

Diagnostic and Therapeutic Particularities in Abdominal Trauma Associated with Spinal Cord Injuries – Review of the Literature

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Abstract

Post-traumatic morbid associations may evolve by themselves, or can interact, with effects of adding or potentiating gravity. Sometimes cumulative or potentiating effects are associated with clinical and paraclinical confusing manifestations induced by one of the components of the lesion complex, or by mutually aggravating effects. It is also the case of vertebromedular traumas associated with other post-traumatic lesions, where the neurological signal is distorted, and may induce particularities of associated lesions. Post-traumatic spinal shock, autonomic dysreflexia and motor, sensory and autonomous after effects, bring distortions of the neurogenic signal, which will significantly affect other traumatized territories, generating clinical manifestations and atypical reaction elements. The prototype of this post-traumatic morbid association is represented by the lesion complex vertebromedular trauma - abdominal trauma.

Key words: vertebromedular trauma, spinal shock, autonomic dysreflexia, abdominal trauma