

Surgery or medical Tx for cervical epidural abscesses?

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(HealthDay)—At one medical center, early operative management of cervical spine epidural abscess (CSEA) appeared to offer the benefit of improved neurologic outcome, according to research published in the Jan. 1 issue of *The Spine Journal*.

Timothy B. Alton, M.D., of Harborview Medical Center in Seattle, and colleagues conducted a [retrospective review](#) of [electronic medical records](#) for 62 [patients](#) with spontaneous CSEA who received [medical management](#) (Group 1, six patients), early surgery (Group 2, 38 patients), or medical management that failed followed by delayed surgery (Group 3, 18 patients). Motor scores were used to assess neurologic outcome.

The researchers found that 18 of 24 patients (75 percent) failed medical

management. Patients who were successfully managed medically (Group 1) had an increase of 2.3 points (standard deviation [SD], 4.4 points) in motor scores. Patients who received early surgery (Group 2, average time to operating room of 24.4 hours) had an average increase of 11.89 points (SD, 19.5 points) in motor scores. Patients who failed medical management and received delayed surgery (Group 3, time to operating room of 7.02 days) had a net drop of 15.89 points (SD, 24.9 points) in motor scores. Risk factors or laboratory data predicting success/failure or neurologic outcome of medical management were not identified because of the small number of patients receiving medical management only.

"As level IV evidence (case series without a matched control group), it is still not clear which patients may best be treated with medical treatment alone," write the journal editors in accompanying comments.

Several authors disclosed financial ties to the biomedical industry.

More information: [Abstract](#)
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