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Publication year: 1992

Journal: Tidsskrift for den Norske lægeforening : tidsskrift for praktisk medicin, ny række

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Society: Unknown

Origin country: Norway

Target countries: Norway

PMID: 1579910

Source: <https://pubmed.ncbi.nlm.nih.gov/1579910/>

An injury of the spine may include an injury of the neural structures in the spinal canal. This factor must always be kept in mind during care of a trauma patient until a neurologic injury has been excluded, or the spine stabilized. The classification of spine injuries and evaluation of stability are based on clinical and radiological examinations of the patient. In grade 1 unstable injuries, deformity of the spine may increase if the injury is not stabilized. In grade 2 unstable injuries, a neural involvement may occur if the injury is not stabilized. All injuries with neural involvement are by definition unstable injuries grade 3. Stabilization is indicated for all unstable injuries. In unstable injuries grade 2 and 3, a well-developed method is transpedicular osteofixation with an internal fixator which allows reduction and neutralization of the deforming forces, combined with a transpedicular bone graft to the fractured vertebra. This provides stability and allows early mobilization without immobilizing more segments than involved in the unstable area.