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One-stage anterior approach for long-segment subaxial cervical spondylitis tuberculosis: A case report

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Background: Cervical spondylitis TB is a rare disease that may lead to severe neurological complications. The anterior approach is considered as a gold standard for cervical spine tuberculosis. Although, nowadays, available studies and literatures have not precisely mentioned on how many levels is acceptable for this disease and is still up for discussions.

Case presentation: A 45-year-old Indonesian male brought from a rural hospital to our outpatient clinic. Before admission, the patient had a progressive weakness of all extremities for 3 months. Cervical x-ray and MRI showed 3-levels of vertebral body destruction, suggesting a cervical spondylitis TB. Patient had debridement, corpectomy on C4,5,6, fusion with cage and anterior plating from C3 to Th1 in a one-stage anterior approach.

Conclusion: Anterior approach for more than two levels of affected vertebrae on cervical spondylitis TB provides respectable correction of kyphosis curvature and neurological function improvements.

Keywords: Cervical spondylitis, Tuberculosis, Surgery, Anterior approach, Extrapulmonary TB.

Biography

Rifqi Aulia Destiansyah is a Resident of Neurosurgery, Universitas Airlangga, Dr. Soetomo General Academic Hospital, Indonesia.

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