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What does the patient operated for DEGENERATIVE CERVICAL MYELOPATHY (DCM) consider a good outcome?

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Introduction: The aim of surgery in DCM was classically limited to stop progression. Several studies show clinical improvement of patients, showing improvement ranges as variable as 20-80% depending on the test or PROMs used.

There is a lack of evidence as to which test is more accurate in capturing these changes.

Objective: To find which of the commonly used tests correlates best with the perception of improvement perceived by patients.

Material: Retrospective study of prospectively collected data from patients operated for DCM. Epidemiological data, functional tests such as 30 m Walking test; Nine Hole Pig Test; mJOA disability test; MDI; Nurick score and quality of life scales (EQ-5D) were collected. Data were collected preoperatively and one year postoperative. A Likert scale of satisfaction and the degree of improvement perceived by means of a Global Perceived Effect (GPE) scale were used.

A statistical study was performed. Continuous variables are shown as mean and SD and categorical variables as percentages. Spearman correlation study was performed and with the correlated variables a linear regression study was performed.

Results: 32 patients with a mean age of 62.36 y (SD 12.9). 13 women (40.6%).

Based on GPE scale 59.4% of the patients reported some degree of improvement; 19% showed no change and 21% of the patients reported some degree of worsening.

At one year the 68.7% of patients were satisfied with the result.

Perception of improvement correlated significantly with Satisfaction (r 0.610), improvement in mJOA (r -0.602) and improvement in walking speed (r -0.518); and moderately with EQ-5D index (r 0.452).

After the linear regression study, the main factor associated with the perception of improvement was gait speed (p 0.015 r2 0.250).

Conclusion: Gait improvement is the factor most valued by patients in their perception of clinical improvement.

In gait speed, signs of involvement of posterior cords, as well as of the corticospinal tract, may be evaluated together.