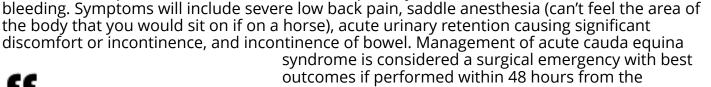


Cauda Equina Syndrome Requires Acute Rehabilitation

Symptoms of cauda equina syndrome are diverse among patients and require a multidisciplinary approach from multiple healthcare professionals.

SANTA BARBARA, CA, UNITED STATES, March 13, 2020 /EINPresswire.com/ -- The caudal equina refers to the nerves that continue down the spinal canal after the spinal cord ends at lumbar levels L1-2. These nerves control motor and sensory function of the lower extremity and provide motor and sensory function to the organs of the pelvis including the bladder. The neurological deficits from cauda equina syndrome include bowel and bladder incontinence and asymmetric motor and sensory deficits of the lower extremities.

Cauda equina syndrome is caused by the compression of the spinal nerves in the lumbosacral spinal canal and is related to significant trauma from motor vehicle crashes, gun-shot wounds, and falls as well as massive herniated discs of the lumbar-sacral spine. Medical causes of cauda equina syndrome include infection, tumors, and





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onset. Any unnecessary delay in diagnosis and treatment is malpractice as surgical outcomes are significantly impaired over 48 hours.

The motor and sensory deficits, bowel and bladder deficits, and pain pattern is very diverse among patients and require a multidisciplinary approach from multiple healthcare professionals individualized to the particular needs of a patient. Impairments include profound urinary retention, sexual dysfunction, constant urinary leakage and bowel leakage, and varying degrees of lower extremity

weakness and pain.

Greg Vigna, MD, JD, neurological injury attorney, national pharmaceutical injury attorney, Certified Life Care Planner, and practicing physician, represents injured clients with cauda equina syndrome, "The attorneys at the Vigna Law Group understand this is a catastrophic neurological injury as it impairs mobility, sexual function, bowel and bladder function, and causes profound psychological distress. We advocate that our clients get the best medical care. We prepare the case for trial from day one by using the leading physician experts in neurosurgery and life care planning to ensure all money damages are developed."



Dr. Vigna adds, "From my experience of managing patients with cauda equina syndrome, it is my opinion that nearly all of these patients will benefit from acute rehabilitation at a facility with expertise in management of these patients. The physical deficits, pain syndrome, and bowel and bladder deficits are simply so diverse and difficult to characterize that a patient who is 'deemed' by an insurance company or other payer source not to require acute rehabilitation should be carefully scrutinized. Our clients will not be pushed around by insurance companies who have financial incentive to ration care. If the case is from hospital and physician malpractice we will prove it. We want our clients to have the best medical outcome, and the attorneys I litigate these cases with are leading malpractice and personal injury attorneys with the experience to obtain the best legal outcome for our clients."

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