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Collapse of the vertebra in the spine

What is a compression fracture of the spine?

A compression fracture occurs when the normal vertebral body of the spine is squished, or compressed, to a smaller height. This injury tends to happen in two groups of people.

First, are patients who are involved in traumatic accidents. When a load placed on the vertebrae exceeds its stability, it may collapse. This is commonly seen after a fall.

The **second**, and much more common, group of patients are those with osteoporosis. Patients with osteoporosis who sustain multiple compression fractures may begin to notice a curving of the spine, like a hunchback, called a kyphotic deformity.

What are the symptoms of a compression fracture of the spine?

1. History of injury
2. Back pain is by far the most common problem in patients with a compression fracture.
3. Nerve complaints

Look for any loss of sensation in the legs or weakness of leg or difficulty in passing urine.

In some serious traumatic fractures, called "burst fractures," the compression occurs around the spinal cord and nerves.

In some situation with unstable burst fracture, may require surgical treatment to prevent or relieve pressure on the spinal cord or nerves.



What is the treatment of compression fractures?

The best treatment is prevention. Usually, treatment is aimed at alleviating the pain, and preventing injuries in the future. This is best accomplished by treating osteoporosis with exercise, calcium, and medications.

In osteoporosis with fracture

Most traumatic can be treated without surgery: with bed rest or with a brace. Compression fractures tend to heal completely in about 8 to 12 weeks.

If the pain is severe, and collapse is becoming problematic, a procedure called a vertebroplasty may be considered. In this procedure an interventional radiologist restores the height of the bone and injects cement into the vertebra to stabilize the fracture and prevent further collapse.

Patients who have one compression fracture are much more likely to have more, and therefore prevention of future compression fractures must be addressed

When canal is compromised as in an unstable burst fracture, surgical intervention is required. This can be achieved by approaching from the front as well as from the back.

