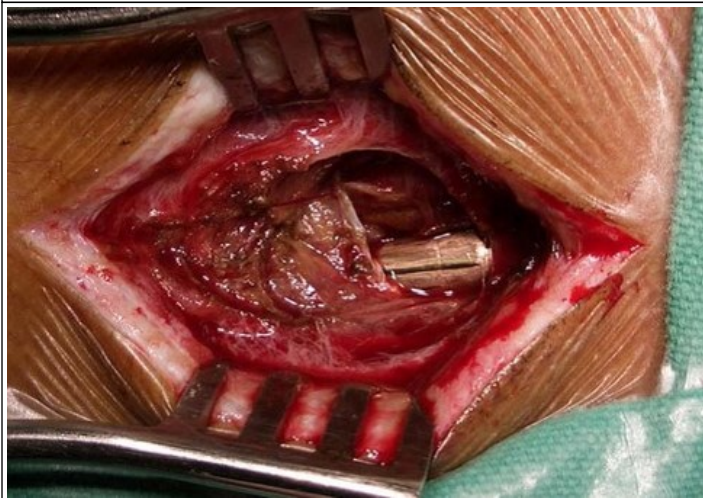


Introduction

Gunshot injuries to the spine are unfortunately common in Pakistan and neighboring countries because of political turmoil. They lead to severe economic problem for the patients family and the community.

Our objective was to evaluate different patterns of Spinal gunshot injuries, their outcomes and to find if the spinal stability scales are good predictors of the management and outcomes.



Methods

- A prospective study of 150 patients
- January 2011 till December 2014,
- Evaluated on admission clinically, radiologically, ASIA scale.
- TLICS or the SLICS applied depending on the site.
- Re-evaluated after 1 month and 12 months of injury using ASIA scale

Results

Out of 150 patients with gunshot, 31 percent were cervical, 39 percent were thoracic, 24 percent were lumbar and only 6 percent were sacral. Sixty percent of the patients were treated conservatively while 40 percent were treated surgically in which 40 percent required decompression and 30 percent required stabilization. Thoracolumbar injuries had the best outcome followed by cervical injuries. Young patients presenting early with incomplete injuries had a better outcome.

Conclusions

Progressive neurology or incomplete injury with CSF leak or unstable spine, were indications for surgery. Incomplete injuries with neurological deterioration showed benefit, with early surgery. Patients with complete injury, and associated injuries were mainly conservatively managed and recovery was minimal.

