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CLINICAL MANIFESTATIONS OF SLOW-PROGRESSING SPINAL ISCHEMIA
AND ITS RELATIONSHIP TO ETIOLOGICAL FACTORS

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Introduction. Progressive spinal ischemia is a pathological condition resulting from a gradual disruption of the blood supply to the spinal cord, leading to a progressive deterioration in motor, sensory, and autonomic nervous system function in patients. This disease can have a variety of clinical manifestations depending on the etiological factors.

Objective. To study the relationship between the formation and manifestation of clinical signs of slowly progressive spinal ischemia and the main etiological factors.

Materials and methods. The study analyzed 16 patients with a diagnosis of slowly progressive spinal ischemia. Among them, there were 10 men and 6 women, their age ranged from 35 to 60 years. Diagnosis was made using anamnesis, neurological examination and instrumental methods (MRI of the spinal cord and spine, dopplerography, ENMG, spinal MR-angiography, contrast myelography).

Results. Etiological factors: Atherosclerosis (40%) - the formation of atherosclerotic plaques in the vertebral arteries and aortic branches. Vascular anomalies (20%) - congenital or acquired vascular pathologies. Hypertension and microangiopathy (15%) - deterioration of spinal microcirculation. Traumatic injuries (10%) - spinal cord injuries. Diabetes and metabolic disorders (15%) - impaired peripheral blood circulation. Clinical manifestations. Initial stage: transient pain in the back or neck, fatigue, slight numbness in the legs. Middle stage: paraparesis or tetraparesis, sensory disturbances (hypoesthesia, paresthesia), bladder and bowel dysfunction. Late stage: complete paralysis, dysarthria, spastic or atonic syndromes.

Conclusion. Atherosclerosis and vascular anomalies play a leading role in the development of slowly progressive spinal ischemia. Clinical signs gradually increase, starting from mild neurological symptoms to severe paralysis. Early diagnosis and development of pathogenetic treatment plans help to improve the outcome of slowly progressive spinal ischemia. This study contributes to understanding the mechanisms of development of slowly progressive spinal ischemia and the development of effective prevention and treatment methods.

