

A resource on Physical Medicine and Rehabilitation (PM&R) topics developed by the American Academy of Physical Medicine and Rehabilitation (AAPM&R)

Cervical Stenosis

Condition: Cervical stenosis is when the portion of the spinal cord in your neck is pinched or squeezed by its surrounding structures which include bones, ligaments, and discs. People can be born with the condition, get it from a neck injury, or develop it from wear and tear.

Background: In the United States, about 5% of adults have cervical stenosis. Many cases are due to cervical spondylosis which is a fancy way to say that the bones, ligaments, discs, and joints in the neck are degenerating from wear and tear. Cervical stenosis is thus more common in older people, especially those over the age of 60 years old. However, it can also occur in younger people, particularly those who participate in contact sports.

Risk Factors: Risk factors include older age, participation in contact sports (such as football, soccer, and rugby), and major trauma to the neck. Also, some people are born with anatomy that is naturally at higher risk for cervical stenosis than others.

History and Symptoms. Symptoms often include pain in the neck and/or shoulders, weakness in the arms and/or legs, and numbness/tingling in the arms and/or legs. As the condition worsens, people can develop issues with balance and walking. They can also start having trouble holding objects and doing tasks with their hands and eventually may experience trouble with their bladder and/or bowels.

Physical Exam: Physicians check range of motion in the neck, reflexes, and muscle strength in the neck, arms, and legs. Patients will also be asked to walk, so the physician can check their balance and better understand their condition. There are some other special maneuvers that may be performed by the physician based on findings from the other parts of the exam.

Diagnostic Process: Based on the history and physical exam, the physician may recommend imaging tests of the neck and/or back. These can include X-rays, MRIs, or CT scans in order to see whether there really is pinching of the spinal cord, and if so, what may be the cause.

Rehab Management: There are many different types of physicians that see this condition, including family medicine physicians, physical medicine and rehabilitation (PM&R) physicians, orthopedic surgeons, and neurosurgeons. This can get confusing for the patient as each type of physician has slightly different training and thus different strengths and weaknesses. PM&R physicians are very well-equipped to diagnose and treat this condition as they have extensive training in spine care, possess a thorough understanding of conservative spine rehabilitation that may allow avoidance of surgery while still understanding the warning signs that would indicate the need for surgery, and often know how to perform interventional procedures such as spine injections if needed. They are well-trained to coordinate care for all cases of cervical stenosis. PM&R physicians can also help make decisions for athletes on whether returning to contact sports is safe along with the best way to do so and when surgical consultation is required for all patients. Physical therapy can help both injured athletes and older people with cervical stenosis and is often sufficient to treat the condition. However, older people with advanced disease may need additional rehabilitation, such as occupational therapy and/or psychological treatment.

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Other Resources for Patients and Families: It is important for older patients with cervical stenosis to avoid falls. The CDC offers a <u>free downloadable guide on preventing falls</u> that includes many tips, resources, exercises and more that may help.

Frequently Asked Questions

What is PM&R?

Physical medicine and rehabilitation (PM&R), also known as physiatry, is a primary medical specialty that aims to enhance and restore functional ability and improve quality of life to those with injuries, physical impairments or disabilities affecting the brain, spinal cord, nerves, bones, joints, ligaments, muscles and tendons. PM&R physicians, known as physiatrists, evaluate and treat the whole body, maximize patients' independence in their daily life and are experts in designing comprehensive, patient-centered treatment plans to empower patients to achieve their goals. By taking the whole body into account, they can accurately pin-point problems, decrease pain, assist in recovery from devastating injuries and maximize overall outcomes and performance with non-surgical and peri-surgical options. To learn more, visit www.aapmr.org/aboutpmr.

What makes PM&R physicians unique?

PM&R physicians' training focuses not just on treating medical conditions, but on enhancing the patient's performance and quality of life in the context of those medical conditions. They focus not only on one part of the body, but instead on the development of a comprehensive program for putting the pieces of a person's life back together – medically, socially, emotionally and vocationally – after injury or disease. PM&R physicians make and manage medical diagnoses, design a treatment plan and prescribe the therapies that physical therapists or other allied therapists perform or that are carried out by the patients themselves. By providing an appropriate treatment plan, PM&R physicians help patients stay as active as possible at any age. Their broad medical expertise allows them to treat disabling conditions throughout a person's lifetime.

Why see a PM&R physician?

A PM&R physician will thoroughly assess your condition, needs, and expectations and rule out any serious medical illnesses to develop a treatment plan. By understanding your condition and goals, you and your PM&R physician can develop a treatment plan suited to your unique needs.

How do I find a PM&R physician near me?

Visit www.aapmr.org/findapmrphysician or contact your primary care physician for a referral.