Surgical Outcomes Of Spinal Cord Intramedullary Cavernous Malformation: A Retrospective Study Of 83 Patients In A Single Center Over A 12-Year Period

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Purpose:
Spinal cord intramedullary cavernous malformation (SICM) is a rare vascular disease, and the therapeutic strategy is still under debated. The purpose is to analyze the outcomes of SICM surgical resection and find the possible factors indicating a better outcome.

Material And Methods:
A retrospective analysis of 83 SICM patients in one single center from 2005 to 2017 was performed. Clinical information was collected and the pre- and post-operative neurological status were assessed by McCormick Scale.

Results:
Total 83 SICM patients were included. 48% were male (n=40) and the mean age was 39.0 years. 7% (n=6) of the patients had family history and 4% (n=3) had multiple lesions. 41% (n=34) were found with definite hemorrhage. Before surgery, the neurological status of the patients was 43.4%, 31.3%, 13.3%, 12.0% in Grade I (n=36), II (n=26), III (n=11), and IV (n=10), respectively. Total 63 patients got long-term follow-up, within them 19 patients improved, 39 patients kept stable and 5 patients deteriorated. The patients with duration of symptoms less than 3 months showed a better improved outcome rate than those with duration longer than 3 months.

Conclusion:
The findings suggest if resection of SICM is achievable, the surgical therapy should be take into account to avoid the risk of severe complication followed by lesion bleeding, even the patients are asymptomatic. The surgical therapy strategy for SICM within 3 months after the acute onset of symptoms may lead to better clinical outcomes for SICM patients.