

Orthopaedic Connection

When Standing And Walking Are A Pain

By Thomas J. Haverbush, M.D.
Orthopaedic Surgeon

Transforming patient information into patient understanding.

Do you have difficulty standing more than 5 or 10 minutes because of pain in both legs? Can't walk for more than a hundred feet without looking for someplace to sit?

Then when you do sit the pain lessens noticeably.

You may have a disorder that affects 25% of adults over 65 to some degree.

Ever Hear of Lumbar Spinal Stenosis?

It is a common problem that I see often in the office. It is debilitating and painful and drastically affects how we function.

What Is It?

It is a narrowing or constriction in the vertebrae of the lower back. The spinal cord and nerve roots are in the spinal canal and the nerves pass out to either side through openings called foramina. The narrowing or constriction is termed spinal stenosis. (Stenosis can occur in the neck also, but less than in the lower back.)

Why?

When the spinal bones (vertebrae) degenerate from age the canal and the openings to the side can become constricted. Never mind exactly how that happens. It's complicated. The constriction "pinches" the nerves, which pass the entire length of the legs to the feet.

Symptoms

- Symptoms may be in one leg or both
- Numbness and tingling
- Pain can be in the thigh, buttocks or entire leg or legs
- Feeling of weakness or heaviness in the legs
- "Legs won't work. Can't walk any further"
- Symptoms present when standing or walking
- Pain eases when you sit down or bend forward

Mechanism

Bending the spine forward tends to enlarge the spinal canal just enough to "unpinch" the nerves and pain eases.

Some people say the only way they can shop is by leaning forward on the grocery cart. It is the telltale sign of spinal stenosis.

Remember when I told you the medical history that I take from the patient is the key? "Listen to the patient and they will tell you their diagnosis."

Think of that the next time you are in Walmart and see all those gray haired shoppers pushing their grocery carts.

Diagnosis

In the office after I listen to you tell me your diagnosis I'll examine you. I'll ask you to stand and arch your back which produces symptoms and then I'll have you lean forward somewhat to relieve the symptoms.

What else? Well, of course I will thoroughly examine your back, hips and legs. I will check joints, reflexes, sensation, pulses and strength.

Plain x-ray study of the spine and possibly the hips are standard to complete the initial evaluation.

The diagnosis is kind of like a triangle where history is at the top point and physical exam and x-rays are at the two lower points or angles of the triangle.

“Doc, What About MRI?”

I hear this constantly. I see patients almost daily who have had an MRI done before they come to me because they have back pain. MRI's are used by many doctors as a screening tool unfortunately. Furthermore the patient didn't have a careful history taken, was barely examined and plain x-rays were not done.

MRI (Magnetic Resonance Imaging) may be ordered if I feel there is a strong possibility of lumbar spinal stenosis.

What Else?

Well, there is a lot more to tell you about lumbar spinal stenosis that I will need to cover next week. Please come back next week for the thrilling conclusion! Have a good week.

My patients put their trust in me and what I do improves the quality of their lives.

Gratiot County Herald Archive and Office Website

I hope what you have read has raised questions. No problem.

Please log onto www.orthopodsurgeon.com. It has a huge amount of musculoskeletal information in the Website and the Archive of all previous GCH articles.

Check it out and be amazed what you can learn.

Good health, good life, all the best to you. Be well.

Dr. Haverbush