Spinal fx complications, mortality up with ankylosing spondylitis

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(HealthDay)—Spinal fracture patients with ankylosing spondylitis (AS) disorders have higher complication and mortality rates, compared with control patients, according to a study published in the May 1 issue of The Spine Journal.

L. Anneloes Westerveld, M.D., Ph.D., from the University Medical Center Utrecht in the Netherlands, and colleagues retrospectively evaluated 165 patients (older than 50 years) admitted with a traumatic spinal fracture to the emergency department of a regional level-1 trauma center.

The researchers found that 14 patients had ankylosing spondylitis (8.5 percent), 40 patients had diffuse idiopathic skeletal hyperostosis (DISH; 24.2 percent), and 111 served as control patients. Those with AS were
approximately five years older than controls patients and predominantly male. The groups had similar Charlson comorbidity scores, but DISH patients had a higher prevalence of type 2 diabetes and obesity. Fractures in AS and DISH cases frequently resulted from low-energy trauma, presenting with a hyperextension configuration. AS and DISH patients were significantly more likely to be admitted with neurological deficits, compared to controls (P = 0.002), which did not improve in the majority of cases. Additionally, complication and mortality rates were significantly higher in AS and DISH patients.

"Increasing age and presence of DISH are predictors of mortality after a spinal fracture," the authors write.

Several authors disclosed financial ties to the medical device industry.

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