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Acute Adult Tethered cord syndrome a complication of pregnancy on the background of congenital spina bifida occluta and tethered

Zohaib Tariq

Northampton General Hospital, UK

The purpose of writing this case report is to share this interesting and rare functional disorder comprised of symptoms caused by excessive stretch of spinal cord in someone who has tethered cord congenitally. Causes include excessive flexion of spinal cord that can happen in pregnancy. Symptoms mimic cauda equine syndrome and include urinary/fecal incontinence, saddle anesthesia. MRI spine is investigation of choice and urgent surgical de-tethering may be required in some cases. This case is about a 24 years old female who was delivered with forceps under spinal anesthesia 4 days before. Since delivery she was double incontinent and complaining of pain and heaviness on buttocks and left thigh. Initially it was thought, could it be a complication of spinal anesthesia but anesthetists were pretty confident that it was not the case. MRI L/S spine was arranged to look for ongoing symptoms which showed congenital spina bifida occluta with intradural lipoma and tethered cord. Based on symptoms provided radiologist raised the suspicion of acute adult tethered cord syndrome. At this point neurology team was involved for further management. O/E she had decreased anal tone, absent left ankle jerk and decreased pain and touch sensations of buttocks, perianal area and left L2,L3,L4 dermatomes. Power, rest of reflexes, cranial nerves and higher mental functions were intact. Urgent neurosurgical opinion was sought which recommended conservative management initially and repeat MRI L/S and whole spine in 3-4 days. Patient's symptoms are improving gradually. Repeat MRI spine is again consistent with previous findings. Patient will be re discussed with neurosurgeons if symptoms does not resolve fully.

Biography

Zohaib Tariq graduated in 2011 and in medicine training program at CT1 level. He is very keen and presented various posters and delivered oral presentations at various national conferences.

Zohiab631@yahoo.com

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