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Spinal cord and medulla

Function of spinal cord and medulla oblongata. Difference between spinal cord and medulla oblongata. Spinal cord and medulla oblongata anatomy. Junction of medulla and spinal cord. Does the medulla connects the brain and spinal cord. The spinal cord is made up of the pons and the medulla. Cortex and medulla of spinal cord. Spinal cord and medulla oblongata.

A spinal cord injury (sking) is damage to any part of the spinal cord, which often causes temporary or permanent changes in its function. A spinal cord injury is usually started with a sudden traumatic shot to the spine that fractures or spreads the vertebrae. Generally, the spinal cord, which is the main beam of nerves that transport impulses from the brain to the rest of the body, is very sensitive to injuries. However, the spinal cord is not able to repair itself if it is damaged. If you have a spinal cord injury, every aspect of your life can be affected. You will feel the effects of your injury mentally, emotionally and socially. There are about 12,000 cases of spinal cord injuries each year in the United States. It is more common in white males. Causes The most common cause of spinal cord injuries is the trauma, which can cause road accidents, falls, shootings or knife injuries, or sports injuries. Almost half of spinal cord injuries are caused by motor vehicle accidents. The spine can be weak due to other conditions, such as arthritis, cancer, inflammation, infections or vertebral column degeneration, which will also cause spinal cord injuries. Symptoms The symptoms of a spinal cord injury vary depending on the position and gravity of the lesion. If a lesion occurs at the top of the spinal cord in the neck, it causes four-piece-paralysis of both arms and both legs. If the spinal cord injury occurs in the lower back, it can cause paraplegia-paralysis only of the legs. There are two types of spinal cord injuries A ϵ à ℓ α Complete lesions and incomplete injuries. In a complete wound, a person loses every ability to feel and moves involuntarily under the level of lesion. In an incomplete injury, there is still some operation under the level of lesion. Spinal cable lesion of any type can cause one or more of the following signs and symptoms: loss of loss or an altered feeling, including the ability to feel heat, cold and tattola lack of intestinal control or bladder reflexive exaggerated activities or muscle spasms changes of sexual function, such as sexual sensitivity and fertility pain or sensation of intense ripple Respiratory difficulty and coughing digestive problems Diagnosis The spinal cord injury is not always immediately recognizable. People who are suspected of having the condition should resort to doctors to prevent further injuries. To diagnose a spinal cord injury, the doctors will first know the patient's medical history, will perform a physical examination and perform some imaging tests. Common diagnostic tests include: a CT scan. Use a combination of X-rays and computer for A series of cross-section images that can show the position and extension of the damage and reveal the problems. A scan of magnetic resonance. It takes a photo of the wounded area using a strong magnetic field and radio waves. A computer creates a vertebral column image to reveal herniated disks and other anomalies. A This is an X-ray of the spine taken after a dye is injected. Somatosensory Evoked Potential (SSEP) magnetic test or stimulation. Conducting these tests can show if nerve signals can pass through the spinal cord. X-ray spins. It can show fracture or damage to the bones of the spine. Treatment There is no cure to reverse the damage to the spinal cord. However, prostheses and drugs can promote nerve cell regeneration or improve the function of the remaining nerves after a spinal cord injury. At the same time, the treatment of spinal cord injury is focused on the prevention of further injury and the ability to bring people back with a spinal cord injury to an active and productive life. About a third of people who have an injury to the neck area will need help with breathing and require respiratory support. Recovery from a spinal cord injury requires long-term recovery and rehabilitation. The electrical stimulation of the nerves by neural prosthetic devices can restore specific functions, including the bladder, breathing, cough and movements of the arm or leg. But if doctors should use these devices depends on the level and type of spinal cord injury. Keywords: spinal cord injury. Related articles: What are the Pros and Cons of Spinal Cord Surgery? What is a spinal cord stimulator? Spinal deformity: Symptoms, Causes and Treatment Radiated Spinal Cable Syndrome (TCS): Causes, symptoms, treatments and prognosis that radiate back pain from the low pain column: symptoms, treatment, home care * Content is not intended to be a substitute for professional medical advice, diagnosis, or treatment. Always look for the advice of your physician or other qualified health provider with any question you may have regarding a medical condition. Thank you for visiting. Don't miss your FREE gift. The best cognitive fitness diets, is your absolutely FREE when you sign up to receive health alerts from Harvard Medical School Sign up to get advice to live a healthy lifestyle, with ways to combat inflammation and improve cognitive health, as well as the latest advances in preventive medicine, diet and exercise, pain relief, blood pressure and cholesterol management, and more. Facebook Twitter LinkedIn Pinterest The compression of the spinal cord is caused by any condition that puts pressure on the spinal cord. Your spinal cord is the nerve bundle that carries messages back and forth from the brain to the muscles and other soft tissues. While the spinal cord travels along the back, it is protected by a backbone stack called vertebrae. They also keep your bodyThe nerves of your spinal cord cross the openings between the vertebrae and the muscles. The compression of the spinal cord can occur anywhere from the neck (cervical spine) to the bottom of the back (bar spine). Symptoms include numbness, pain and weakness. Depending on the cause of compression, symptoms may develop suddenly or gradually, and may require anything from emergency surgery support. What? What?Spinal cord compression? One of the most common causes of spinal cord compression is the gradual and tear wear on the bones of the spine, known as osteoarthritis. People who develop spinal cord compression from this are usually older than 50. Other conditions that can cause spinal cord compression can grow rapidly, even very suddenly and can occur to any age: alignment of the abnormal spine (Scoliosis) Spinal tumor spinal tumor injuries Some rheumatoid arthritis bone diseases Infection What are the symptoms of spinal cord compression? The symptoms of spinal cable compression can develop quickly or slowly, depending on the cause. Lesions can cause immediate symptoms. Tumors or infections can cause symptoms that develop through days or weeks. Wear and tear the spine can take years to cause symptoms. Common symptoms: pain and rigidity in the neck, in the back, or in the lower part burning pain that spreads to the arms, buttocks, or down in the legs (sciatica) numbness, cramps, or weakness in the arms, hands, or legs loss of feeling in Feet problems with the coordination of the hand "foot drop," weakness on a foot that causes a limps of sexual skill if you have one of these symptoms, it is necessary to obtain medical attention immediately, typically in the emergency room: loss of intestine or control of the stringent bladder or increasing numbness between the legs, the internal thighs, and the back of the strict legs pain and weakness that spreads into one or both legs, making it difficult to walk or get out of a chair after lived with back pain For years and not having positive results from previous care, the American army veteran Richard Shetter searched for a second opinion from Johns Hopkins Ortho. To diagnose spinal cord compression, your health care provider will ask you questions about your symptoms and will make a complete physical exam. During the examination, he or she will try signs of a spinal compression, such as feeling loss, weakness and abnormal reflexes. The tests that help with the diagnosis can include: X-rays of the spine. These can show the bone growths called spurs pushing against spinal nerves. X-rays can also show an abnormal alignment of the spine. Special vertebral column imaging test. A TAC or a MRI scan will give a more detailed look at the spinal cord and the structures that surround it. Other studies. These can include a bone scan, my chart (a special X-ray or CT scan taken after dye injection in the spine), and electromyography, or EMG, a muscular activity electrical test. How the Of the spinal cord? The medical team involved in the treatment of spinal cord compression may include arthritis specialists, bone surgeons, nerve specialists and physical therapists. Treatment depends on the cause and symptoms and can involve medicines, physical therapy, injections and surgery. Except in case of emergency, as well asEquine syndrome or broken back, surgery is usually the last resort. Drugs can include non-steroidal anti-inflammatory drugs (NSAIDs) that relieve pain and swelling, and steroid injections that reduce swelling. Physical therapy may include exercises to strengthen the back, abdominal muscles and legs. You can learn how to do business more securely. Brackets to support the back or a cervical collar can also be useful. Surgical treatments include the removal of bone spurs and the extension of the space between the vertebrae. Other procedures can be made to relieve pressure on the spine or repair fractured vertebrae. The back can also be stabilized by merging some of the vertebrae together. Some other treatments that may be useful for some people include acupuncture and chiropractic care. Can the compression of the spinal cord be avoided? Many causes of compression of the spinal cord cannot be avoided. It is possible to help prevent the compression symptoms of the spinal cord caused by gradual wear and tear while maintaining the back as strong and healthy as possible. Do a regular exercise. The exercise strengthens the muscles that support the back and helps maintain the flexible backbone. Keep good posture and learn to safely lift heavy items. Other good mechanics of the body include sleeping on a firm mattress and sitting in a chair that supports the natural curves of the back. Keep a healthy weight. Excessive weight puts more stress on the back and can help develop spinal compression symptoms. The best way to manage spinal cord compression is to learn as much as possible about your condition, work closely with your health service providers and assistants, and take an active role in your treatment. Keep your back as healthy as possible while maintaining a healthy weight, practicing good body mechanics, and obtaining regular exercise. Simple home remedies like an ice bag, heating pad, massage, or a long hot shower can help reduce pain. glucosamine and chondroitine nutritional supplements have been recommended as nutritional supplements for people with osteoarthritis, but recent studies have been disappointing. Ask your healthcare provider if he or she recommends any supplements for you and always discuss any alternative treatment or medications you want to try. When should I call my health care provider? The compression of the spinal cord can cause equine cauda syndrome, which needs medical attention at once. Call your doctor or go to the emergency room if you have: Sudden loss of intestines or bladder control Severe or growing numbness between the legs,inner thighs, or the back of the legs Pain and severe weakness that spreads in one or both legs, making it difficult to walk or exit from a chair Key points The compression of the spinal cord is caused by a condition that puts pressure on the spinal cord. Symptoms such as pain, numbness, or weakness in the arms, hands, legs or feet can come gradually or more suddenly, depending on the cause. Spinal cable compression can often be helped withPhysical therapy or other treatments. Except that in emergencies, surgery is usually the last resort. Next scores to help you get the most out of your doctor: you know the reason for your visit and what you want to happen. Before your visit, write the questions you want to answer. Bring someone with you to help you ask questions and remember what your supplier tells you. At the visit, note the name of a new diagnosis and any new medicine, treatments or tests. Also, note all the new instructions that your provider gives you. Know why a new medicine or treatment is prescribed and how you will help you. Also, you know what side effects are. Ask if your conditions can be treated in other ways. Knowing why we recommend a test or a procedure and what results could mean. Know what to expect if you don't take medicine or have the test or procedure. If you have a follow-up appointment, note the date, time and purpose for that visit. Know how you can contact your supplier if you have questions. Johns Hopkins Medicine Virtual Advisors (Virtual Advisors) is a group of individuals who share their intuitions on the Johns Hopkins service experience. One or twice a month, virtual consultants receive a link to short interactive surveys. All answers are reserved. confidential.

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