



LUMBAR-SACRAL ADHESIVE ARACHNOIDITIS (AA) UPDATE 2021
CLASS OF INTRASPINAL CANAL INFLAMMATORY DISORDERS
1st of 4 Part Series

Adhesive arachnoiditis (AA) is an intraspinal canal inflammatory disorder in which some cauda equina nerve roots are stuck by adhesions to the arachnoid-dural covering of the spinal canal, creating an inflammatory mass. This mass will continue to spread if left untreated.

ONE IN A CLASS OF DISORDERS: A class of intraspinal canal inflammatory disorders (ICID) have now been identified:

- Arachnoiditis (inflamed arachnoid membrane)
- Protruding disc (inflamed tissue pushing on the spinal canal covering)
- Cauda equina inflammatory disorder (inflamed cauda equina nerves)
- Epidural fibrosis (inflammation and scar tissue in the epidural space)
- Lumbar-sacral adhesive arachnoiditis (nerve roots stuck to arachnoid)
- Tarlov cysts (may be a cause or result of inflammation)
- Tethered cord (may be a cause or result of inflammation)

INFLAMMATION EXPLANATION: Protruding or herniated discs are now known to be the number one cause of AA. Protruding discs that press against the spinal canal are inflamed. New research shows that the “slipping” disc may spread inflammation in the epidural space, arachnoid lining, and/or cauda equina nerve roots. The arachnoid layer of the spinal canal covering can be inflamed without adhesions or “gluing” cauda equina nerve roots to it. This is plain arachnoiditis which can develop into AA. EDS and autoimmunity may cause spontaneous or sudden tears and spinal fluid leaks in the arachnoid-dural covering of the spinal canal, and inflammation may follow. Viruses and autoimmunity may target cauda equina nerve roots, causing inflammation. Tarlov cysts are usually an outgrowth of the arachnoid layer of the spinal canal covering and may initiate or be the result of arachnoid inflammation. AA is usually preceded or accompanied by one or more of the ICID’s. It is the most debilitating and painful of the ICID’s.

MRI RESEARCH AND IMPACT: The identification of this class of ICID’s has been made possible by the new contrast and high-resolution MRI’s. This has been a “blessing” since persons with symptoms related to the lumbar-sacral spine have been given such “waste basket” diagnoses as “failed back syndrome”, “degenerative spine”, or “psychosomatic”. All the ICID’s are either quite evident or “likely evident” on the new contrast MRI’s. A person with symptoms related to the lumbar-sacral spine may have more than one ICID.

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