



Spinal Stenosis



This is a picture of a normal size canal of a lumbar vertebra. In spinal stenosis it could become narrowed to a small fraction of this size.

Spinal stenosis, usually referring to the lower spine, is a very serious condition that is often confused by patients and sometimes their doctors with less serious causes of lower back and leg pain. This condition is a common occurrence.

Spinal stenosis can be caused by changes in the bone or soft tissue of the spine. It can be somewhat localized, segmental, or generalized in the lower back. As the name suggests, the abnormality that exists is narrowing of the spaces through which the nerves pass including the central canal of the spine or the smaller canals where nerve roots pass outward going to the hips and legs.

Sometimes persons can have abnormalities of the spine that they were born with which can bring on the condition of spinal stenosis at a much earlier age. More commonly, spinal stenosis is a disease of aging and is acquired over time - usually older than age 50. It can, however, be found at almost any age. Individuals with a narrowed canal from their development with superimposed wear and tear changes may present with spinal stenosis symptoms at earlier ages. It seems to be somewhat more commonly seen in women.

The symptoms can be subtle and sometimes can mimic poor circulation and arthritis of the hips and knees.

PRESENTATION OF SYMPTOMS

If there is a typical presentation of spinal stenosis symptoms, it would be similar to the following: any discomfort that occurs in the buttock, thigh or leg - often bilateral - which is relieved with rest and is not caused by poor circulation is probably spinal stenosis. The description of pain might also include weakness or numbness in the affected areas and very importantly, symptoms are relieved by bending forward, that is flexing the spine. Standing straight or extension of the spine will usually increase symptoms.

Musculoskeletal disease in the elderly presents a special challenge to the physician. These symptoms are frequently more vague and ill-defined and often occur along with other conditions, such as cardiac or respiratory disease, which also affect the person's



endurance and their ability to function.

In lumbar spinal stenosis, patients will usually locate their symptoms in both lower limbs - most often in the back of the hip or leg. The most specific question to ask spinal stenosis patients is whether there is relief of pain with sitting.

DIAGNOSIS

The diagnosis of spinal stenosis depends, of course, on history and careful physical examination in the office.

In our experience over the years with spinal stenosis, standard plain x-rays of the lower back are very important as a first step in diagnosis. Once these standard x-rays have been taken and reviewed, other studies are usually necessary, including MRI testing or possibly myelogram followed by CT scan.

Most patients tend to have chronic symptoms that slowly progress over time, that is months or years. It is often only when the symptoms become severe that the person will come to the office for evaluation.

TREATMENT OF SPINAL STENOSIS

When a condition in which the canal through which nerves pass becomes tight and narrowed, surgery is on occasion required to relieve the pressure on the nerves. Without this, many patients have no chance of getting better. This surgery would include a decompression or removing the pressure on the spine or the particular nerve root or roots by removing some of the bone, possibly disc and soft tissue causing the constriction or pressure.

This is not in any way meant to imply that surgery is the only treatment for spinal stenosis. Non surgical treatments have been gaining popularity as initial treatment for the condition in recent years.

Physical therapists have developed programs of exercises for the back and abdominal muscles that if done over a period of time, have been helpful in reducing pressure on the nerves. Some patients may obtain adequate relief from exercise programs and others perhaps sometimes will not.

The cautious use of anti-inflammatory medications is usually tried. Care must be taken not to interfere with other medications that the person is taking or to cause side effects from taking the anti-inflammatory medication itself. Some physicians are skilled in the administration of injection of medication in the region of the spinal stenosis thereby decreasing swelling around the nerves and relieving symptoms.

Aquatic therapy may be suggested by the physical therapist and has become quite popular in the last few years. This therapy would include aquatic-based walking and possibly spinal stabilization exercises.



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Medical Article



Spinal stenosis will become an increasingly common problem in the aging population. Along with increasing life span, problems such as this will be noted more frequently and require treatment.

ORTHOPAEDIC SURGEONS

Physicians skilled in the diagnosis and treatment of spinal stenosis are able to evaluate the patient and rule out serious conditions such as cancer, infection, fractures from a recent fall or injury (possibly even bending), herniated intervertebral disc, or cauda equina syndrome.



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Please consult Dr. Haverbush or a physician for specific treatment recommendations.

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