

## "Beyond the Scalpel: Interventional Solutions for Patients with Lumbar Spinal Stenosis with Neurogenic Claudication"

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### Interventional Therapies: An Overview...continued

#### **C. Minimally Invasive Lumbar Decompression (MILD®)**

The MILD procedure provides percutaneous decompression of hypertrophied ligamentum flavum in degenerative LSS. This approach debulks tissue contributing to canal narrowing while minimizing trauma to surrounding structures. MILD can be performed in an office-based or ambulatory setting under local and procedural anesthesia. Outcomes include improved function and walking distance. MILD is typically recommended after failure of conservative measures in patients with ligamentum flavum hypertrophy.

#### **D. Interspinous Process Spacers**

Our clinic previously offered the Superion Indirect Decompression System (Vertiflex) but discontinued use following FDA recalls for device and instrument failures. This treatment option is no longer available.

#### **E. Spinal Cord Stimulation (SCS)**

For refractory cases in appropriate candidates, SCS is a viable non-surgical option. A 2021 retrospective study in *Pain Physician* evaluated 118 patients and found that most experienced significant, sustained relief of leg pain and claudication symptoms for up to two years. Even patients without prior lumbar decompression surgery benefited. While not first-line therapy, careful patient selection allows clinicians to offer an effective, minimally invasive alternative for symptom management.

### Collaborative Care and Referral Considerations

Comprehensive evaluation is essential for patients who are not surgical candidates. While none of these treatments are curative, they can be life-changing in improving mobility and daily function. Goals for interventions include at least a 50% reduction in pain and measurable improvements in mobility and function.

Optimal outcomes are achieved through a multidisciplinary approach, combining careful patient selection by our pain specialists, targeted physical therapy, and ongoing medical management to maximize quality of life while minimizing procedural risks.

### Conclusion

**Non-surgical does not mean no options for patients with LSS and neurogenic claudication. Interventional therapies, including SCS and targeted injections, can significantly reduce pain, improve mobility, and enhance quality of life—even when surgery is not possible. When surgery isn't on the table, don't let patients resign themselves to immobility. Refer to Pain Management of North Idaho to explore these therapies and help restore independence and dignity.**