Neurological Aspects of Spinal Cord Injury

Norbert Weidner • Rüdiger Rupp Keith E. Tansey Editors

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ISBN 978-3-319-46291-2 DOI 10.1007/978-3-319-46293-6 ISBN 978-3-319-46293-6 (eBook)

Library of Congress Control Number: 2017939358

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Printed on acid-free paper

This Springer imprint is published by Springer Nature

The registered company is Springer International Publishing AG

The registered company address is: Gewerbestrasse 11, 6330 Cham, Switzerland

## Preface

Neurorehabilitation is a newer and smaller subspecialty in neurology and is largely dominated by neurologists concerned with stroke and brain injury. Spinal cord injury and disease has been more the realm of trauma physicians, spine surgeons, and physical medicine and rehabilitation doctors, but neurologists interested in this area are becoming more common for several reasons. For one, neurologists are specifically trained to detect, monitor, and treat neurological abnormalities. There is also a cultural tradition of research training, both clinical and preclinical, in neurological education with a growing interest in the areas of neural plasticity and neural repair. Finally, many are appreciating that lessons learned scientifically and clinically in spinal cord injury and disease may serve to enlighten investigations in other areas of neuropathology and provide new paths forward for those inquiries.

Until now, a comprehensive textbook specifically focused on addressing the neurological aspects (scientific and clinical) of spinal cord injury and disease has been missing. On the one hand, neurologists are less familiar with spinal cord injury and disease, since they are rarely exposed to this condition. On the other hand, spinal cord specialists coming from a variety of medical specialties other than neurology would like to obtain concise information regarding the neurological presentation, diagnosis, and treatment of spinal cord injury and disease.

Basics regarding epidemiology, anatomy, and pathophysiology as well as neurological signs and symptoms indicating lesions of the spinal cord including the cauda equina are provided. Differential diagnosis of nontraumatic spinal cord disease is extensively covered. Specific diagnostic procedures (imaging, neurophysiology), which allow one to differentiate various disease conditions, help to better predict the clinical outcome and, going forward, provide specific information regarding structural damage and/or neural repair. Spinal cord injury and disease causes not only the loss of normal neurological sensorimotor function but generates the emergence of pathoneurophysiology in the form of spasticity and neuropathic pain, both of which are extensively considered in this volume.

Spinal cord injury represents not just a disease condition with a segmental sensory and motor level in combination with below level loss of sensorimotor function. Damage to the autonomous nervous system leads to impairment of highly important body functions such as bladder/bowel evacuation, respiration and cardio-vascular function, which are also covered here by leading experts.

Chronic neurological sequelae of spinal cord disease require a solid knowledge base as a prerequisite to properly treat symptoms, which can substantially affect quality of life beyond the immediate spinal cord injury or disease-related disability. It is rather difficult to identify an organ system not impacted by high spinal cord injury and disease and rather than consider this impact as pathology of those organ systems, one should consider the pathology being of lost neurological control. That is to say neurogenic bladder and detrusor/sphincter dysynergia are products of altered neuropathology and are not, at least initially, pathology of the bladder or urinary tract.

Beyond aspects related to acute care, neurorehabilitative concepts, with an emphasis on restorative approaches to recover function in both the upper and lower extremities, are discussed and will help those in the subspecialty of neurorehabilitation. Translational research approaches to protect and restore the nervous system after spinal cord injury are considered.

Many chapters go from bench to bedside with true translational (all the way to practice implications) intent. This will help clinicians to get an up-to-date overview regarding developing therapeutic strategies, which might further improve outcomes beyond the current state of acute and rehabilitative care.

The editors wish to congratulate all the contributing clinicians, therapists, and scientists, who have written such a comprehensive book. We are convinced that this book will provide new and valuable information to professionals dealing with the neurological aspects of spinal cord injury and disease in the clinical and research context.

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## Contents

## Part I Basics

1	Epidemiology of Spinal Cord Injury Roland Thietje and Sven Hirschfeld	. 3
2	<b>Functional Neuroanatomy of the Spinal Cord</b>	19
3	Pattern of Neurological Dysfunction in Spinal Cord Disease	61
4	Natural Course of Disease of Spinal Cord Injury	77
Par	t II Non-traumatic Spinal Cord Injury	
5	Spinal Cord Vascular Disease	109
6	Infectious, Autoimmune and Other Immune-Mediated Causes of Myelitis Ingo Kleiter, Erich Schmutzhard, and Corinna Trebst	123
7	Spinal Cord Compression Peter Prang	161
8	Metabolic, Toxic, Hereditary, and Rare Causes of Spinal Cord Disease Norbert Weidner and Zacharias Kohl	195
9	Syringomyelia Jörg Klekamp	217
Par	t III Diagnostics	
10	Spinal Cord Imaging Patrick W. Stroman and Rachael L. Bosma	237
11	Spinal Cord Neurophysiology	259

Par	t IV Neurological Complications	
12	<b>Diagnostics and Treatment of Pain in Spinal Cord Injury</b> Steffen Franz and Nanna Brix Finnerup	283
13	Spasticity Noam Y. Harel and Keith E. Tansey	303
14	<b>Cardiovascular Dysfunction Following Spinal Cord Injury</b> Aaron A. Phillips and Andrei V. Krassioukov	325
15	Neuro-Urology in Spinal Cord Injury Jens Wöllner, Jörg Krebs, and Jürgen Pannek	363
16	<b>Neurogastroenterology in Spinal Cord Dysfunction</b>	397
17	Neurogenic Respiratory Failure Sven Hirschfeld and Roland Thietje	439
18	Medical Complications of Spinal Cord Injury: Bone, Metabolic, Pressure Ulcers, and Sexuality and Fertility Steven Kirshblum and Jayne Donovan	463
Par	t V Interventions	
19	Pathophysiology of Traumatic Spinal Cord Injury Sebastien Couillard-Despres, Lara Bieler, and Michael Vogl	503
20	<b>The Current Status of Neuroprotection for Spinal Cord Injury</b> Andrea J. Santamaria and James D. Guest	529
21	Neuroregeneration Ina K. Simeonova and Armin Blesch	585
22	Neurorehabilitation of the Upper Extremity Elisabeth Nowak, Marlis Euler, and Rüdiger Rupp	621
23	Neurorehabilitation: Strategies of Lower Extremities Restoration Cornelia Hensel, Ute Eck, Merkur Alimusaj, Rudolf Kaschuba, Anne von Reumont, Rüdiger Rupp, and Eva-Maria Schmidt	649
24	Neuroprosthetics	689
25	<b>Translation: Relevance of Spinal Cord Injury Animal Models</b> Seth Tigchelaar and Brian K. Kwon	721
26	Clinical Trials and Spinal Cord Injury: Challenges and Therapeutic Interventions Freda M. Warner, Jacquelyn J. Cragg, John D. Steeves, and John L.K. Kramer	741
Ind	ex	757