

Acute traumatic central cord syndrome- experienced of open door expansile Laminoplasty with Mini Plate: A case report.

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INTRODUCTION:

Acute traumatic central cord syndrome (ATCCS) is one of the most common acute incomplete cervical spinal cord injuries. It presented with weakness more severe in upper than lower extremities, usually associated with bladder dysfunction and with varying degrees of sensory loss below the level of the respective lesion. The mechanism of central cord syndrome is most commonly a traumatic hyperextension injury of cervical spine.

REPORT:

We report a case of 51 years old male who presented with complaint of neck pain and bilateral upper limb weakness after alleged fall to the ground while cycling with neck in hyperextension. He was still able to ambulate post trauma and denied having neck pain prior to this trauma.

Examination revealed midline bony tenderness of the middle third of cervical. Neurological examination of upper limb shows motor paraparesis with muscle strength of MRC grade 0-2, however sensation intact with no brisk reflexes. There was no neurology deficit of lower limb.

Plain radiograph of cervical spine shows no significant finding. However, MRI of cervical spine reveals multilevel posterior disc bulges from level of C5 to C7.

We were able to proceed with surgery day 5 post trauma. We did Open door expansile laminoplasty and mini plate fixation at each level.

During review 3 months post operative, patient has no neck pain or limited neck motion and he also regained to almost normal motor function of bilateral upper limb.



Figure 1: MRI cervical shows multiple posterior disc bulges causing spinal stenosis, worse seen at C3/C4.



Figure 2: Post operative plain radiograph cervical neck.

CONCLUSION:

In conclusion, cervical laminoplasty is safe procedure for surgical treatment of ATCCS. It gives advantages of faster neurological recovery; preserve better ROM and shorter hospital stay. Patient can achieve excellent clinical outcome with this technique.

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