in terms of clinical effectiveness and safety to support the use of any method of vertebral axial decompression for the treatment of low back pain. There is no scientific evidence that proves vertebral axial decompression is an effective adjunct to conservative therapy for back pain. In addition, vertebral axial decompression devices have not been adequately studied as an alternative to back surgery.

Information to be Submitted with Pre-Authorization Request:

None. Vertebral axial decompression is considered investigational and is not covered by ODS

Applicable CPT/HCPC Codes:

Note: list may not be all inclusive

Not Covered:

S9090	Vertebral axial decompression; per session
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References:

- Washington State Department of Labor and Industries, Vertebral Axial Decompression (VAX-D) Technology Assessment. Olympia, WA: Washington State Department of Labor and Industry. 1999
- United States Food and Drug Administration (FDA) Center for Devices and Radiological Health (CDRH). 510(k) Summary of Safety and Effectiveness. VAX-D Therapeutic Table. Accessed July 11, 2006. Available at URL address: <http://www.fda.gov/cdrh/pdf/k951622.pdf>.
- Gionis T, Groteke E. Spinal decompression. Orthopedic Technology Review. Nov/Dec 2003; 5(6).
- 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 Apr; 20(3):189-90.
- Ramos G, Martin W. Effects of vertebral axial decompression on intradiscal pressure. J. Neurosurg. 1994 Sep; 81(3):350-3.
- Ramos G. Efficacy of vertebral axial decompression on chronic low back pain: study of dosage regimen. Neurol Res. 2004 Apr; 26(3):320-4.

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- Deen GH, Rizzo TD, Fenton DS. Sudden progression of lumbar disk protrusion during vertebral axial decompression traction therapy. *Mayo Clin Proc.* 2003;78:1554-1556.
- Spinal decompression machines. *The Medical Letter.* June 2, 2008;50(1287):41-42.
- Physician Advisors