

Myelopathy

This leaflet aims to give you some information about myelopathy and what you can do to help manage the symptoms you are experiencing.

What is Myelopathy?

Myelopathy is the medical term for spinal cord compression in the neck (cervical) or chest region (thoracic) of the spine. Symptoms can start suddenly, or they can develop slowly over time.

How is Myelopathy Diagnosed?

Myelopathy is diagnosed from the signs and symptoms you describe alongside an examination, which may include:

- Movements of the back or neck
- Nerve tests including, sensation, reflexes and muscle power
- Nerve stretching tests

An MRI scan is used to confirm the diagnosis and underlying cause of the symptoms.

What's wrong with me?

There are two main causes of myelopathy, either:

1. A disc prolapse that compresses the spinal cord, this often results in symptoms that start quickly.
2. Degeneration that occurs with aging, such as formation of osteophytes (bony spurs) that compress the spinal cord. This usually results in symptoms that develop over a long time.

In rare cases this could be caused by other problems, including;

- Tumors in or around the spinal cord
- Infection around the spinal cord
- Trauma to the spinal cord
- Vascular problems in or around the spinal cord
- Some neurological conditions

How can this affect me?

Even though myelopathy is the result of spinal cord compression, many people do not report experiencing pain. People who are affected usually report neurological symptoms in the arms and legs.

What are the main symptoms of myelopathy?

- Clumsiness and loss of finger dexterity. You may find doing buttons up more difficult
- Pins and needles, and numbness affecting both arms or both legs
- Loss of co-ordination in your arms or legs. This might cause tripping or falling

- Difficulty walking. Your legs may become weak or feel stiff
- Altered sensations such as trickling water
- Muscle Weakness

How can a clinician help?

What about scans?

If a myelopathy is suspected then an MRI (magnetic resonance image) scan will be required to determine the extent and cause of any spinal cord compression.

MRI scans are the gold standard for getting an internal view of the bodies' structure. MRI scans don't involve x-rays and are very safe, although they are quite noisy and some people find them claustrophobic. X-rays only provide limited information about the spine, and are therefore are not helpful in the diagnosis of myelopathy.

Do I need a scan?

MRI scans are not normally required in the early stages of nerve pain in the arm or the leg, because it is normal that pain will improve on its own, with time.

However, as myelopathy can cause permanent damage to the spinal cord, and cause permanent symptoms, it is essential this is done. MRI scans are very sensitive and will detect almost all serious spine problems such as cancer, infection and myelopathy. MRI scans will also show the cause and severity of the myelopathy.

Should I be concerned?

In some cases of myelopathy can cause a cluster of symptoms that require requires immediate medical attention. If this happens you may experience:

- Loss of feeling or pins and needles between your legs, around your genitals or back passage
- Changes to bladder and bowel function, such as loss of sensation, loss of control or an inability to empty your bladder
- Sexual problems such as loss of vaginal sensation and inability to achieve an erection or ejaculate
- Weakness in the legs affecting walking

If you think you are experiencing any of these symptoms you should attend your nearest A&E department.

How is myelopathy treated?

If your MRI scan confirms that you have myelopathy then you will be referred to a Neurosurgeon or Orthopaedic Consultant for further management. The treatment they offer for managing myelopathy is dependent upon a number of factors including;

- How bad your symptoms are
- What type of symptoms you have
- What the specialist finds when they examine you
- The findings of your MRI scan

If your symptoms are not concerning or severe, and the findings of your examination and MRI scan do not show a serious problem then your specialist may recommend a conservative approach including physiotherapy and self-management.

As myelopathy is caused by compression of the spinal cord, and generally worsens with time if left untreated, it is more commonly managed with surgery than other spinal conditions. Surgery involves the removal of bone or tissue that is compressing the spinal cord, to relieve the pressure on the nerves. The decision to undertake surgery will need to take into account your general health and overall fitness.

If you have concerning symptoms such as muscle weakness, problems with walking or changes to bladder or bowel function, then it is very likely that surgery will be recommended.

However, in some instances, if you have had symptoms for a very long time or if there is too much damage to the spinal cord, then surgery may not be advised. This is because the risks may outweigh the benefits, or because damage to the cord has already caused permanent changes.

What are the key take home messages?

- Myelopathy is rare, nerve symptoms in the arms or legs is usually caused by other problems
- Distress and fear often makes symptoms worse
- Myelopathy can be very varied, and the extent of symptoms is not always related to the severity of spinal cord compression
- Medications and adjustments in lifestyle help to improve your quality of life
- It is important to stay as active as your symptoms allow
- If you develop concerning symptoms that affect your arms, legs, bladder or bowels you should seek immediate medical attention