

2nd Annual Conference on ORTHOPEDECS, RHEUMATOLOGY AND OSTEOPOROSIS

April 15-16, 2019 | Milan, Italy

Ray Suhasish et al., J ortho Rehab Surg. 2019, Volume 3 | DOI: 10.4066/2630-4473-C1-002

SHOULD VITAMIN D3 AND DEXA BMD BE PRESCRIBED AS A CORRELATIVE CAUSE FOR LYTIC SPONDYLOLISTHESIS

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Spondylolisthesis means slippage of overlying vertebrae with respect to the lower; one reason is break in the spars interarticularis between two adjacent vertebral segments. Wiltse-Newman classified it Type 1, 2, 3, 4- among them 2 being sub classified 2A, B, C; 2A representing pars fatigue Fracture, 2B is repeated healing of pars fracture leading to elongating, and 2C is acute fracture as in accidents. The aim of the study was to find any relation between Type 2 spondylolisthesis and corresponding bone marrow density of lumbar done through DEXA scan and / or Vitamin D3 done by enzyme immunoassay method. 180 subjects between 20-60 years, with Type 2A or 2B type of listhesis were screened with BMD dexta score and VitD3. All those less than 20 and more than 60, neuropathy pain, with associated comorbidities, surgeries around the back interfering with DEXA, body weight more than 65 in male and 60 in female were excluded from the study. Vitamin D3 was estimated by enzyme immunoassay and DEXA BMD of lumbar spine by GE Lunar DEXA machine. The results of both were included in this retrospective non cohort non randomised judgemental study. Non parametric statistical tests like T tests, Z tests and Spearman's correlation tests gives $p > 0.05$ considered non-significant to the above. Prescription to estimate Vitamin D3 and BMD DEXA for lytic spondylolisthesis Type 2 is not a rational therapeutic regimen. It is suggested to suggest other investigations like genetic assay, dysplastic assessment and others.

BIOGRAPHY

Ray Suhasish had done his graduation in Medicine and Surgery in 1991. Postgraduate in Orthopedic Surgery in 2001 with thesis in external fixation to heal open fractures of tibia, Postoperative Diploma in Rheumatology from Delhi in 2006 and M.Ch in Orthopaedics in 2010.

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