

# Clinical Case Presentation

## Spinal Cases

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•Mr G.F (M) 26 yrs Bank Official

Cervical pain radiating to left shoulder -2/12

Pain permanent & disturbs his sleep

Attended several doctors, GP's, Ortho's

Anti inflammatory & intraarticular injection

No relief

X-Ray cervical spine & shoulder - NAD

Consulted me at request of relative

Clinical examination – NAD

Further questioning?

I. S Male 59 yrs Attendant

Diabetic

Developed chest infection – fever, cough, sputum

Became weak

Nocturia & increasing difficulty to walk to toilet.

Needs help

Became paraparetic

Admitted to a private clinic

Specialist noted 'tremor' in lower limb

Parkinson's disease

Condition worsening

Mr P.Y 23 yrs University Student

Cervical pain, increasing in severity

Attended chiropractor regularly who reassured him that he will be cured

After 2 years of treatment, patient became tetraparetic

Mr R.F 8 yrs Child

Healthy looking boy

Repeated urine tract infections (3 episodes in 1 year)

Urine incontinence (both day and night) appearing 1 year back and getting worse

Attended 4 paediatricians since birth

U/S – Mild bilateral hydronephrosis, post-voiding bladder volume > 50 ml

Voiding cysto-urethrogram = No signs of posterior urethral obstruction

Urethrocystoscopy = Urethra of normal calibre, no posterior urethral valve, bladder mildly trabeculated

Urodynamics study in favour of a NEUROGENIC bladder



Thank You