This booklet can also be provided in large print on request.

Please call 01865 738126

Spinal Team
Nuffield Orthopaedic Centre
Windmill Road
Headington
Oxford
OX3 7LD

Telephone: 01865 738051
Fax: 01865 738027

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Are we speaking your language?

If you would like information in another language or format please call 01865 738126.

Albanian
Nëse se e doni këtë dokument në një gjuhë tjetër, ju lutem telefononi Zyren e Shërbimit Këshillimit dhe Nërdhësis për Klientët (PALS) në: 01865 738126.

Bengali
আমাদের দেয়া এই লেখাটি অন্য ভাষায় দেওয়ার জন্য আমাদের সাথে যোগাযোগ করে আমাদের ক্যান্সার অফিস 01865 738126 যেখানে কন্ট্যুক্ট করুন।

Chinese
如果你需要这份文件以外的语言提供，请致电我们的病人顾问联络服务 (PALS)
电话：01865 738126。

Gujarati
આ રંગે આ હવેશ છે, ભાષાના પ્રકાર એક વિભાગ જેણે મેની સેવાઓને પ્રદાન કરે છે અને હાઇવેશ (PALS) ઓફિસ (PALS Office) 01865 738126 ડિલ્ટ કરે છે।

Hindi
आप अपने को हिंदी में भी जानकारी मिलाने के लिए पहुंच सकते हैं। (PALS)
ाधिकारिक से कॉल 01865 738126 पर कॉल कीजिए।

polish
W celu uzyskania niniejszego dokumentu w innym języku należy dzwonić do Biura Doradztwa i Pomocy Pacjentom (The Patient Advice and Liaison Service – PALS) pod numerem 01865 738126.

Punjabi
ਇਹ ਆਪਣੀ ਭਾਸ਼ਾ ਵਿੱਚ ਦਿੱਤਾ ਗਿਆ ਹੈ। ਇਸ ਨੂੰ ਭਾਸ਼ਾ ਵਿਖੇ ਵਾਂਗ ਨਾਲ ਦਿੱਤਾ ਗਿਆ ਹੈ। (PALS)
ਕਰੋਕਣ ਲਈ 01865 738126 ਦੌਰ ਦੇ ਪ੍ਰਤੀ ਹਨੀਦੀ ਵਾਂਗ।

Urdu
آپ کو اس کلارس کی بھی معلومات دی جاتی ہے۔ اس کلارس کو (PALS) نے 01865 738126 پر کہا ہے۔
This leaflet aims to give you some information about what Spinal Stenosis is and what you can do to help manage the symptoms you are experiencing.

What is Spinal Stenosis?

As the back ages changes can occur that lead to narrowing of the spinal canal and nerve compression. The condition is called Spinal Stenosis and can be completely asymptomatic.

Although Spinal Stenosis can affect any part of your spine it most frequently causes symptoms from the lower back—called the lumbar spine.

This can be referred to as lumbar Spinal Stenosis and is the type of Spinal Stenosis described in this leaflet.

Why have I got Spinal Stenosis?

- Some people are born with a narrow spinal canal.
- In most people the spinal canal gets narrower as they get older. This is because the joints of the spine get larger due to ageing change; this then reduces the space in the spinal canal, leaving less room for the nerves.
- Spinal Stenosis most frequently causes symptoms in those over the age of sixty.
What symptoms does Spinal Stenosis cause?

- Spinal Stenosis leads to back pain and pain and numbness in the legs and buttocks.
- Most people with symptomatic Spinal Stenosis have difficulty with walking and standing for any length of time due to the leg symptoms. This is because when we stand straight the spinal canal is narrower.
- Commonly people find that if they sit or bend forwards the symptoms ease off. Many people tell us that they can walk better and further, if they lean on a shopping trolley. Others tell us that they can cycle without any pain, yet can hardly walk the length of the garden. This is because when you bend forwards the spinal canal gets wider thereby giving the nerves more space.

What will happen with time?

- Although Spinal Stenosis can affect your quality of life it is not damaging or dangerous. Your back is still strong and you can continue to use your back and it is not dangerous to walk.
- It is not clear exactly what will happen to your symptoms over time, the research suggests that approximately 15% will improve with time, 70% will stay the same, and 15% will worsen with time.
Spinal Team

Consultant Surgeons

Mr Gavin Bowden, MB, BCh, FCS(SA) (Orth)
Professor Jeremy Fairbank, MA, MD, FRCS
Professor Chris Lavy OBE, MD, MC, FRCS (Honorary Consultant)
Mr James Wilson-MacDonald MB, ChB, FRCS, MCh
Mr Colin Nnadi MBBS, FRCS (Trauma & Orth)
Mr Jeremy Reynolds, MBchB, BSc (Hons), FRCS (Trauma & Orth)

Spinal Triage Team

Elaine Buchanan, Consultant Physiotherapist
Louise Hailey, Clinical Specialist Physiotherapist

• This means that most people’s symptoms will remain the same over future years.
• If symptoms worsen people generally find this happens slowly. They typically find that the distance they can walk reduces gradually.
• Severe progression of Spinal Stenosis is unlikely.

Diagnosis

Spinal Stenosis is diagnosed from the signs and symptoms you describe. If operative treatment is being considered they may order a magnetic resonance image (MRI scan) of your back to assess the degree of spinal canal narrowing and help plan your treatment.

Although narrowing of the spinal canal can lead to symptoms of Spinal Stenosis. We know that not all patients with narrowing develop the symptoms.

The degree of pain experienced and restriction in walking varies considerably from patient to patient, from a mild restriction in walking and mild pain to severe restriction in walking and severe pain.

There appears to be a weak link between the amount of spinal canal narrowing seen on MRI and the severity of symptoms and or the prognosis for the future.
Other reasons why you could have difficulty walking

There can be many reasons why our walking can be restricted apart from having Spinal Stenosis. Here are some examples of other health problems that can affect our walking:

- Arthritis of the hips, knees or feet.
- Circulatory (vascular) problems with the legs.
- Conditions that affect your breathing and ability to exercise for example heart complaints, bronchitis or asthma.

The specialist will have looked for these when carrying out your assessment at the clinic

What can I do to help the pain?

We know Spinal Stenosis is not serious or dangerous but the symptoms and restrictions it causes can have a great impact on your quality of life.

If your symptoms are manageable and your quality of life remains good then no intervention may be needed. For most, the symptoms can successfully managed through simple non-operative measures.

Useful information

Websites:

http://www.noc.nhs.uk/spinal/information/leaflets.aspx - The Oxford Spinal Unit has a number of leaflets available to patients and their carers. These are free of charge and are available to download.

www.spinesurgeons.ac.uk – The British Association of Spine Surgeons. See patient information section on Spinal Stenosis.

www.patient.co.uk - A comprehensive health information guide for patients, use search term ‘lumbar Spinal Stenosis’.

www.library.nhs.uk – The NHS Evidence Health Information resources website.

In this leaflet we have tried to give you an idea of the management of Spinal Stenosis and some of the risks and benefits.

It is important to stress that there are many differences between one person and another, in how they get symptoms and where the spinal stenosis is.
Indications for having an operation:

- Restricted walking.
- Severe leg pains.
- Severe Spinal Stenosis with bladder disturbance or weakness of the legs.

What are the benefits of having an operation?

Operations aims to help alleviate the leg pain and to improve your ability to walk and stand. It is unlikely to help back pain and the long-term benefits still remain unclear.

Non-operative treatment options:

Initially non-operative treatment is recommended (this is often referred to as conservative care). Non-operative treatment is effective and has less risks than an operation, and will not make your symptoms worse.

1. Pain Medication

Many people find that they can control their symptoms more effectively by frequent sitting and bending compared to using pain killers.

However, if you need some help with the pain then:

- Take mild painkillers such as paracetamol.
- Some people find using a combination of tablets will often be more helpful than trying to rely on just one type of medication. Initially speak to your GP or local pharmacist.
- Doctors can prescribe nerve pain modifying drugs that may help improve some of the leg pain.
- Treatment may be more successful if you combine pain medication with a fitness and exercise program.
2. Pacing activity

As a general rule, do things slowly at first and a little bit at a time. Establish a routine of activity that builds up gradually, step by step and day by day. The first thing to do is to find out what you can manage at the moment. It helps to keep a record, for example:

I can

- Sit for \(\text{minutes at present}\)
- Walk for \(\text{minutes at present}\)
- Lifting \(\text{kg/lbs from one table to another}\).
- Stand for \(\text{minutes}\).

Once you know what you can do then you can work to improve it. To do this you need to do a bit less than you can currently manage (say 80%) but practice frequently and then build it up gradually by doing a bit more every few days.

3. Good and bad days are normal

You will find that you will have days when the pain is better or worse. This is normal. On a good day it is tempting to do more, but this is not a good idea, as it

- Do remember that, if you don’t use it, once you lose muscle strength and fitness it is very hard to regain

How long could I expect it to take me to improve?

It can take many months before you may be able to establish if changes you have made are helping you to manage and adapt to your symptoms.

Remember that it will not do you back or legs any harm the longer you have the symptoms.

What if this doesn't help?

If your symptoms are failing to improve and your leg symptoms continue to cause severe restrictions with your ability to walk you may be referred to a service that offers an injection or operation.

During the operation the spinal canal is decompressed by removing the bone and thickened ligaments to take pressure of the spinal nerves, it is called a ‘spinal decompression’.
5. Would physiotherapy help me?

You may be offered physiotherapy. A chartered physiotherapist may be able to help you with short term relief of your symptoms through treatment such as manipulation or acupuncture. Unfortunately these treatments are unlikely to give you a longer term ‘cure’. They are also able to help and support you with finding a manageable exercise and fitness program.

The dos and don’ts of managing Spinal Stenosis

- Do remember that, it may hurt, but you won’t harm it!
- Do try to remain as active as possible and keep walking regularly
- Do consider taking a shooting stick or trolley with a seat out with you then you can take short rest periods in sitting when you need to
- Don’t feel bad about having to stop to rest if you are out walking
- Don’t avoid lifting—remember that, it is safe to continue to lift; your back is still as strong as it was before
- Do remember that, all activities are still good for you in moderation
- Do pace yourself and aim to gradually progress activities again as you get stronger

can lead to a flare up of your pain. It is best to keep to your activity plan even on bad days.

4. Improving spine strength, flexibility and your general overall fitness.

Keeping you back flexible and strong is important in helping to manage Spinal Stenosis, your overall fitness and endurance is also important. There is no evidence that one type of exercise is better than another, this means you can continue to try to do the type of exercise you enjoy.

You might find certain types of exercise easier than others for example cycling or seated light weight machines at the gym (remember the spinal canal is bigger when your back is bent or you are in a seated position). Your exercise program should include a combination of stretching, strengthening and fitness exercises.

The following exercises are designed to improve your spinal strength and mobility. Use the principles of pacing to judge where to start, then build up gradually. It is better to do a few exercises several times a day rather than all at once.
Flexibility and strengthening exercises

- Lying on your back with the knees bent (above)
- Pull your tummy in and hold
- Progression—lifting your head and shoulders off the bed

- Lying on your back bend one leg and put your hands behind the knee (above)
- Use your arms to pull the knee towards your chest
- Repeat with opposite leg

Fitness programme

Walking—It is really important to keep walking. The pain is not dangerous and it is not harmful to walk. Initially, work out how long or far you can currently walk before you need to stop and rest. Plan to walk every day just stopping short of your overall limit (reduce your total figure by approximately 10%). For example, if initially you can walk for ten minutes before needing to rest, start with an eight minute walking plan. Then gradually increase your time or distance. You may be surprised to find that using this approach you will often see improvement in your walking distance over time.

Although it may not sound attractive initially, many people find that using a walking aid helps them walk for longer. The best ones are the walking aids which you lean on such as a walking frame with wheels. These are called ‘All-Terrain Rollators’ - some have a seat incorporated into the frame so you can sit to rest when you need to.

Cycling – this can be a good way of maintaining or improving your general fitness. Cycling little and often to start with. People often report it easier to an exercise bike rather than a push bike. People can often cycle without as much leg pain as when they walk. Try to cycle daily; you may like to do two smaller sessions each day. Gradually increase the length of time you cycle.
• Stand with your feet shoulder-width apart (opposite)
• Slowly bend the knees about 45 degrees. Do not allow your back to bend or arch. Hold the position for 5 seconds, then return to the starting position
• Relax and repeat

• Lying on your back bend one leg and put your hands behind the knee (above)
• Slowly straighten your leg until you feel tightness at the back of your leg
• Repeat with opposite leg

If you prefer you can do this in sitting

• Start on your hands-and-knees (above)
• Arch your back upwards, and then slowly rock backwards towards your heels
• Hold for 10 seconds, and then return to the starting position. Relax and repeat.
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• Sit on a firm chair with your feet on the floor (above)
• Slowly bend towards the floor as far as is comfortable. Hold for 5 seconds, and then return to the starting position
• Relax and repeat

13
• Lie on your back with your knees bent (above)
• Tighten your buttocks, and then slowly lift your buttocks off the floor
• Do not allow your back to arch. Hold for 5 seconds, then slowly lower
• Relax and repeat

• Sit on a firm chair with your feet on the floor (above)
• Slowly extend one knee. Hold for 5 seconds, and then slowly bend the knee back to the starting position

• Lie on your side (above)
• Lift the leg up towards the ceiling without allowing it to come forward. Hold for 5 seconds then slowly lower the leg
• Relax and repeat