

Clinical improvement was observed in 6 (30%) out of 20 patients treated with SCs transplantation. Short duration of injury and small cord lesions correlated with good outcome. Follow up electrophysiological studies did not show statistically significant changes. Follow up MRI did not show significant changes. Minor and temporary treatment-related morbidity were recorded

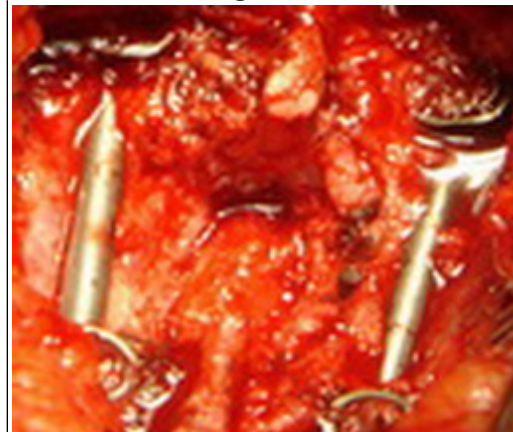
The application of autologous adult bone marrow mesenchymal SCs directly into the spinal cord is relatively safe and has clinical benefits in patients with chronic spinal cord injury. However, multicenter studies should be conducted to further elucidate the safety and efficacy of SCs therapy in patients with spinal cord injury



Sagittal T2 weighted MRI of the dorsal spine showing wedge fracture of D11 and cord compression. Note segmental area of myelomalacia opposite D9-D11 (Black arrow).



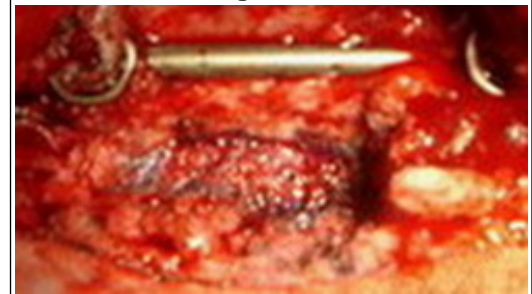
Dural opening at site of cord injury



### Surgical exposure of injured dorsal cord



### Intraparenchymal and intralesional injection of SCs



### Watertight dural closure with fibrin glue