

Predictors ID'd for mortality in elderly with cervical spine injury

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Preexisting comorbidities, spinal cord injury, and age are all strong predictors of mortality in elderly patients with trauma-related cervical spine injury, although the evidence is not conclusive, according to research published online Nov. 2 in *Spine*.

(HealthDay)—Preexisting comorbidities (PECs), spinal cord injury (SCI), and age are all strong predictors of mortality in elderly patients with trauma-related cervical spine injury (CSI), although the evidence is not conclusive, according to research published online Nov. 2 in *Spine*.

In an effort to identify predictors of mortality in elderly patients with CSI, Dan Xing, M.D., of the Tianjin Medical University General Hospital in China, and colleagues conducted a systematic methodological review that identified 23 studies published between 1993 and 2011 involving 2,325 patients.

In these studies, the researchers identified three strong evidence

predictors for CSI mortality in elderly patients, including PECs, SCI, and age. Also identified were three moderate evidence predictors (closed head injury, injury severity score, and cardiopulmonary diseases) and seven limited evidence predictors (level of CSI, Glasgow coma scale, sex, ankylosing spondylitis, American Society of Anesthesiologists score, polytrauma, and [bed rest](#)).

"We believe that the dissemination of these data will establish a foundation for deeper understanding of the factors that influence the risk of death following CSI in the [elderly population](#). [Mortality rates](#) may increase with SCI, age, and PEC," the authors write. "These evidence-based predictors may be useful in counseling patients and their families."

More information: [Abstract](#)
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