Spontaneous spondylodiscitis is a rare but serious infectious disease which is a combination of an inflammatory process, involving one or more adjacent vertebral bodies (spondylitis), the intervertebral discs (discitis) and finally - the neighboring neural structures. In most cases the condition is due to a hematogenous infection and can affect all regions of the spinal cord, but it is usually localized in the lumbar area. The most common clinical symptom is a pronounced, constant and increasing nocturnal paravertebral pain, while consequently different degrees of residual neurological symptoms from nerve roots and/or spinal cord may appear. The disease course is chronic and the lack of specific symptoms often prolongs the time between its debut and the diagnosis. This delay in diagnosis determines its potentially high morbidity and mortality. Treatment is conservative in cases with no residual neurological symptoms and consists of antibiotic therapy and immobilization. Surgical treatment is necessary in patients with neurological deficit, spinal instability or drug resistance ¹⁾.

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Petkova AS, Zhelyazkov CB, Kitov BD. Spontaneous Spondylodiscitis - Epidemiology, Clinical Features, Diagnosis and Treatment. Folia Med (Plovdiv). 2017 Sep 1;59(3):254-260. doi: 10.1515/folmed-2017-0024. Review. PubMed PMID: 28976894.

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