But My Back Hurts Only When I'm Standing!

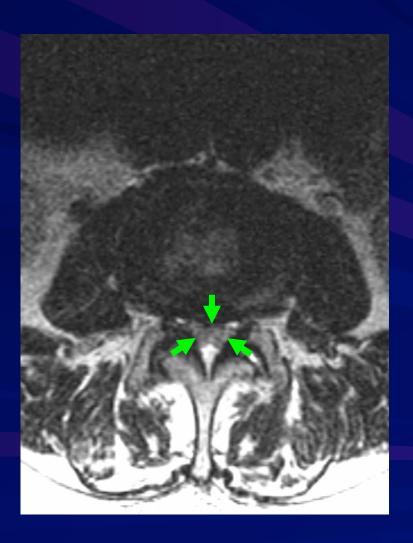


Axial Loading for Spinal Canal Stenosis



Matthew Cham, MD; Akio Hiwatashi, MD; Per-Lennart Westesson, MD, PhD, DDS Division of Diagnostic and Interventional Neuroradiology, Department of Radiology, University of Rochester Medical Center, Rochester, NY 14620

Spinal Canal Stenosis



- Progressive narrowing of the central canal, lateral recesses, and neural foramina most commonly due to degenerative disease
- In the United States, majority of individuals over 60 years old are affected

Symptoms of Lumbar Stenosis

Most commonly presents as midline back pain aggravated by standing or walking

Improved by leaning forward



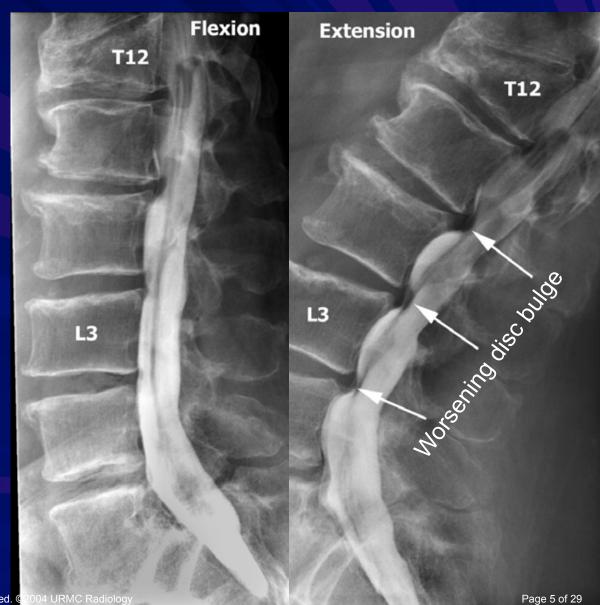
Purpose

To review the role of axial-loading in MRI for the diagnosis of spinal canal stenosis

To learn how axial-loading in MRI can be performed during conventional supine MRI

Effect of Positioning

 Myelography may demonstrate worsening of spinal stenosis during extension





Axial Loading

Some individuals are symptomatic only in the upright position

May be secondary to axial load exerted by bodyweight on the spine, making spinal stenosis worse in the standing position

Effects of Axial Loading



MRI is typically performed in the supine position with no axial load

 Surgically treatable spinal stenosis may become hidden during supine MRI

Axial Loading Device

Device used to generate axial loading

 Simulates the upright standing position during conventional supine MRI

Consists of a harness and a platform



Harness



- Harness comes in several sizes to fit various body types
- Two nylonstraps fastenthe harness tothe foot platform

Foot Platform



Foot platform applies an adjustable tension to the harness



Patient Interview



Identify patients who might benefit from axial-loading during MRI

Evaluation of Symptoms

- Patient may complain of pain that occurs only when standing
- Pain may be relieved by lying down



Evaluation of Prior MRI

Prior MRI might show no significant spinal stenosis due to lack of axial load

My back doesn't hurt lying down. I have no pain at all!

 Patient may have been asymptomatic during prior MRI due to supine positioning





Harness is worn like a vest

Vest is buckled in place

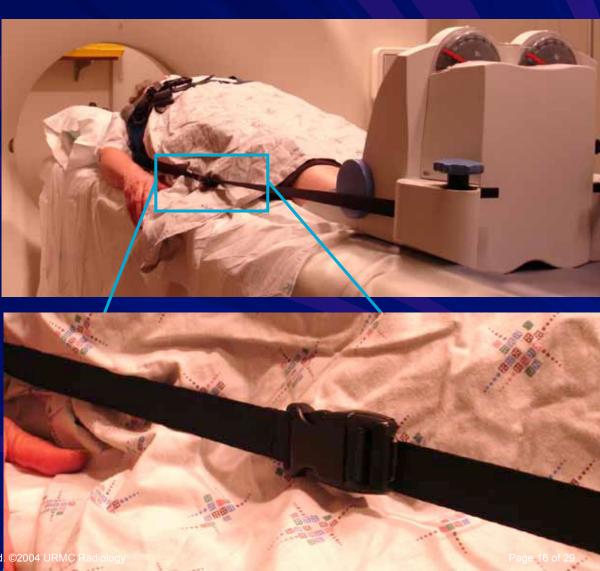


The foot platform is placed at patient's feet

One size fits all



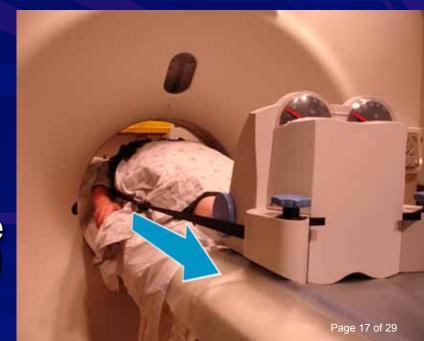
Harness is fastened to the foot platform with two nylon straps





Tension is applied to the harness by adjusting two large blue knobs

As the two knobs are turned, the axial load increases





- Axial load (in pounds) is indicated by two display gauges.
- Recommended total axial load is 50% of patient's bodyweight



MRI with Axial Loading

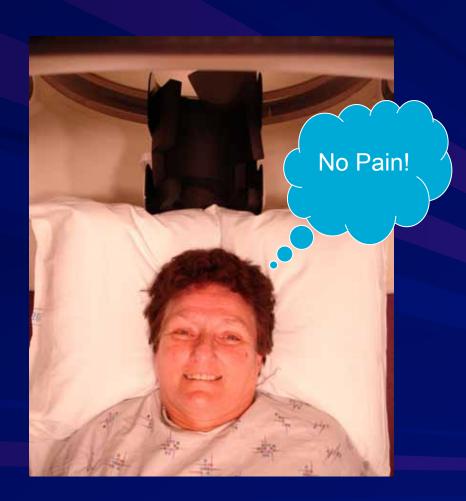
Patients usually become symptomatic due to the axial load

My back hurts! It feels as if I am standing!

Patient should be given reassurance



MRI with Axial Loading





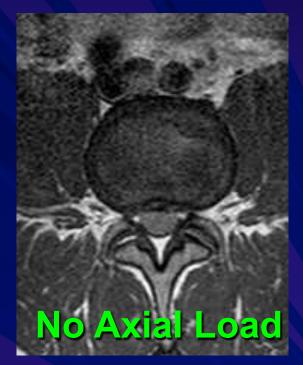
No Axial Load

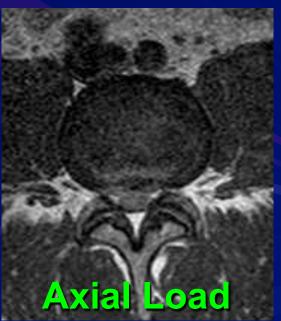
With Axial Load

Female 41y

Neurogenic claudication at L4-L5

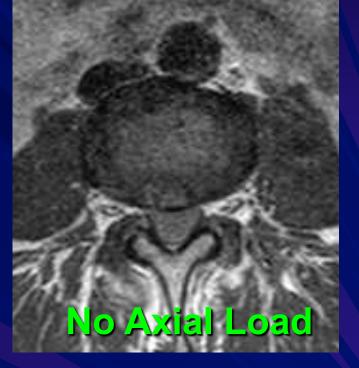
Increasing central stenosis with axial load





Male 63y

Neurogenic claudication at L4-L5



Increasing disc herniation and central stenosis with axial load



Female 58y

Neurogenic Claudication at L4-L5

Increasing synovial cyst bulge with axial load



Female 52y

Neurogenic Claudication at L4-L5 No Axial Load

Increasing central stenosis with axial load



Will it affect Management?

- The incremental increase in diagnosis of operative spinal canal stenosis with the use of an axial-loading device is currently under investigation.
- There is some evidence that management could change for some patients. (Hiwatashi, et al. AJNR 2004; 25:170-174)

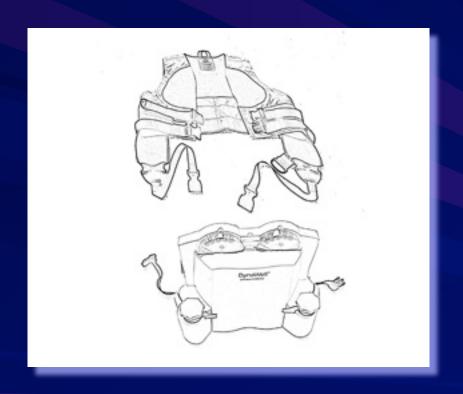


Is it safe?

- FDA-approved for both CT and MRI
- If patient cannot tolerate their back pain, hip or knee flexion instantly relieves the axial load
- Large display gauge allows MRI technologist to see absence of axial load in those situations



What are other options?





Axial Loading Device

Upright MRI

Conclusion

 Axial-loading during MRI can unmask operative cases of spinal canal stenosis that may otherwise appear inconsequential

Axial-loading can be performed during conventional supine MRI

The incremental diagnostic yield of axial loading for spinal canal stenosis is currently under investigation

References

- Danielson BI, Willen J, Gaulitz A, et al. Axial loading of the spine during CT and MR in patients with suspected lumbar spinal stenosis. Acta Radiol. 1998; 39(6):604-11.
- Hiwatashi A, Danielson B, Moritani T. Axial loading during MRI imaging can influence treatment decision for symptomatic spinal stenosis. AJNR 2004; 25:170-174.
- Jinkins JR, Dworkin J. Upright, weight-bearing, dynamic-kinetic MRI of the spine. Acta Clin Croat 2002; 41(Suppl):31-35.
- Kimura S, Steinbach GC, Watenpaugh DE. Lumbar spine disc height and curvature responses to an axial load. Spine 2001; 26:2596-2600.
- Willen J, Danielson B. The diagnostic effect from axial loading of the lumbar spine during computed tomography and magnetic resonance imaging in patients with degenerative disorders. Spine 2001; 26(23):2607-14.