

GLOSSARY OF SPINAL TERMINOLOGY

Annulus: Any ring-shaped, circular structure.

Arthrodesis: The surgical immobilization of a joint. Also known as a fusion.

Axial Pain: Pain relating to or situated in the central part of the body, in the head and trunk as distinguished from the limbs, e.g., axial skeleton.

CAT: Computerized Axial Tomography: A non-invasive radiologic method of imaging in which a computer graphically reconstructs the anatomic features registered by axial tomography.

Cauda Equina Syndrome: The clinical result of compression due to intrinsic pressure on the caudal sac and usually results from a large central herniated disc. Signs and symptoms include low back pain, bilateral lower extremity weakness, bilateral radiculopathy, subtle anesthesia, and bowel and bladder incontinence. Treatment requires prompt surgical decompression.

Cervical: Of or pertaining to the neck.

Discogenic: Caused by derangement of an intervertebral disc.

Facet Syndrome: A disorder of the lumbar spine characterized by the sudden onset of low back pain that is positional in nature, relieved in certain postures, and exaggerated in others. The “locking-type” pain usually involves the articular facets of the spinal column.

Fusion: The surgical formation of a bony ankylosis. (Synonym: arthrodesis)

Laminectomy: The surgical removal of the posterior bony arches of one or more vertebrae in order to expose and decompress the neural elements in the spinal cord or the cauda equina.

Lumbar: Relating to the part of the back and sides between the ribs and the pelvis.

MRI: Magnetic Resonance Imaging: An imaging technique that employs radio frequency waves and a strong magnetic field to produce clinically useful images.

Myelogram: Roentgenogram of the spinal canal after injection of a radioopaque dye, usually followed by a CT scan.

Myelopathy: A general term denoting functional disturbances and/or pathological changes in the spinal cord; the term is often used to designate non-specific lesions, in contrast to inflammatory lesions (myelitis). It can be secondary to cord compression in the cervical or thoracic spine. Often requires surgical decompression.

Myofascial Pain: Pain relating to an inflammation of a muscle and its fascia.

Nucleus Pulposus: The center cushioning gelatinous mass lying within an intervertebral disc; remains of the notochord. It is this portion of the disc that causes nerve root compression in HNP.

Osteophyte: A hypertrophic outgrowth in the spine. It is a common cause of spinal stenosis.

Pars Interarticularis: The part of the posterior arch of a vertebra that lies between the inferior and superior articular facets. A fracture or defect here, if bilateral, may result in the “**Scotty Dog Sign**” seen on oblique x-rays of the lumbar or thoracic spine.

Radiculopathy: Compression of the nerve or nerve roots due to compression from spondylosis (osteophytes) or disc herniation.

Sciatica: A general term applied to the clinical syndrome associated with a herniated lumbar intervertebral disc that causes nerve root irritation which is characterized by low back pain radiating down the leg. Specific neurologic findings depend on the site of the nerve root involved.

Spinal Cord: The portion of the central nervous system enclosed in the vertebral column. It consists of nerve cells and bundles of nerves connecting all parts of the body to the brain.

Spondylolisthesis: Any forward slipping of one vertebrae on the one below it. Predisposing factors include spondylolysis, degeneration, elongated pars, elongated pedicles, and birth defects in the spine such as spina bifida.

Spondylolysis: The disruption of the pars interarticularis.

Thoracic: Of or pertaining to the chest or midback.

Thoracotomy: Any surgical procedure that involves cutting through the thorax or chest wall.