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November 7, 2020

Mr. Atticus Finch
Finch & Associates, P.C.
1700 17th Street
9th Floor
Denver, CO 80218

Re: Alan Shore

Opinion Letter

Dear Mr. Finch,

You asked me to address the question of on-the-job repetitive movement leading to a Cumulative Trauma Disorder that presents as ruptured cervical discs regarding your client Alan Shore. The best medical journal article I found was from the Department of Neurological Surgery, University of California, San Francisco School of Medicine. The paper is titled *Conferences and Reviews, Cervical Spondylosis, An Update* by McCormick and Weinstein.

The authors state “Repeated occupational trauma may contribute to the development of cervical spondylosis. An increased incidence has been noted in patients who carried heavy loads on their heads or shoulders, dancers, gymnasts, and in patients with spasmodic torticollis...Cervical spondylosis may result in symptomatic spinal cord compression.” Mr. Shore reports that in 2019 he was given the job of removing heavy boxes filled with files from filing shelves. Many of the file boxes were above his head and he removed the boxes by first balancing the box on his head and then getting the box down on a table. He would then move the box from the table to the floor. Mr. Shore started moving the boxes by starting at the highest level of the shelving and working his way down. It is my opinion to a reasonable degree of medical probability that moving the file boxes in this manner contributed to Mr. Shore developing work-related ruptured cervical discs.

The authors go on to state “The spinal cords of patients with cervical spondylotic myelopathy are flattened at the levels of spondylotic protrusions...Cervical spondylotic radiculopathy is caused by nerve root compression in the neural foramina.” Mr. Shore’s pre-surgical cervical MRI dated August 18, 2019 states “C5-6 and C6-7 broad-based

protruding disc lateralized to the right with question of C7 posterior displaced intracannular nerve root on the right” indicating Mr. Shore had nerve root compression as the authors describe.

Mr. Shore reports in addition to the repetitive lifting and reaching he did to reorganize the filing system, he also was required to do a great deal of typing at a computer. Ming et al. in Pathophysiology in a 2014 article titled *Neck and shoulder pain related to computer use* state “Based on our experience, NSPRCU (neck and shoulder pain related to computer use-my addition), can be divided into: (1) local neck and shoulder disorders, which include non specific NSP, cervical disc degeneration, nerve root compression, etc...” The authors go on to state “More over, a poor work posture with the consequent overload of the neck and shoulder muscles can result in calcifying tendonitis and **cervical spondylosis** (my emphasis). Nerves passing from the spinal cord via the notches between the vertebrae can get compressed and NSP and paresthesias may develop.”

Given the long hours Mr. Shore spent typing it is likely his posture was adversely affected. The authors state with long lasting computer use work-related cervical disc degeneration with nerve root compression does occur in some individuals with work-related neck and shoulder pain.

Mr. Shore also reports the placement of his computer monitor resulted in a poor viewing angle. The authors report “Especially the discomfort postures due to poor viewing angle of the screen and the position of the chair and table may shorten the soft tissues, and cause muscle tension, weakness and fatigue.” As noted, the authors state overload of muscles of the neck and shoulder can result in cervical spondylosis and subsequent nerve root compression. It was only after Mr. Shore became symptomatic did he realize he needed to change his work station ergonomics including his monitor viewing angle.

It is my opinion to a reasonable degree of medical probability there is good evidence in the medical literature that Mr. Shore’s cervical disc protrusions and nerve root compressions are a direct result of his developing a work-related Cumulative Trauma Disorder.

Sincerely,

Armin Feldman, M.D.
MD Consulting Services LLC