

## Painful Walking or Standing – A Possible Sign of Lumbar Canal Stenosis

Pain that radiates from the back and buttocks into one or both legs and occurs mainly with standing or walking distances may be a sign of lumbar canal stenosis. Lumbar canal stenosis refers to narrowing of the hole or canal where spinal nerve roots travel before they leave the spine and travel to the legs. Patients often report the need to stop walking and sit down in order to relieve the pain in their back and legs before starting to walk again. Some patients report a sensation of weakness or “heaviness” in their legs as well. Because bending forward at the waist gives slightly more room for the nerves, they often bend forward on a shopping cart when walking in a store to alleviate the pain. These symptoms can worsen such that people avoid activities that involve walking or standing for long periods, seriously affecting their quality of life.

Lumbar canal stenosis is related to degenerative changes in the spine. The spinal nerve root compression is caused by lumbar disc bulging or herniation as well as ligament and bony overgrowth. Forward or backward slippage of the lumbar bones, called spondylolisthesis, can also contribute to nerve compression. While X-rays and CT scans are helpful, Lumbar spine MRI is the best test for diagnosing lumbar canal stenosis as well as its severity.

Treatment of lumbar canal stenosis ranges from conservative to surgical options depending on the severity of the symptoms and degree of stenosis. Physical therapy and pain medications such as non-steroidal antiinflammatories are an initial option. Epidural steroid injections into the spinal canal can also be tried. While these measures do not change the narrowing of the spinal canal, they can provide significant temporary relief. Surgical measures include minimally invasive as well as more open decompression of the nerves via laminectomy. Some patients are candidates for the minimally invasive X-STOP procedure in which a titanium implant is placed between the bony protrusions in the lower back called spinous processes. The intended effect is to keep the spinal canal open when standing upright or extending the lumbar spine.

Laminectomy or laminotomy surgery involves removing some portion of the “roof” or lamina of the spine, allowing access to the nerves. Surgery is generally reserved for patients that have severe lumbar canal stenosis confirmed by MRI and who have not achieved significant relief of their pain with conservative or steroid injection options. When done in this setting, laminectomy surgery has excellent success rates for patients with spinal stenosis.

Dr. William E. McCormick is a board-certified neurosurgeon specializing in the management of back and neck pain. He can be reached at South Shore Brain & Spine Specialists ([www.southshorebrainandspine.com](http://www.southshorebrainandspine.com)) in West Islip at (631) 422-5371.