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Evaluation of patients with Subaxial Cervical Fractures by the new AOspine classification

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Objective: To assess the profile of patients with break and/or separation of the Subaxial Cervical Spine utilizing the new AOSpine arrangement and to relate it with the injury instrument and the sort of neurological deficiency.

Methods: Examinations were performed of the clinical records of patients conceded to a tertiary emergency clinic with crack and/or subaxial cervical separation during the period from 2009 to 2016. For the assessment of the relationship between the two unmitigated factors, the Chi-square test was utilized with an importance level of $p < 0.05$.

Results: A sum of 67 clinical records was investigated, in which a higher predominance of type C breaks (49.3%) was noticed. The neurological sub-order N4 (35.8%) was the most predominant sort found, trailed by subtype N0 (26.9%). Among the fundamental injury instruments found, the most pervasive was the bike mishap (29.9%). There was no measurably huge relationship between the injury component and the AOSpine morphological arrangement ($p > 0.05$) or neurological shortage ($p > 0.05$).

Conclusion: Cervical breaks of type C, because of car crashes were the most predominant. It was impractical to decide a relationship between the level of neurological inclusion and the morphology of the injury.

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