

**Neurosurgery Abstracts**

**Title:** APPROACH TO TETHER CORD SYNDROME IN ADULTS

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**Background:** Tethered spinal cord syndrome in adults with spinal dysraphism is rare and its presentation differs from the growth-related pediatric syndrome. A clinical scheme for evaluation and treatment of this entity is presented.

**Method:** Retrospective study from a regional adult spina bifida center

**Results:** Unless the young adult presents with tethered cord syndrome (TCS) related to the last growth spurt, adult onset is typically related to trauma, often minor. The underlying mechanism is that of lumbar flexion maneuvers, particularly repetitive. Behavior modification is often successful in alleviating this syndrome. The use of pulsed steroids is also beneficial in most cases. Failure to respond these steps may be an indication for detethering surgery. As always, shunt function must be confirmed in those individuals with hydrocephalus.

**Conclusion:** The majority of adult onset TCS responds to activity modification and pulsed steroids. Surgery is occasionally indicated.