

3rd International Conference on

Spine and Spinal Disorders

June 11-12, 2018 | London, UK

Necessary comprehensive management of traumatic spinal cord injuries to achieve good neurological and functional outcome

Naveen Kumar^{1, 2, 3}¹Robert Jones & Agnes Hunt Orthopaedic Hospital, UK²Keele University, UK³Edge Hill University, UK

The management of the traumatic spinal cord injury remains controversial. Guttman demonstrated that with simultaneous attention to all medical and non-medical effects of the spinal cord injury, a significant number of patients recovered motor and sensory functions to ambulate and the majority were pain-free following conservative management. Active physiological conservative management of the spinal injury requires simultaneous scrupulous care of the injured spine together with; the multisystem neurogenic effects of the spinal cord injury on the respiratory, cardiovascular, urinary, gastrointestinal, dermatological, sexual and reproductive functions; the management of the associated psychological effects of paralysis from the early hours or days of injury as well as; the physical rehabilitation and modification of the environment. To date, there is no evidence to suggest that the surgical decompression and/or stabilisation of the neurologically impaired spinal cord injury patient is advantageous. This lecture considers the debates and evidence of surgical management including the effects of timing of the surgical decompression. Also addressed are the factors influencing decisions on management, prognostic indicators of recovery and natural history of complete and incomplete cord injuries. Traumatic biomechanical instability of the spine, physiological instability of the spinal cord, traumatic spinal canal encroachment and traumatic cord compression are also discussed. Early mobilisation, indications for surgery at the RJAH and economic considerations of spinal cord injuries are presented. The ultimate goals of the active physiological conservative management are to ensure maximum neurological recovery and independence, a painfree and flexible spine, safe and convenient functioning of the various systems of the body with minimal inconvenience to patients and the prevention of complications.

Biography

Naveen Kumar is a Consultant in Spinal Injuries at Midland Centre for Spinal Injuries (MCSI) based at Robert Jones & Agnes Hunt Orthopaedic Hospital, Oswestry, an internationally recognised centre of excellence for managing musculoskeletal disorders. He is a Honorary Consultant at University Hospitals Birmingham NHS Foundation Trust. He completed training at Ganga Medical Centre, Coimbatore obtained DNB-Orthopaedic Surgery from National Board of Examinations, India in 2003. He obtained MRCS from Royal College of Surgeons of Edinburgh. He pursued an interest in Spinal Cord Injury. He was trained in Spinal Injuries in UK and USA between 2004 and 2010. He obtained CCT and Fellowship of the European Board of PRM in 2010. As a Board Certified Fellow, he became the first Spinal Injuries Consultant to be recognised as a Trainer by the European Board. He obtained Fellowship of the Royal College of Physicians of Edinburgh and London. He also obtained Fellowship of the Royal College of Surgeons of Glasgow. He has published several papers in peer reviewed journals including Lancet on many different studies including randomised controlled trials, studies on many measures of outcome of spinal cord injuries. He has also authored chapter on Spinal Cord Injuries.