

I was told I have spinal stenosis: Do I need surgery?



Spinal stenosis is the narrowing of the canal that houses the spinal nerves, putting pressure on these nerves. If left untreated, it can cause permanent nerve damage.

When doctors say arthritis, we typically think of stiffness in the knees and other joints. There are many types of arthritis, but osteo-arthritis is a normal aging process that occurs in everyone if we live long enough. When this arthritis affects the spinal area, it can lead to a condition known as spinal stenosis.

Spinal stenosis is the narrowing of the canal that houses the spinal nerves, putting pressure on these nerves. If left untreated, it can cause permanent nerve damage, says Dr. Daveed Frazier, a board-certified orthopedic spine surgeon with the New Jersey practice of New York City Spine Surgery, PLLC, with offices in Morristown and South Plainfield.

“Stenosis can occur for many different reasons,” he explains. “The most common form is degenerative spinal stenosis. As you age, your spine can become arthritic. This arthritis involves an overgrowth of soft tissue and possible bone spurs taking up space where the nerves are.”

Some people are born with a small spinal canal and this is a different type of stenosis referred to as congenital spinal stenosis, he adds. Usually this doesn't become symptomatic until people get older, however.

While stenosis can occur anywhere along the spine, it's most common in the lower back. Symptoms include pain in the back, legs and backside; difficulty walking long distances; numbness; burning or tingling in the legs; and a tendency to hunch over. In severe cases, patients may suffer from problems with bowel and bladder functions.

Spinal stenosis also can occur in the neck, which is a more serious condition because it places direct pressure on the spinal cord, rather than on the nerve roots, as is the case with lower-back stenosis.

Stenosis in the neck typically produces different symptoms, including pain, numbness and tingling in the arms or legs, loss of balance and/or difficulty using the hands.

“The spinal cord is very, very delicate,” Dr. Frazier explains. “If spinal stenosis in the neck is left untreated, a patient can become paralyzed.” Doctors typically first recommend non-invasive treatments, including anti-inflammatory medications, physical therapy and steroid injections, says Dr. Frazier, one of the world's foremost experts on minimally invasive and motion-preserving treatments of the spine. If those treatments fail, then surgery will likely be needed, he adds.

“No one should have surgery unless absolutely necessary,” Dr. Frazier says. “But for stenosis, if conservative treatments don't work, a patient should have surgery as soon as possible.” Unlike arthritis in the knee or hip, where doctors typically advise patients to delay surgery as long as they can tolerate the symptoms, “that's not the philosophy with the spine, because as you're waiting, your nerves are essentially dying,” Dr. Frazier explains.

Two types of surgery are typically performed in these cases. Laminectomy removes a section of the spine bones to widen the spinal canal. Spinal fusion connects bones in the vertebrae together, strengthening the spine and stabilizing unstable spinal segments.

“Today, fusions are frequently minimally invasive,” Dr. Frazier explains. “I can perform most fusion procedures on an outpatient basis.”

Dr. Frazier recommends that patients experiencing these symptoms promptly consult with a certified, reputable spine surgeon who can explore all treatment options and, if needed, also be able to perform surgery.

“Our goal is to avoid permanent, irreversible nerve damage,” Dr. Frazier says. “The best opportunity for patients to achieve this is to see me first, so we can work through this process together early on, as opposed to waiting until it's too late.”

- Nancy Parello



Dr. Daveed D. Frazier is medical director of New York City Spine Surgery, PLLC.



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