

Degenerative Cervical Myelopathy

Differential Diagnosis

The differential diagnosis includes any condition that can result in [myelopathy](#), such as [multiple sclerosis](#), [amyotrophic lateral sclerosis](#) and masses (such as metastatic tumors) that press on the [spinal cord](#).

Spondylotic myelopathy is an important consideration in the differential of inflammatory myelopathy, especially since misdiagnosis may result in serious consequences as was seen in the cases presented, including exposure to unnecessary costly treatments and irreversible neurological disability from delayed appropriate surgical intervention. Intramedullary spinal cord enhancement can occur with spondylotic myelopathies, albeit rare, and may persistently enhance for an extended period of time even after decompressive surgery ¹⁾.

The difficult differentiation between [multiple sclerosis](#) (MS) lesions and [cervical spondylotic myelopathy](#) (CSM) in the cervical spine is well known. The magnetic resonance imaging (MRI) appearance of both lesions is similar, and clinical parameters are usually used for diagnosis ²⁾

Physical exam findings are not always consistent with severity of disease in CSM; therefore, correlation to plain radiographs, MRI, and patient symptomatology is essential for arriving at the correct diagnosis. In some cases where these studies are still equivocal, use of other studies should be considered including electrodiagnostic studies as well as cerebrospinal fluid examination ³⁾.

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Wang Y, Newsome SD. Cervical spondylotic myelopathy mimicking transverse myelitis. Mult Scler Relat Disord. 2019 Jun;31:131-133. doi: 10.1016/j.msard.2019.04.002. Epub 2019 Apr 3. PMID: 30986646.

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Kim HJ, Tetreault LA, Massicotte EM, Arnold PM, Skelly AC, Brodt ED, Riew KD. Differential diagnosis for cervical spondylotic myelopathy: literature review. Spine (Phila Pa 1976). 2013 Oct 15;38(22 Suppl 1):S78-88. doi: 10.1097/BRS.0b013e3182a7eb06. PMID: 23962997.

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