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Cervical cord injury following osteophyte excision for respiratory distress and dysphasia due to Forestier"s disease with OPLL 0150 – A case report

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Background: Forestier"s disease is one of diffuse idiopathic skeletal hyperostosis (DISH) and ankylosing spinal hyperostosis of anterior longitudinal ligament. Here, we report unfortunate outcome in case of Forestier"s disease with posterior longitudinal ligament ossification (OPLL).

Case material: A 76-year-old male had felt shortness of breath, palpitations and dysphagia for 4 months. He was diagnosed as hyperthyroidism and referred to our hospital for more careful examinations. A few days later, he was transported to our hospital due to severe dyspnea. At first, he was diagnosed bronchitis because of high fever. On day 2, his condition deteriorated and he was intubated because of CO2 narcosis. A laryngoscopy revealed bilateral vocal cord dysfunction and posterior wall of pharynx swelled. Videofluoroscopic examination of swallowing revealed pooling of the contrast agent. On day 35, his neck computed tomography showed huge anterior osteophytes with OPLL (Fig.1). Spine unit received first consulting about his dysphagia. However, he had no neurological dysfunction. We considered the respiratory distress and dysphagia to be caused by osteophytes and resected them (Fig.2). Unfortunately, 3 weeks later, he suffered quadriplegia due to cord compression by OPLL. We performed posterior decompression and fusion. But he died of aspiration pneumonia (Fig.3).

Discussion: 30-70% of Forestier"s disease cases have OPLL. One of complains of Forestier"s disease is dysphagia. Although the resection of ossification and cricopharyngomyotomy were common treatments based on previous reports, there is no established surgical method for Forestier"s disease with OPLL so far.

In our case, resection of ossification induced spinal instability and spinal cord injury. In the case of severe stenosis because of OPLL, posterior decompression and fusion should be performed with resection of osteophytes.

Fig. 1

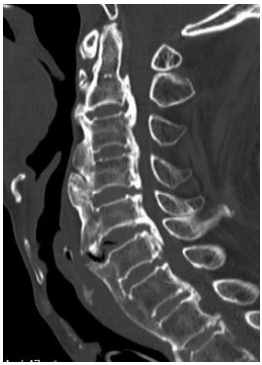

Fig. 2

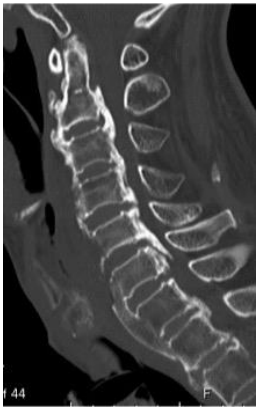

Fig. 3