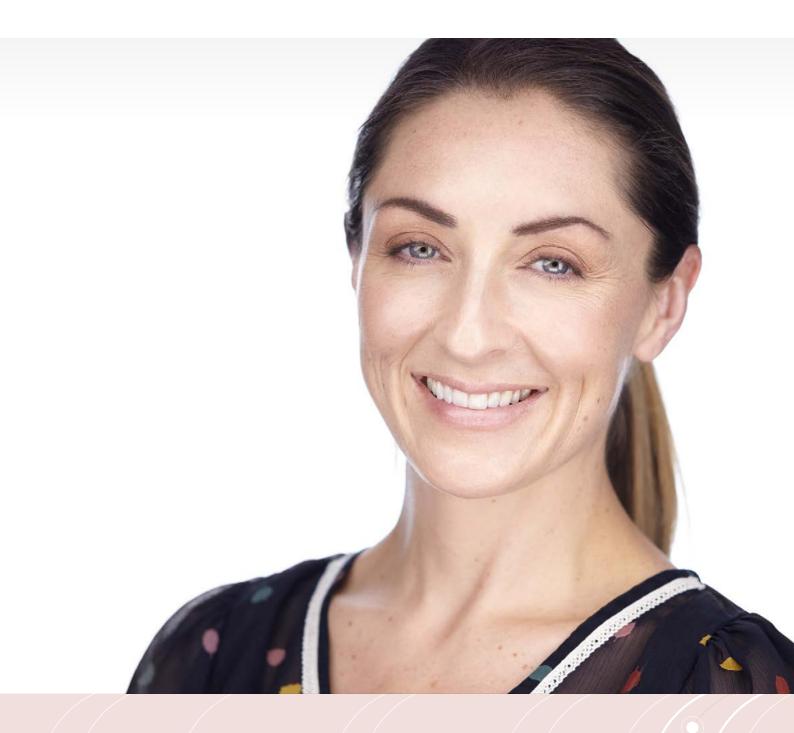


NEUROSURGEON



Guide to
THORACIC SPINE PROBLEMS



KEY FACTS

- The thoracic spine is the largest area of the spine found in the upper back at chest level
- Pain may be due to poor posture, muscle strain, joint dysfunction and joint degradation due to injury or ageing
- For spinal cord compression at chest level, symptoms may include leg weakness, difficulty walking, reduced sensation to the legs and loss of bladder control
- Treatment options include rest or spinal cord decompression surgery depending on the nature of the problem

WHAT IS THE THORACIC SPINE?

The term 'thoracic spine' refers to the longest region of the spine which runs from the base of the neck down to the abdomen. It's connected to the cervical spine above and the lumbar spine below. It is the only portion of the spinal region attached to the rib cage. Its primary function is to support the rib cage while protecting the heart and lungs. It controls motor and sensory signals primarily for the upper back, chest, and abdomen. All control of the muscles of the legs passes through the thoracic part of the spine.

WHAT IS THORACIC SPINE PAIN?

Thoracic spine pain occurs when the bones and/or nerves of the thoracic spine are strained, compressed, fractured, broken, or injured. Soft tissues in the area become inflamed, causing pain that radiates into the rib cage from the back toward the front of the chest.

WHAT ARE THE SYMPTOMS OF THORACIC SPINAL CORD INJURY?

The symptoms of thoracic spinal cord injury include:

- Loss of motor function of the legs
- Reduced sensation to the legs
- Stiffness in the upper back area
- Inability to maintain normal posture
- Muscle spasms
- Pain that persists for more than 10 days

Spinal cord compression may not be associated with any pain.

WHAT CAUSES THORACIC SPINE PAIN?

Numerous factors can contribute to thoracic spine pain

- Car accidents
- Sports injuries
- Poor posture
- · Backpack use
- Computer work
- Repetitive movement

Less common causes include:

- Narrowing of part of the spine (thoracic stenosis)
- Slipped discs
- Fractured vertebrae
- Osteoporosis
- Spinal osteoarthritis
- Ankylosing spondylitis
- · Scheuermann's disease
- Spinal tumours

Not all thoracic spine pain derives from the spine itself. Other causes include problems related to:

- Lung function
- Oesophagus
- · Gall bladder
- Pancreas

WHEN SHOULD I CONSULT A DOCTOR?

It is never too soon to consult a medical professional about symptoms of injury or disease. Early diagnosis of thoracic spine pain can lead to early intervention and symptom relief. A consultation may also uncover other causes of your pain that can be addressed.

HOW ARE THORACIC SPINE PROBLEMS DIAGNOSED?

An initial consultation regarding problems in the thoracic spine will include a discussion of symptoms and medical history, and a physical exam. For many patients, this is sufficient to diagnose a thoracic spine injury. Beyond these basics, and to rule out other possible causes for symptoms, the following diagnostic tests may be recommended:

- MRI to illuminate the location and extent of a problem
- CT or X-ray to determine if there is a fracture or other damage to the bone

An accurate and comprehensive view of thoracic spinal pain is used to determine which treatments will help achieve optimal healing.

HOW ARE THORACIC SPINE PROBLEMS TREATED?

When thoracic spine pain is modest, early treatment can be effective in resolving symptoms and preventing the injury from worsening. Your doctor may recommend:

- Rest
- Modifying your activities
- Ice/heat therapy
- Over-the-counter anti-inflammatory medication
- Massage

Where the spinal cord is compressed, surgery is necessary.

Thoracic laminectomy is a procedure used to remove spinal tumours and relieve the pressure of spinal stenosis, a narrowing of the spinal canal that can compress spinal nerves. The surgery is performed under general anaesthesia. An incision is made in the back allowing the surgeon to see, assess, and remove the source of the pressure on the spinal cord. The incision is closed with absorbable sutures that are dissolved by the body.

WHAT CAN I EXPECT AFTER THORACIC SPINE SURGERY?

You will be taken to an observation room after surgery where you will be monitored. When you wake up, you may feel drowsy and nauseous. Oral and intravenous pain medications will help to keep you comfortable.

You will be taken to your hospital room when you are stable. Most patients are discharged after 2-3 days following surgery.

WHAT SHOULD I DO AFTER THORACIC SPINE SURGERY?

Self-care at home is an important part of a successful recovery. Dr Sammons will provide you with guidelines which you should follow carefully. You may also require physical therapy. This will be determined at your follow-up visit.

SHOULD I FOLLOW UP WITH DR SAMMONS AFTER SURGERY?

Absolutely. You will need to see Dr Sammons for a follow-up visit 4-6 weeks after surgery. A practice nurse will reach out to you after you have returned home to schedule your follow-up. Should you have any concerns beforehand, be aware that Dr Sammons is happy to talk and meet with you earlier to address them.

Surgical recovery takes approximately 6 weeks, and it may take up to a year for full muscle and sensory function to improve where there is spinal cord dysfunction.

Please call our rooms if you have any additional concerns or questions.



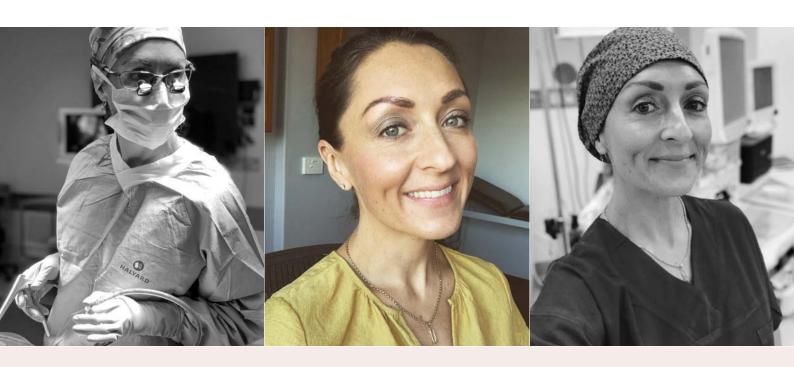
Hello!

I'm a Neurosurgeon at North Shore Private Hospital, Gosford Private Hospital, Brisbane Waters Private Hospital and the Sydney Adventist Hospital. I treat all neurosurgical conditions, but with a particular interest in Peripheral Nerve Surgery. I pride myself on providing personalised and thoughtful patient care and utilising my skills to achieve the best outcome possible.

I believe that a great neurosurgeon will ensure you feel listened to, will ensure that you understand what your surgery involves, and should also work together with your GP to achieve the best outcome for you.

Dr Vanessa

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