

Atlantooccipital dislocation outcome

The most important predictor of [atlantooccipital dislocation](#) outcome is the severity of neurologic injuries at the time of presentation. ¹⁾ Among AOD patients who survived the initial injury, those with severe TBI and brainstem dysfunction or complete bulbar-cervical dissociation all had a poor outcome ²⁾.

Those with incomplete SCI or nonsevere TBI may improve.

Atlanto-occipital [dislocation](#) (AOD) is a devastating condition that frequently results in prehospital cardiorespiratory arrest and accounts for 15% of fatal spinal trauma. Because of improvements in prehospital resuscitation, more victims with AOD now survive to reach the emergency department. Neurologic injury is usually severe secondary to ligamentous disruption that allows the cranium to move with respect to the cervical spine, and associated facial and head injuries are common. There are, however, reports of survivors without neurologic deficits.

¹⁾ , ²⁾

Horn EM, Feiz-Erfan I, Lekovic GP, et al. Survivors of occipitoatlantal dislocation injuries: imaging and clinical correlates. J Neurosurg Spine. 2007; 6:113– 120

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