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Diagnosis and Management of Invalidating Degenerative Spinal Disorders

Guest Editor:

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Deadline for manuscript submissions: closed (31 October 2024)

Message from the Guest Editor

Cervical Myelopathy is a major cause of invalidity in developed countries. CSM is the most frequent cause of spinal cord injury in adults. Delayed diagnosis and management lead to permanent invalidity. The clinical picture includes an alteration of hand dexterity, gait instability, paraparesis/tetraparesis, and sphincterial impairments. The most invalidating degenerative spinal disorders of the dorsal spine are giant dorsal disc ligamentum flavum herniations and calcifications determining spinal cord injury. The clinical picture varies from radicular pain, with heaviness in the lower limbs, to more severe situations of paraparesis or paraplegias with sphincterial impairments.

This Special Issue is dedicated to the diagnosis (clinical, radiological, neurophysiological) and management (surgical, conservative) of invalidating DSDs. We encourage the submission of papers that address a wide range of topics, including clinical evaluation, radiological evaluation, neurophysiological evaluation, medical and surgical treatment, and long-term follow up.



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Message from the Editor-in-Chief

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