

THORACIC MYELOPATHY IN THE YOUNG: A CASE REPORT

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Introduction: Thoracic Myelopathy is a rare debilitating disease causing sensory and motor dysfunctions in the trunk and lower extremities with urinary disturbance

Discussion: A 37 year-old obese male, with underlying lumbar spondylosis, presented with acute onset of back pain, numbness and weakness of bilateral lower limbs following a bending motion. Examination revealed MRC power of grade 1 at L2 and below with best sensory at T12 level, accompanied with weak anal tone. MRI revealed T9-T10 stenosis. Laminectomy and posterior instrumentation at T9-T10 level was performed, noted ossification of ligamentum flavum(OLF) at T9-T10 level. Following surgery, Japanese Orthopaedic Association (JOA) score improved from 3 to 7. Thoracic myelopathy is often overlooked and misdiagnosed as it mimicks that of lumbar spinal disorder causing delayed in surgery. Thoracic myelopathy often caused by ossification of posterior longitudinal ligament (OPLL), OLF and disc herniation ;affecting patients after fifth decades of life, unlike this young patient. Most common initial complaint are back pain, numbness, or pain in legs and gait disturbance. OLF at T10-T12 level accounted for commonest location of the lesion. Laminectomy and posterior instrumentation is standard procedure to decompress the lesion and most patients reported improved in JOA score post operation

Conclusion: This case report showed the importance of high index of suspicion and diagnosis at early stage of thoracic myelopathy, as prompt treatment improves the disease outcome.