

FACT SHEET

Spinal Stenosis

What Is it?

- Spinal stenosis is a narrowing of the spinal canal in the low back (lumbar) area. It is classified as primary or secondary stenosis.
- Primary stenosis is a congenital or developmental abnormality that causes the constriction.
- Secondary stenosis is caused by degenerative changes in the spine that occur as part of the natural aging process.
- The combined form occurs in individuals with small canals that undergo further constriction by acquired degenerative changes. Once the narrowing gets to a critical point, the blood supply to the nerve roots that supply sensation and motor power to the legs becomes compromised.
- The stenosis may be central, lateral recess, and/or foraminal, depending on which region(s) of the spinal canal are involved.
- Spinal stenosis is not work related

- Others may report they are more comfortable walking uphill than downhill or that they can walk farther if they bend forward while they walk.

What to look for:

- Having the individual extend the spine may reproduce or exacerbate the symptoms.
- Flexing the spine reduces the symptoms.

Tests:

- Either MRI or a myelogram and CT scan in combination can accurately show the degree and extent of stenosis.
- A plain x-ray will not show spinal stenosis though it may be suggestive.

How is it Treated?

- Pain medication, physical therapy and bracing all aid in treatment

How Is It Diagnosed?

History:

- The chief complaint of individuals is an intense pain brought on by walking (neurogenic claudication) or standing and is usually felt in one or both legs. The pain is often sufficiently intense to force individuals to stop walking and to sit in order to seek relief.

What is the Expected Return to Work Time?

<p>Medical Treatment. Duration depends on severity of pain, and type and success of treatment.</p>	<p>Surgical Treatment. Spinal stenosis may not be compatible with heavy work.</p>
<p>Job Classification.....RTW Minimum – Maximum Sedentary Work.....0 days – 14 days Light Work.....0 days – 21 days Medium Work.....0 days – 42 days Heavy Work.....0 days – 91 days Very Heavy Work.....0 days – 168 days</p>	<p>Job Classification.....RTW Minimum – Maximum Sedentary Work.....28 days – 91 days (calendar days) Light Work.....28 days – 119 days Medium Work.....42 days – 182 days Heavy Work.....Indefinite - Indefinite Very Heavy Work..... Indefinite - Indefinite</p>

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Continued from page 1

- However, only surgery can actually enlarge the spinal canal. “Decompression” surgery is performed through an incision in the back.
- Occasionally, portions of the facet joints need to be resected as well. If a sufficient portion of the joints are removed, then it may also become necessary to perform a fusion operation to stabilize the spine.

What is the Predicted Outcome?

Spinal stenosis often runs a gradual course or symptoms may not worsen for several years. Surgery is successful in eliminating leg pain and allowing individuals to walk in about 80% - 85% of cases.

What are the Work Restrictions and Accommodations?

- Must be established on an individual basis.

What Are the Common Prescriptions?

- Analgesics
- Possibly narcotics (one to two weeks post surgery).

*“A safe and timely return to work benefits the patient and his or her family by enhancing recovery and reducing disability.”
Canadian Medical Association*