

Eli's Rehab Report

Clinical Rehab Roundup: Skip Surgery When Treating Spinal Stenosis

Trends, Major Medical Complications, and Charges Associated With Surgery for Lumbar Spinal Stenosis in Older Adults. Richard A. Deyo, MD, MPH; Sohail K. Mirza, MD, MPH; Brook I. Martin, MPH; William Kreuter, MPA; David C. Goodman, MD, MS; Jeffrey G. Jarvik, MD, MPH. JAMA. 2010;303(13):1259-1265.

Physical therapy -- not surgery -- should be the first option for treating pressure on patients' spinal cords or compressed spinal nerves.

That's the lesson researchers learned after studying the rise of complex and risky spinal fusion surgeries among Medicare patients with simple spinal stenosis, which is a narrowing of areas in the lumbar or cervical spine that causes pressure on the spinal cord and one or more of the spinal nerves.

Problem: While overall surgical rates declined between 2002 and 2007, "the rate of complex fusion procedures increased 15-fold," researchers noted. This increase in invasive surgeries has brought an increase in life-threatening complications. And though decompressive surgery offers advantages, "surgeons often recommend more invasive fusion procedures," they found.

"There is little evidence of benefits and a much higher risk of life threatening medical complications" when surgery is the first option for treatment, according to the study published in the April edition of the Journal of the American Medical Association.

Solution: The most effective treatment for spinal stenosis in the back or neck is "physical therapy to mobilize the spine combined with exercises to alleviate low back pain," researchers discovered. To treat the lumbar region, manual physical therapy, specific exercises, and a progressive walking program work best.

Physical therapy is also more cost effective than surgery. Adjusted mean hospital charges for complex fusion procedures totaled more than \$80,000 in 2007 versus just \$24,000 for decompressive surgery and less for physical therapy.

And patients who receive physical therapy are less likely to seek additional medical care up to one year following their treatment. This is compared to surgical patients who require multiple follow-up appointments.

The bottom line: Researchers urge physical therapists to work closely with care teams to offer and encourage alternatives to surgery for spinal stenosis, with therapy at the top of the list. This approach could "help patients avoid longterm use of medications and their side effects as well as the risks and costs associated with surgery," the study shows.