



Syringomyelia: A Practical, Clinical Concept For Classification

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Confusing Terminology

The term syringomyelia describes many pathogenetically different disorders and a variety of attempts to group these based on different criteria have been proposed in the literature. As a consequence a lack of consensus regarding classification and terminology exists.

The inconsistency extends to the ICD-10 classification of diseases in regards to syringomyelia (G95.0) and hydromyelia (Q06.4).

A given treatment method originates from the believed pathogenetic theory and the terminology ought to be the coherent link between the two.

Comparison and analysis across publications is of high value, particularly in relatively rare disorders like syringomyelia. This is impossible to take full advantage of if there is no consensus in classification and resulting terminology.

We propose a new unifying and practical concept for classification. It provides an unambiguous framework that is easy to use for the clinician, and also serves as a clinical guidance for treatment.

A New Causal Classification

Fig. 1: Syringomyelia (G95.0) is used as the only describing terminology, thus abandoning the use of hydromyelia (Q06.4).

Syringomyelia is divided into five subgroups according to the associated pathologies and believed causality:

- Hydrocephalic syringomyelia*
- Hindbrain-related syringomyelia*
- Non-hindbrain-related syringomyelia*
- Complex syringomyelia*
- Idiopathic syringomyelia*

Fig. 1

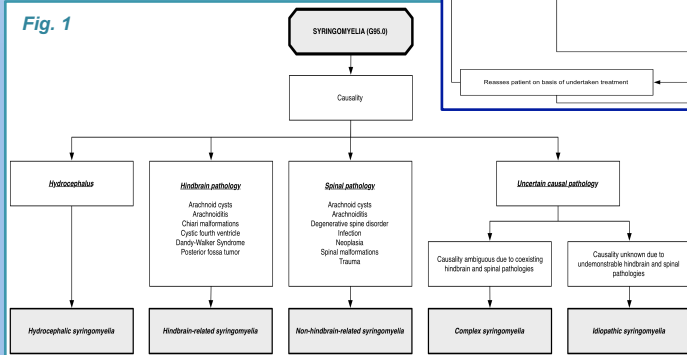
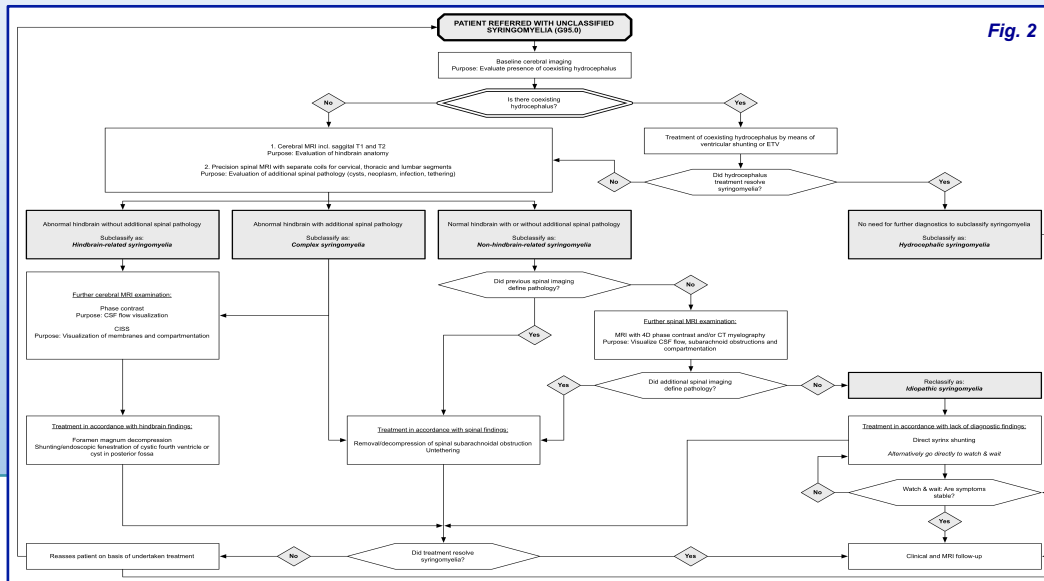


Fig. 2



A Guidance For Treatment

Fig. 2: Clinical algorithm for treatment of syringomyelia guided by our proposed causal ICD-classification. Start from the top "Patient referred with unclassified syringomyelia (G95.0)".

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