

# NASS 23<sup>RD</sup> ANNUAL MEETING

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## **Surgical outcomes better for patients with leg pain predominant degenerative spondylolisthesis and spinal stenosis**

TORONTO — Predominant leg pain was associated with better surgical outcomes in patients with degenerative spondylolisthesis and spinal stenosis, according to data presented at the North American Spine Society's 23rd Annual Meeting.

"The association between leg or back pain predominance and surgical outcomes in degenerative spondylolisthesis and spinal stenosis was very striking: Patients with predominant leg pain consistently improved more with surgery than those with predominant back pain," said Adam Pearson, MD, of Dartmouth College, Lebanon, NH. "This pattern was observed for all outcome measures — the SF-36 and Oswestry Disability Index (ODI) — at both one and two years, with the exception of low back pain bothersomeness."

As part of the Spine Patient Outcomes Research Trial (SPORT), Pearson and colleagues at the University of California, San Francisco, Nebraska Foundation for Spinal Research, and Washington University studied 591 patients with degenerative spondylolisthesis and 615 patients with spinal stenosis. SPORT is a multicenter study that examined the three most common back conditions and compared operative and nonoperative treatments.

The researchers classified patients as either leg pain predominant, back pain predominant or equal pain based on a 0-6 point scale.

At two years, patients with leg pain predominant degenerative spondylolisthesis who were treated surgically improved significantly more than patients with predominant back pain. There were dramatic differences in the SF-36 Bodily Pain scores, Physical Function scores, ODI and Stenosis Bothersomeness Index. The researchers found similar results in patients with leg pain predominant spinal stenosis. The nonoperative results were comparable for leg, back and equal pain in both cohorts.

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These results are good news for patients. "Degenerative spondylolisthesis and spinal stenosis patients with predominant leg pain can be informed that they will likely have markedly better outcomes with surgery as compared to nonoperative treatment," Pearson said. Surgery produced better results in patients with predominant back pain, although the differences in outcomes between surgical and nonsurgical treatments were not as significant.

The take-home message for clinicians is that they can count on excellent surgical results in these patients, with an obvious link between patient symptoms and imaging studies, Pearson said. "Patients choosing nonoperative treatment do not appear to get worse over time. Therefore, treatment decisions for degenerative spondylolisthesis and spinal stenosis should be consistent with the patient's values and preferences, not the doctor's."

#### About NASS

The North American Spine Society (NASS) is a multidisciplinary organization that advances quality spine care through education, research and advocacy. NASS members are MDs, DOs and PhDs in 24 spine-related specialties including orthopedics, neurosurgery, physiatry, pain management and other disciplines. Nurse practitioners, physician's assistants, chiropractors, physical therapists, practice administrators and other allied health care professionals involved in spine care are also represented in NASS as affiliate members. For more information on spine care or to find a spine specialist in your area, please contact 1-877-SPINE-DR or visit [www.spine.org](http://www.spine.org).