



Non-Invasive Management of Patients with Lumbar Spinal Stenosis

Lumbar spinal stenosis is one of the most common indications for lumbar spinal surgery in the elderly in the US, with an inpatient expense of almost \$1 billion.¹⁻³ Pain and decreased functional abilities are the primary reasons people seek help from the medical community.⁴ Research indicates that conservative care is a viable option for many people with spinal stenosis.⁵

The Maine Lumbar Spine Study demonstrates similar outcomes at 5 and 10 year follow-up for post surgery versus conservative care groups.⁵ Conservative care included a variety of interventions including exercise, manual therapy and injections.

A randomized controlled trial accepted for Fall, 2006 publication in **Spine**, demonstrates the effectiveness of conservative care for individuals with spinal stenosis. Sixty subjects were included in the study based on the following criteria: 1) MRI confirmed spinal stenosis, 2) low back pain, and 3) lower extremity symptoms. Participants were randomized into 2 groups both of which received exercise treatment 2 times per week for 6 weeks. Group 1 received sham ultrasound, while group 2 received specific manual therapy to the spine and lower extremity as needed.

Results showed clinically meaningful change on the Oswestry Low Back Questionnaire for both groups, with the manual therapy group showing a larger improvement. While both groups utilizing physical therapy improved significantly, the addition of manual therapy yielded superior results when measured by patient reported outcomes. Improvement was sustained at 1 year follow-up.

Research shows that physical therapy, including both exercise and manual therapy, can help those with spinal stenosis improve function and control pain. At Body One Physical Therapy, we believe that optimal care is based on interventions supported by sound evidence. In addition to providing evidence based care to your patients, Body One

Physical Therapy will continue to provide updates to you regarding best practice information for musculoskeletal disorders.

References

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