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Spinal cord injury after percutaneous epidural neuroplasty with anticoagulation therapy in elderly patient

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The occurrence of symptomatic epidural hematoma following percutaneous epidural neuroplasty (PEN) is a very rare but serious complication. This report is to inform a case of patient who developed a severe bleeding complication associated with PEN in elderly person. An 80-year-old man with a history of congestive heart failure and atrial fibrillation, on warfarin treatment, presented with posterior neck pain at C6-7 level was admitted. Ten days have passed since we stopped oral warfarin. He received PEN for pain control. He was damaged the thoracic spinal cord due to epidural hematoma by epidural catheter. Neurological examination revealed T5 (sensory level) incomplete paraplegia (AISA-B). At that time, whole spine MRI demonstrated posterior epidural hematoma (T1-T12) with mild compression of thecal sac and inhomogeneous signal and contrast enhancement in all pulse sequences. After 3 days later, he underwent posterior decompression surgery at T3-6 level for hematoma evacuation. He suffered from both lower limb weakness and neurogenic bladder symptoms. After spinal cord injury rehabilitation for 6 months, motor weakness and bladder function were partially recovered to ASIA-C. The modified Bathel Index score was increased from 39 to 75. We think, in elderly person, it needs much longer discontinuation period of oral warfarin for invasive procedure like PEN.

Biography

Jae-Hyung Kim has completed his PhD from Kyung-Hee University in Korea (South) and he has studied from Stanford University School of Medicine in USA as visiting scholar in 2015. He has been working as a Professor, Kwan-dong University School of Medicine. He has published more than 30 papers in reputed journals.

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