

Can't Walk, Won't Walk; Spinal Stenosis and Hip / Spine Syndrome

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National Spine Institute

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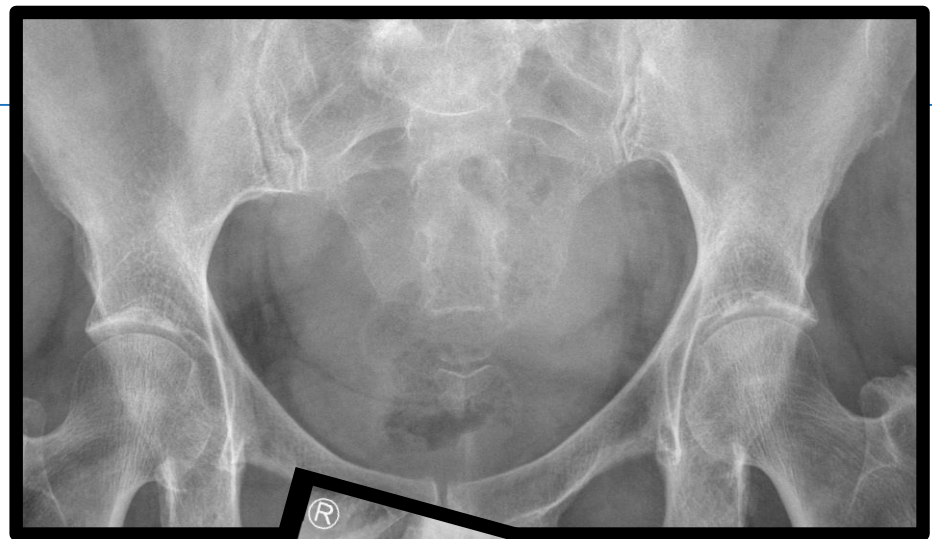


Beacon Hospital

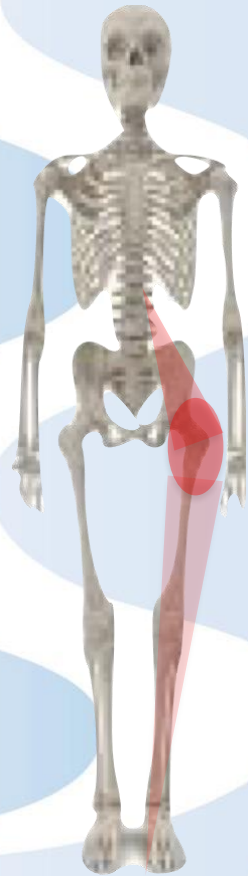
This is Modern Medicine

76yo Female

- Left hip pain
- Radiates to buttock and lumbar region, occasionally to the calf
- Exacerbated on walking
- Maximal walking dst 500m
- Altered sensation in contralateral foot (S1)
- Physio ++
- Butrans patch
- Radiographs...



Differential Diagnoses: **Anatomic Approach**



Spine

Hip

Vascular

Neurological

- Back pain
- Sciatica
- Spinal Stenosis

- Hip Arthropathy (Knee?)
- Trochanteric Bursitis

- Arterial Insufficiency
- Leriche Syndrome

- Meralgia Paraesthetica
- Peripheral Neuropathy

Differential Diagnoses: Anatomic Approach



Spine

Hip

Vascular

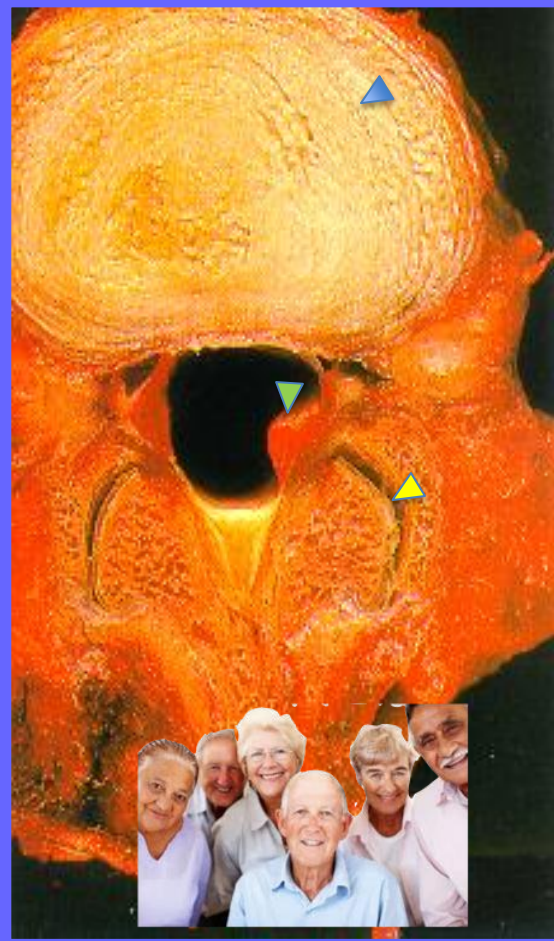
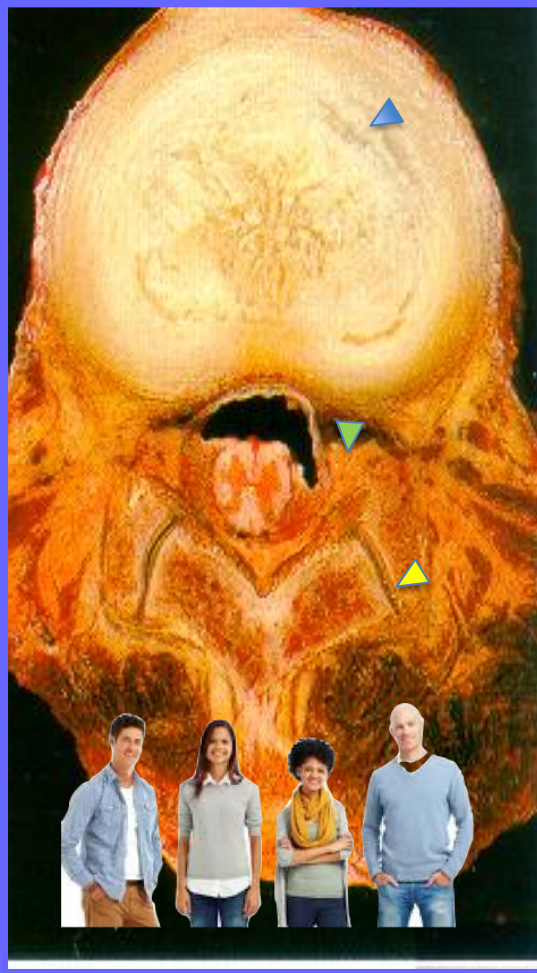
Neurological

- **Back pain**
- **Sciatica**
- **Spinal Stenosis**

- Hip Arthropathy (Knee?)
- Trochanteric Bursitis
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Differential Diagnoses: Back Pain



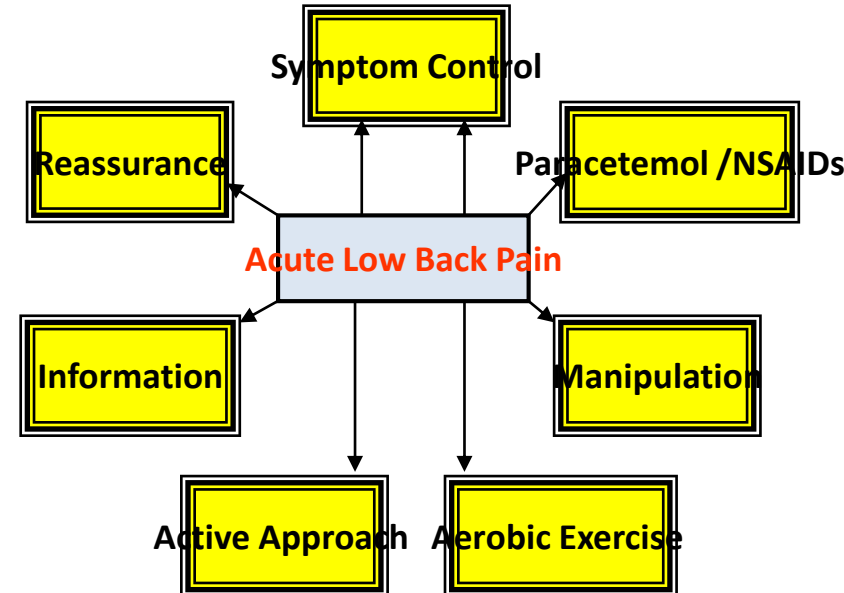
- **Soft tissue: Muscle / Ligament**
- **Disc**
- **Facet**

Backpain: Soft Tissue

- Acute back pain: ≤ 4 weeks
- Rapid initial recovery within 4 weeks
- 58% decrease in pain / disability
- 82% return to work ¹

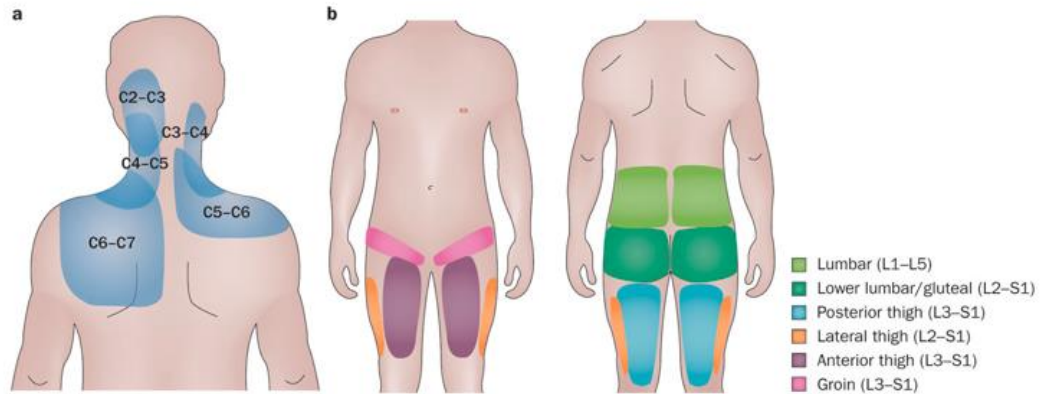


European Guidelines on Acute Low Back Pain

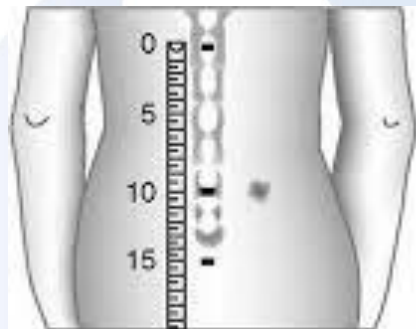


1. Pengel LH, Herbert RD, Maher CG, Refshauge KM (2003) Brmj, 327(7410): 323.
2. Hestbaek L, Leboeuf-Yde C, Manniche C (2003). Eur Spine J 12(2): 149-65.
3. Reme, S et al. J. Occup. Rehabil. 2012, 22,541-552.

Referred Back Pain: Disc, Facet



Physical Exam: Lumbar flexion / extension



Modified Schober's

15-cm segment should expand to greater than 21 cm when flexed forward

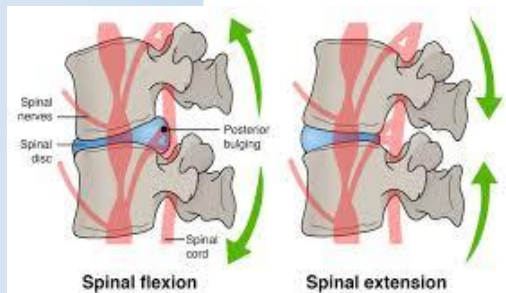


Dimple of Venus

1A



1B



| | |
|-------------------|--|
| Pain | >4 weeks Night pain / Non mechanical / Exacerbated with Cough / sitting |
| Age | <18yo; >50yo |
| Cancer | Current / Prior history |
| Sepsis | Fever/night sweats Immunocompromised / IVDU Recent GI / GU procedure |
| Systemic Features | Weight Loss |
| Neurological | Saddle Anesthesia / Incontinence Motor deficit |

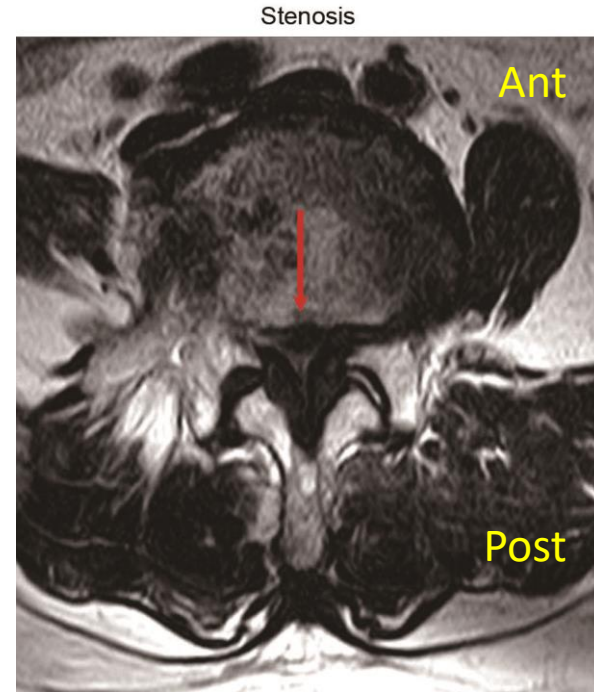
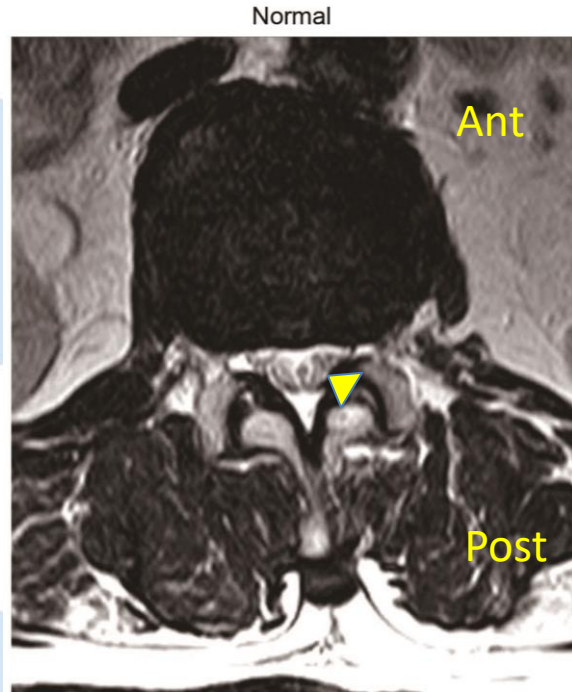


- Majority spontaneous resolution in 12 weeks
- Selective nerve block
- 70% did not proceed to surgery
- Early surgery within 6 – 12 weeks faster recovery vs prolonged non operative care²

1. National Institute for Health and Care Excellence: Clinical Guidelines. London 2016. <https://www.nice.org.uk/guidance/ng59/chapter/>
2. Peul WC et al. N Engl J Med 2007;356:2245-56. 10.1056/NEJMoa064039 17538084



Spinal Stenosis

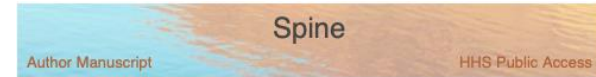


Sensitivity 87-96% Specificity 68-75%

Wassenaar M. Eur Spine J 2012;21:220-7



Spinal Stenosis: Prognosis & Management



Long-Term Outcomes of Lumbar Spinal Stenosis: Eight-Year Results of the Spine Patient Outcomes Research Trial (SPORT)

Jon D. Lurie, MD, MS, Tor D. Tosteson, ScD, [...], and James N. Weinstein, DO, MS

Advantage with surgery in all outcomes up to 8 years.

Summary



Anatomical Approach

Spine
Hip (Knee)
Neurovascular

