

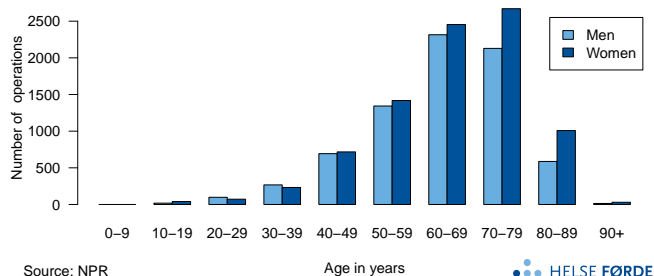
Lumbar spinal stenosis

Lumbar spinal stenosis, a narrowing of the spinal canal, is an age-related condition caused by wear and tear. It causes back pain in nearly 10 % of the population, and sometimes also pain and muscle weakness in the legs. Back pain caused by spinal stenosis is most common at around 50 or 60 years of age, and the prevalence will probably increase as the elderly population grows. Conservative treatment will suffice in most cases, but surgical treatment may be an option for selected patients with intense symptoms. The surgery involves removing structures that cause narrowing of the spinal canal, and press on the spinal cord or nerve roots, and sometimes an additional joining of vertebrae may be an option. Patients who have surgery experience a marked improvement in function, quality of life and capacity for work, but many will have residual symptoms after surgery.

Background

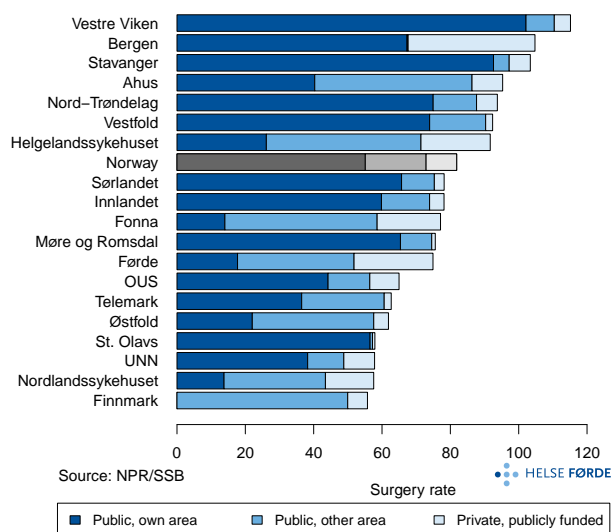
Lumbar spinal stenosis is defined by a primary or secondary diagnosis of M48.0, M43.1, M47.2, M99.3 or M99.6 (ICD-10). Surgical treatment is defined by a diagnosis of lumbar spinal stenosis in combination with one or more of the procedure codes ABC07, ABC16, ABC26, ABC36, ABC40, ABC56, ABC66, ABC99, NAG34, NAG36, NAG44, NAG46, NAG54, NAG56, NAG64, NAG66, NAG74, NAG76, NAG94, NAG96 (NCSP). Patients aged 18 years or older are included in the sample, except in the figure that shows gender and age distribution of patients of all ages who have been operated.

Each year there are an average 3,200 patients operated for lumbar spinal stenosis. This accounts for 34 % of all patients with the condition in contact with the specialist health service.



Source: NPR

Total number of operations for lumbar spinal stenosis during the period 2012–2016, for Norway as a whole. The patients have been broken down by gender and age group.



Source: NPR/SSB

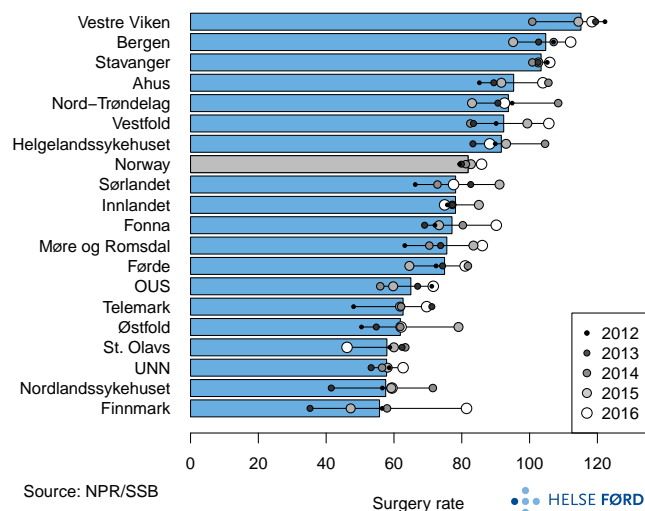
Surgery rate: Number of operations for lumbar spinal stenosis per 100,000 population (18 years and older), broken down by hospital referral area. Rates have been adjusted for gender and age. Bars show the average value per year for the period 2012–2016, broken down by where the patients had surgery.

Results

Surgical treatment for lumbar spinal stenosis is twice as common Vestre Viken hospital referral area as in the Finnmark area.

The surgery rate varies from year to year in most areas, and seems to increase slightly for the country as a whole. The percentage operated is highest in the Stavanger area (44 %), and lowest in the Finnmark area (19 %).

Most patients are operated at public hospitals (89 %). In some areas all, or nearly all, patients receive their surgical treatment at a public hospital in an other hospital referral area, and to a lesser extent at private hospitals or specialists under public funding contracts (up to 35 %).



Source: NPR/SSB

Surgery rate: Number of operations for lumbar spinal stenosis per 100,000 population (18 years and older), broken down by hospital referral area and for Norway as a whole. Bars show average value per year during the period 2012–2016, and dots represent rates for each year. Rates have been adjusted for gender and age.

Comments

There is considerable variation in surgical treatment for lumbar spinal stenosis. The variation is characterised as unwarranted because there is no known corresponding geographical variation in the prevalence of spinal stenosis in Norway.

Variation is also found in both number of patients who were in contact with the specialist health service and in the percentage of these patients that had surgery. Much of this variation probably reflects the complexity of the condition and lack of both a classification system for the condition and guidelines for its treatment. This means that the assessment of the need for referral and surgery involves a significant degree of professional judgement.