A-Z of Medical Terms
A-Z of SCI Health and Medicine

A glossary of common medical terms you may come across when dealing with Spinal Cord Injury. This selection was rewritten by Paul Harrison from The Princess Royal Spinal Injuries Unit in Sheffield.

Scroll down the list below to find the word you are searching for:

A

Ambulant
Walking, able to walk.

Ankylosing spondylitis
Arthritis of the spine.

Anterior cord syndrome
A lesion in the spinal cord that causes loss of movement, pain and temperature sensitivity, but preserving proprioception. See Preprioception Aperient See Laxative.

Arachnoiditis
Thickening and scarring of the membranes which surround and protect the nerve roots. Cysts or adhesions develop, causing pressure on the cord, back pain and/or additional loss of nerve function. It can be caused by diseases such as meningitis and tuberculosis of the spine. More commonly it develops in people with spinal cord injury, or who have had operations on the spine. In the past it was often caused by the use of oil-based dyes injected into the spinal column to make myelograms. These dyes are no longer used. Milder forms of arachnoiditis are now believed to be the cause of the chronic back pain suffered by many able bodied people.

AUS
Artificial urinary sphincter—an inflatable cuff surgically fitted around the neck of the bladder, controlled by a pump located in the scrotum or labia.

Automatic bladder
Where the nerve impulses between the bladder and the spinal cord remain intact and the bladder can be trained to empty by reflex (spastic) action.

Autonomic
The ´unconscious´ nervous system which is separate from, but linked to that of the spinal cord. It controls the bladder and bowels, blood circulation and sweating.
**Autonomic dysreflexia**
An autonomic reflex causing a sudden, severe, increase in blood pressure in response to pain or discomfort, usually originating below the level of paralysis. Tetraplegics are more prone to this complication as their autonomic nervous systems are unable to oppose the reflex. Commonly caused by an over-full bladder or bowel it presents as profuse sweating, flushing and a blinding headache. It is a medical emergency, and if untreated can cause death.

**B**

**Baclofen pump**
A pump and reservoir implanted to deliver a measured dose of the drug baclofen to the spinal cord to suppress spasm.

**Bladder neck closure**
An operation to close off the urethra and neck of the bladder and insert a suprapubic catheter.

**Brown-Séquard syndrome**
Occurs when one side of the spinal cord is damaged, common when injury is caused by a stab wound. On the injured side of the body there is reduced movement and reflexes, while on the opposite side there is a loss of sense of pain and temperature.

**Bursa, bursitis**
A pocket of fluid which collects between tissue and the bone, caused by pressure or bumps, and which can cause a pressure sore.

**C**

**Calculus/calculi**
A ‘stone’ in the bladder, kidney or gall-bladder.

**Carpal tunnel syndrome**
A common, painful condition of the wrist and hand due to nerve compression within the soft tissues due to inflammatory swelling or trauma.

**Catheter**
A fine tube made of plastic, rubber or silicone which is inserted into the bladder to empty it.

**Cauda equina**
The ‘horse’s’ tail, the three inch bundle of fine nerves leaving the lower end of the spinal cord, below the level of the second lumbar vertebra (L2).
Central cord syndrome
Incomplete lesion, usually at cervical level. Usually presents with loss of hand and arm function but with some preservation of bladder, bowel and sexual function. Walking may be possible.

Cervical
The neck area. The cervical section of the spinal cord contains 8 nerve roots (C1-C8) which control neck movement, breathing and the shoulders, arms and wrists.

Chest
See Thoracic. Coccyx, coggygeal
The coccyx is the tail. In humans this consists of four tiny bones fused together at the base of the spine.

Colposuspension
An abdominal operation to support the bladder neck by elevating the vagina using dissolvable sutures.

Contractures
Stiffening of the joints of paralysed limbs caused by wasting and shortening of muscles-can be diminished or prevented by exercise and physiotherapy.

CSF
Cerebro-spinal fluid, a colourless liquid within the skull and the spinal canal which nourishes the brain and spinal cord and acts as a watercushion.

CT
Scan computerised tomography, a non-invasive scan which provides more detail than a standard x-ray.

Cystic myelopathy
A spinal cyst. See Syringomyelia.

Cystitis
Infection of the urinary bladder.

Cystogram
A series of x-ray films of the bladder, usually obtained during cystoscopy, IVP/IVU or urodynamics.

Cystoplasty
Operation to enlarge the bladder by incorporating a section of the bowel into it.
Cystoscopy
Visual examination of the bladder with a tiny instrument inserted through the urethra.

D
Decubitus ulcer
Pressure sore.

Detrusor
The muscle in the wall of the bladder, which contracts to squeeze out urine to empty it.

Diaphoresis
Profuse sweating.

Discs
Pads of gristle which separate the spinal vertebrae and surround and cushion the spinal cord.

DVT
Deep Vein Thrombosis—a blood clot in a vein, usually in the leg, which may cause swelling. If untreated, it can be a cause of death if a portion of the clot breaks away and reaches the heart.

Dysaesthesias
Painful sensations experienced below the level of lesion following spinal cord injury. Often described as burning, numbness, pins and needles or tingling.

E
Enema
Technique for emptying the bowel by introducing liquid into the rectum to loosen the faeces and provoke a bowel motion.

Epididymitis
Swelling of the tube leading from the male testicle to the urethra.

Expressing
Exerting gentle pressure over a full bladder, to empty it.

F
Feneley procedure
See Bladder neck closure.
**FES**
Functional Electrical Stimulation, a way of stimulating the muscles of paralysed limbs (usually the legs, occasionally the arms) by using computer-controlled electrical current. FES aims to provide arm function in tetraplegia and to restore some degree of walking in paraplegia. It can also reduce muscle wasting and osteoporosis.

**Flaccid bladder**
Where the nerves between the bladder and the spinal cord have been damaged, the bladder lacks reflex activity, and cannot be trained to empty.

**H**

**Haemorrhoids**
Piles, varicose veins inside or outside the rectum.

**Heterotopic Ossification**
The development of abnormal bone in soft tissue, usually close to the hip or knee, which may interfere with full movement of the joint. The cause is not known.

**HRT**
Hormone Replacement Therapy, given to some women close to or after the menopause to provide a continued supply of some of the hormones secreted by their bodies during the menstrual cycle. Usually given to prevent osteoporosis, it is believed by some to promote general well-being and to slow the natural ageing process.

**Hydrocele**
Swelling of and fluid on the testicles.

**Hypersensitivity**
When some parts of the body or skin become acutely sensitive to touch - a side-effect of spinal cord injury in some individuals.

**Hypertension**
High blood pressure. See Autonomic dysreflexia.

**Hyperthermia**
Excessive rise in body temperature, to which some high-level tetraplegics are prone, because the autonomic system controlling their body temperature is impaired.

**Hyponatraemia**
A less than normal concentration of sodium in the blood - usually a complication of excessive water intake (or inadequate excretion). May lead to confusion, convulsions and collapse.
Hypotension
Low blood pressure. See Postural hypotension.

Hypothermia
Excessive reduction in body temperature which can lead to frostbite in limbs and possibly to death.

I
Ileo-conduit
See Urostomy.

Ischial tuberosities
tThe bony points at the base of the pelvis-one of the most vulnerable points for pressure sores when sitting.

Indwelling catheter
A tube usually made of rubber or silicone which remains inserted in the bladder at all times to drain urine.

Intermittent catheterisation
Introduction of a catheter into the bladder at regular intervals to empty it.

IVP / IVU
Intravenous pyelogram / urogram. A radio-opaque dye is injected into the body. As it is excreted through the kidney it will appear visible on an x-ray film, allowing doctors to assess kidney health and any stones (calculi) present.

K
Kyphosis
A forward curvature of the spine.

L
Laxative
Substance (food or medicine) taken to cause a bowel movement.

Lesion
A cut, sore or injury. Often used to describe the site of injury to the spinal cord (e.g. ‘a C5 lesion’).

Lithotripsy
Ultrasound treatment to break up bladder or kidney stones.

Lordosis
Backwards curvature of the spine.
Lumbar
The lower back area. The lumbar section of the spinal cord contains 5 nerve roots (L1-L5) which control the muscles of the legs.

M
Meninges
The silky linings of the skull and spinal canal which protect the brain and the spinal cord.

Meningitis
Inflammation of the meninges, the linings of the skull and spinal canal. Usually caused by a virus, and sometimes fatal, especially in children. Meningitis serosa circumscripta or arachnoiditis is a rare condition that affects some people with spinal cord injury.

Micturition
Urination, peeing.

Motor function
The ability of parts of the body to move.

MRI scan
Magnetic resonance imaging, a non-invasive technique of body scanning which produces very good images without side effects. Used to examine the spinal cord, e.g. to detect syringomyelia.

MSU
A mid-stream specimen of urine, collected after discarding the first 60mls or so of the urine stream.

Myelogram
X-ray of the spine after injection of an x-ray opaque dye into the spinal column.

N
Neck
See Cervical.

O
Oedema
Swelling, especially of the feet and ankles, caused by water retention and poor circulation.
Omentum
An apron-like flap of tissue which hangs from the underside of the stomach and aids circulation in the abdomen.

Osteoporosis
Abnormal weakening or softening of the bone, common in elderly people, and some women after the menopause.

Ostomy
See Stoma.

P
Paraplegia / Paraplegic
Paralysis caused by injury or damage to the spinal cord below the neck.

Peristalsis
The process of contraction and expansion by which food is moved through your intestines and into your bowel.

Piles
See Haemorrhoids.

Poikilothermia
A term used to describe the fact that SCI affects a person’s ability to control their body temperature. Instead, the paralysed body adopts the temperature of the local environment.

Posterior cord syndrome
A lesion in the spinal cord that causes loss of proprioception, whilst preserving movement, pain and temperature sensitivity.

Postural hypotension
Sudden drop in blood pressure which produces a blackout or feeling of faintness, experienced by the newly injured and by tetraplegics on changing too quickly from a lying to an upright position.

Pressure sore
See Decubitus ulcer.

Pressure studies
See Urodynamics.

Proprioception
A conscious awareness of limb positioning. Signals originate from stretch receptors in and around joints. Some form of SCI may affect proprioception signals travelling to the brain.
**Pyelonephritis**
Infection of the kidney - usually one that ascends from the bladder.

**Q**
*Quadriplegia / Quadriplegic*
See *Tetraplegia / Tetraplegic*.

**R**
*Reflux (of urine)*
The backing up of urine into the ureters and/or kidneys. This happens when the bladder is full and is not regularly emptied.

*Reflux (of stomach acid)*
Heartburn.

*Root Pain*
Intense pain in the damaged nerve endings or nerve roots, which afflicts some SCI people, especially in the early days of paralysis.

**S**
*Sacral*
The area at the base of the spine, where the five sacral vertebrae are fused together. The five sacral nerve roots (L1-L5) control the bladder and bowel.

*SARS / Sarsi*
Sacral Anterior Root Stimulator / Implant - a surgical implant which restores bladder control in some people with spinal cord lesions.

*Scoliosis lateral*
Sideways curvature of the spine.

*Sensory*
To do with the senses (of touch, sight, smell, hearing, taste).

**SIU**
Specialist Spinal Injury Unit.

**Spasm / Spastic / Spasticity**
Terms relating to spontaneous, uncontrolled muscle activity or jerking of paralysed limbs. Increases in previously established levels of spasticity may be an early indicator of a painful or irritating complication developing in the paralysed parts of the body e.g. pressure sore, ingrown toenail or bladder stone.
**SPES**
Sub-Perception Electrical Stimulation-a technique which applies minute electrical currents to the body to help control pain.

**Sphincter**
Circular muscle at base of bladder neck and also around the anus, which controls opening of the bladder and bowel respectively.

**Sphincterotomy**
Operation to cut the external sphincter of the bladder to aid urinary drainage.

**Spina bifida**
Abnormal split or opening in the spinal column, normally caused by a genetic defect and present from an early stage of the development of the foetus in the womb.

**Spinal block**
Technique for controlling pain or spasticity by injecting drugs into the spinal column.

**Spinal shock**
The early stage of the body’s response to spinal cord injury, usually lasting between 2 and 6 weeks, and during which paralysis appears complete.

**Stoma**
A small opening cut into the wall of the abdomen to create an exit for a supra-pubic catheter, bladder or bowel diversions.

**Stone**
See Calculus/Calculi.

**Suppository**
Bullet-shaped capsule inserted into the anus or vagina. Used to deliver various medicines rectally, to stimulate bowel movement, to treat haemorrhoids, and in women to deliver various medications to the vagina and cervix.

**Suprapubic**
Catheter a tube inserted through a small puncture hole in the lower abdomen into the bladder where it remains to provide a continuous urinary drainage system.

**Swelling**
See Oedema.
Syringomyelia
A condition affecting some able-bodied as well as some people with spinal cord injury. A cavity in the spinal cord fills with cerebrospinal fluid. The resulting pressure further enlarges the cavity and damages the nerve tissues of the cord. In SCI people this tends to occur above the level of the original injury, causing pressure on nerve roots and pain or further loss of sensation in upper limbs.

For more information please look through the Ann Conroy Trust Site.

Syrinx
A cavity in the spinal cord. See Syringomyelia.

T
TENS
Transcutaneous Electrical Nerve Stimulation - a technique for pain relief involving electrical stimulation of the skin surface with small electrodes.

Tetraplegia / Tetraplegic
Paralysis caused by injury or damage to the upper or cervical section of the spinal cord. MASCIP statement on tetraplegia.

Thoracic
The chest area. The thoracic section of the spinal cord contains 12 nerve roots (T1-T12) which control the muscles of the ribs, chest and abdomen.

Trochanters
The tops of the thigh bones - a high-risk point for pressure sores when lying down.

U
Ureters
The tubes which carry urine from the kidneys to the bladder.

Urethra
The tube which carries urine from the bladder, exiting via the penis in males and in front of the vagina in females.

Urodynamics
A special investigative procedure for assessing bladder function. Radio-opaqued dye is introduced into the bladder via a catheter which also contains pressure sensors, allowing doctors to observe the bladder working, to measure the efficiency of bladder emptying, voiding pressures and to assess potential for renal (kidney) problems.
**Urostomy**
Is a stoma (artificial opening) for the urinary system. A urostomy is made in cases where long-term drainage of urine through the bladder and urethra is not possible, e.g. after extensive surgery or in case of obstruction.

**UTI**
Urinary Tract Infection - general term to describe infection of the urinary system.

**V**
**Vertebrae**
The bones (there are 33 of them) which make up the spine. Each vertebra has a hole in its centre, so that when stacked on top of one another they form a long channel called the vertebral canal, through which the spinal cord runs.

**Voiding**
See Micturition.

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**Revised June 2015**
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The Spinal Injuries Association (SIA) is the leading national user-led charity for spinal cord injured (SCI) people. Being user led, we are well placed to understand the everyday needs of living with spinal cord injury and are here to meet those needs by providing key services to share information and experiences, and to campaign for change ensuring each person can lead a full and active life. We are here to support you from the moment your spinal cord injury happens, and for the rest of your life.

For more information contact us via the following:

Spinal Injuries Association
SIA House
2 Trueman Place
Oldbrook
Milton Keynes
MK6 2HH

T: 01908 604 191 (Mon – Fri 9am – 5pm)
T: 0800 980 0501 (Freephone Advice Line, Mon – Fri, 11am – 1pm/2pm – 4.30pm)
W: www.spinal.co.uk
E: sia@spinal.co.uk

Charity No: 1054097
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SIA relies on fundraising, donations and gifts in wills to provide services that help spinal cord injured people rebuild their lives.

With your help, we can provide the right support to spinal cord injured people and their families and friends so they can enjoy a full and independent life after injury. Your donation today will go towards changing someone’s life.

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