

Cervical disc herniation diagnosis

- [The effect of neck mobilization Vs. combined neck and lumbar mobilization on pain and range of motion in people with cervical disc herniation: A randomized controlled study](#)
 - [Could the Hanging Drop Technique Be an Alternative Method to Loss of Resistance in Cervical Epidural Injections?](#)
 - [Association relation of C\(0\)-C\(2\) Cobb angle and cervical disc herniation](#)
 - [Short-Term Effects of Kinesio Taping on Pain and Functionality in Patients With Cervical Spine Surgery](#)
 - [Unveiling the Silent Threat of Upper Cervical Disc Herniation: A Case Report](#)
 - [Sequential Cranial and Overlooked Cervical Spine Injuries Due to Head Trauma: A Billiard-Like Mechanism](#)
 - [Physiotherapy management of a patient with non-cardiac angina: A case report](#)
 - [Case report of massive spontaneous subcutaneous emphysema and pneumomediastinum after cervical discectomy](#)
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see [Cervical radiculopathy diagnosis](#).

Evaluation for myelopathy

[Upper motor neuron](#) findings usually in the lower extremities.

[Weakness](#) may occur without [atrophy](#) or [fasciculations](#).

Spasticity: Poor control of the legs when walking, scissoring of the legs.

Sensation:

Any loss below the level of involvement will follow spinal cord patterns:

Complete loss

[Brown Sequard](#) pattern.

[Central cord syndrome](#).

Pathologic reflexes: [Hoffmann's reflex](#), [Babinski sign](#), [ankle clonus](#).

Magnetic resonance imaging

[Cervical disc herniation Magnetic resonance imaging](#).

Computed tomography

CT requires less time to perform than MRI and is considered superior to MRI for evaluation of disc containment (e.g., bone) ¹⁾.

[Multidetector row computed tomography](#) (MDCT) and MRI showed a moderate-to-substantial degree of inter-modality agreement for the assessment of herniated cervical discs. MDCT images have a tendency to underestimate the anterior/posterior extent of the herniated disc compared with MRI ²⁾.

Additionally, contrast-enhanced CT ³⁾ and CT myelography ⁴⁾ remain useful imaging tools in the evaluation of cervical radiculopathy, but they carry the risk of anaphylactic reactions and nephrotoxicity with the use of iodinated contrast material.

Electrodiagnosis

see [Electrodiagnosis of cervical radiculopathy](#).

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Douglas-Akinwande AC, Rydberg J, Shah MV, Phillips MD, Caldemeyer KS, Lurito JT, et al. Accuracy of contrast-enhanced MDCT and MRI for identifying the severity and cause of neural foraminal stenosis in cervical radiculopathy: a prospective study. *AJR Am J Roentgenol*. 2010;194:55–61.

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Yi JS, Cha JG, Han JK, Kim HJ. Imaging of Herniated Discs of the Cervical Spine: Inter-Modality Differences between 64-Slice Multidetector CT and 1.5-T MRI. *Korean J Radiol*. 2015 Jul-Aug;16(4):881-8. doi: 10.3348/kjr.2015.16.4.881. Epub 2015 Jul 1. PubMed PMID: 26175589; PubMed Central PMCID: PMC4499554.

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Larsson EM, Holtås S, Cronqvist S, Brandt L. Comparison of myelography, CT myelography and magnetic resonance imaging in cervical spondylosis and disk herniation. Pre- and postoperative findings. *Acta Radiol*. 1989;30:233–239.

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