

Spinal cord infarction or acute myelitis? Fibrocartilaginous embolization as a rare cause of spinal cord infarction

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Fibrocartilaginous embolization (FCE) is an extremely rare cause of spinal cord infarction, however it should be considered in a diagnostic process. The mechanism results from the expulsion of fibrocartilaginous nucleus pulposus material to the vessels that supply the spinal cord. We would like to present two cases of spinal cord infarction. The first patient with a hemiparesis and lesion in dorsal spinal cord at C4 level in magnetic resonance and second one with tetraparesis due to anterior spinal artery occlusion with typical owl's eye sign in magnetic resonance. In both cases the features of discopathy at level of lesions in spinal cord were described. Both of patients developed symptoms after hard physical work and had only one risk factor of stroke. During diagnostic process, we excluded central nervous system infection, demyelinating diseases, autoimmune diseases and other spinal cord inflammation. Clinically suspected FCE was recognized in our patients mostly based on the exclusion of other diseases mimicking transverse myelitis of the spinal cord and presence of a disc disease. Based on the diagnostic process of our patients we would like to propose the containing criteria that increase probability of FCE.