A Case Report of Neurologically Unstable Fracture of the Lumbosacral Spine in a Patient with Ankylosing Spondylitis

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Abstract

Introduction: Fracture/dislocation is uncommonly reported in ankylosing spondylitis involving the lumbosacral spine. Clinical Picture: We report an 18-month follow-up of a case of neurologically unstable traumatic fracture of the lumbosacral spine in ankylosing spondylitis. Treatment/Outcome: Posterior decompression, alar-transverse fusion and instrumentation were performed. Anterior diskectomy and fusion were done 6 weeks later. There was solid bony fusion on follow-up and the patient had improvement of 2 Frankel grades and was able to ambulate. Conclusion: Combined approaches and longer fixations to stabilise the spine may be required. In the lumbosacral spine, this poses a problem vis-à-vis limited levels of fixation in the sacrum.

Key words: Combined approach, Frankel grade

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