

CO-ORGANIZED EVENT

2<sup>nd</sup> International Conference on **Spine and Spinal Disorders**  
&  
6<sup>th</sup> International Conference on **Neurology and Neuromuscular Diseases**

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## Low back pain is a disease

**Abbas Alnaji**

Al Sadir Teaching Hospital, Iraq

This is an anatomic analysis to reveal, according to the work, the infective aspect of the structural changes in the vertebra and hence the clinical outcome, and to show how pathologic changes occur in the vertebral components (spondylosis SL). In another words, spondylosis is the low grade bacterial spondylitis in the majority of prevalence. Micro and macro anatomy of the vertebra is well studied in many sources, but very little whom mentioned the exact or near to that the properties of this structure. For example Gray's anatomy mentioned in what means " *The force that breaks the body of vertebra do not distort the adjacent intervertebral disc*" where as it is very common and popular at least in my community that prolapsed intervertebral disc prolapse is created when a cocking propane jar ( about 50 kg) is lifted or some an inappropriate trunk torsion is achieved during some task. *The pathological fracture* principle is well known for them but do not goes with the above, that's to say, unless there is a massive pathology as a radiological finding, it wouldn't be a diseased vertebra! According to our vision based on the clinical and lab findings that shows most of, if not all, chronic back pain is due to a chronic active bacterial spondylitis of Brucellar origin. This infective agent is responsible for the slow ongoing inflammatory process that causes the catastrophic bony builds like spurs in the intervertebral foramina where the spinal roots exit to cause causalgia. And the posterior up going and down going spurs that causing kissing vertebrae and to press spinal cord. With the anterior Parrot peaks. For osteolytic changes, the end plate and the related bony edge are distorted to give the damaged bed for the; soft tissues changes, the disc, where both mechanical attachment for its fibrous rings is distorted and both chemical or cellular changes, (it needs extensive and advanced work ) practiced by this intracellular bacteria on the disc structure to distort it in all aspects we know (degeneration). When we come to the spinal stenosis, the inflamed soft tissue swelling decreases the caliber of spinal canal and the foramina due to tissue edema and ongoing fibrosis. According to the above concept many clinical and surgical management measures will be formed to change the traditional or today standards.

## Biography

Abbas Alnaji was born in Baghdad 1962 and he had the Degree in Neurosurgery FICMS NS from University of Baghdad 1999. He is interested in research work and has eleven papers published in the field of surgical pathology causations.

abbasalnaji@yahoo.com

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