Neurogenic claudication

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Neurogenic claudication (**NC**), also known as **pseudoclaudication**, is a common symptom of lumbar spinal stenosis,[1][2] or inflammation of the nerves emanating from the spinal cord. Neurogenic means that the problem originates with a problem at a nerve, and claudication, from the Latin for limp, because the patient feels a painful cramping or weakness in the legs. NC should therefore be distinguished from vascular claudication, which is when the claudication stems from a circulatory problem, not a neural problem.

Neurogenic claudication can be bilateral or unilateral calf, buttock, or thigh discomfort, pain or weakness. In some patients, it is precipitated by walking and prolonged standing. The pain is classically relieved by a change in position or flexion of the waist and not simply relieved by rest, as in vascular claudication.[3] Therefore, patients with neurogenic intermittent claudication have less disability in climbing steps, pushing carts and cycling.[3][4] In some patients with severe compression of the nerve roots, the NC is not intermittent but painfully persistent.

The pathophysiology is thought to be ischemia of the lumbosacral nerve roots secondary to compression from surrounding structures, hypertrophied facets, ligamentum flavum, bone spurs, scar tissue, and bulging or herniated discs.

In addition to vascular claudication, pseudo-trochanteric bursitis should be considered in the differential.

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