

Letter to the Editor: Evaluating the Reproducibility of the Walking Test for Intermittent Claudication Associated with Lumbar Spinal Stenosis

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Dear Editor,

We read the article “Evaluating the reproducibility of the walking test for intermittent claudication associated with lumbar spinal stenosis” by Tanishima et al. [1]. We were impressed by their evaluation of the reproducibility of the gait test for lumbar spinal stenosis (LSS) patients. However, we have some questions and suggestions about the following four points to agree with the authors’ conclusions completely.

First, was there any difference in reproducibility by the kind of LSS symptoms (root pain, cauda equina symptoms, and mixed symptoms)? For instance, it is well known that root pain may spontaneously improve over time, and therefore, it may be challenging to assess for reproducibility at baseline and week 4 [2].

Second, although the reproducibility of gait posture is also an interesting topic, how about using simple markerless motion analysis to evaluate the reproducibility of the gait posture (e.g., OpenPose) [3]?

Third, this article mentioned that those who wished to continue medication and other treatments could continue

without changing their capacity, but what was the percentage of such patients? If the percentage was high, is it possible that the overall change was not due to that?

Finally, were there any changes in neurological symptoms such as sensory, motor, or reflex symptoms after the gait test?

Despite the above questions, we still believe the reproducibility of the gait test suggests its usefulness in determining the effectiveness of LSS treatment.

Conflict of Interest

No potential conflict of interest relevant to this article was reported.

References

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