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Cervical Spondylotic Myelopathy; an innovative approach to guide the surgeon

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Introduction: Cervical Spondylotic Myelopathy (CSM) refers to the impaired function of spinal cord caused by degenerative changes of discs and facet joints in the cervical spine. When natural history of the disease is analyzed, it is difficult to say that surgical treatment is the gold standard treatment modality for this condition due to lack of sufficient randomized control trial.

Methods: We could follow 53 cases (M-36, F-17) of CSM between the age group of 20 to 70 years, most of them who had been operated in last 5 years with an average follow up of 2.8 years, have been analyzed. Decompression with or without stabilization was the procedure in all cases. All cases of nurotic's grade 1- 4 had been operated. New scores (odishi scores) have been calculated after subjective questionnaires and objective assessment.

Results: 5 out of 53 (10%) had a deterioration of sign and symptom. Out of them 4 cases is nurotic's grade 5 pre study. 20 (37.7%) cases admitted that they feel much better relative

to pre op status but there was little/no improvement of signs. 28 (52%) cases showed improvement of signs and symptoms.

Summary: With the above findings, CSM cases are to be treated surgically if there is substantial compression of spinal cord and signal changes in MRI. Proper counselling is an essential part of treatment. Disease in advanced stage may not improve, may worsen subjected to the preexisting comorbidity and wholesome care given to patient.

Speaker Biography

Bikram keshari kar done his Master of surgery at SCB Medical college, Utkal University. He is a member in Indian orthopaedic Association, Association of Spine Surgeons of India, North American spine society, Chhattisgarh orthopedic Association and Central Zone of Indian Orthopedic Association. He published more than 25 papers and attended nearly 60 seminars and conferences.

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