

**MRI DIAGNOSIS OF LUMBAR ADHESIVE ARACHNOIDITIS (AA)
FOR PRIMARY CARE MEDICAL PRACTITIONERS**

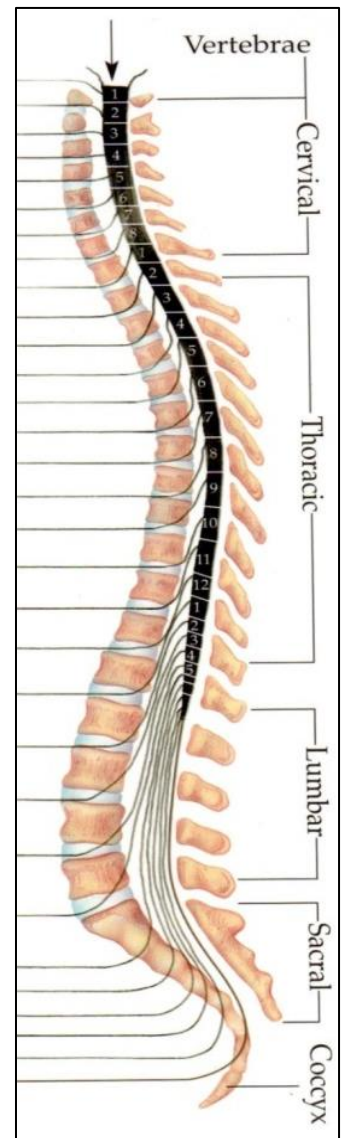
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On the right side of the page is a graphic of the normal anatomic position of the cauda equina nerve roots in a lateral view.

An MRI diagnosis of AA should only be attempted in a person with typical AA symptoms which are: (1) back pain that radiates into buttocks and/or legs, (2) pain lessens on standing or reclining, (3) bladder dysfunction, (4) burning feet, and (5) sensation of insects or water on legs

AA typically appears as a darkened area in the lateral (sagittal) MRI view due to cauda equina nerve roots clumping together in an inflammatory, adhesive mass that obstructs spinal fluid flow.

SPINAL CORD



NORMAL



Normal lateral view of the spinal canal. The white is spinal fluid. Normally a gray color inside the spinal canal represents the spinal cord or the cauda equina nerve roots. A gray color may also indicate a disease process is present.

AA



The arrow points to a clump of nerve roots that has resulted from inflammation and adhesions. There is adherence of the mass to the arachnoid-dural canal covering as well as spinal fluid flow obstruction.

This bulletin is the second of six in a series on MRI interpretation for primary care practitioners. A booklet of MRI examples is currently being drafted, and will be available soon.

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