INTRODUCTION

Acute spinal cord injury

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ACUTE spinal cord injury (SCI) is a life-changing event. The treatment of SCI has evolved over the last few decades. High-dose steroids, once a standard of care, are now known to potentially cause more harm than benefit.² In spite of numerous clinical trials over the decades, there remains controversy surrounding the treatment of acute SCI.

While the care of patients with acute SCI was long plagued by nihilism, emerging research is showing that even patients with the most devastating injuries may have improved neurological function if they receive state-of-the-art care.³

There remains an opportunity to advance the field to treat these potentially devastating injuries. Physicians have debated issues, including the optimal timing of surgery and the use of various perioperative therapies—drugs, blood pressure management, and antithrombotic treatments—to minimize secondary cord injury after the primary traumatic events, as well as regenerative strategies that involve the use of stem cells to reconstitute neural connections.^{1–4} This issue of *Neurosurgical Focus* is meant to highlight the evolution of how SCI is managed, from diagnostic imaging biomarkers to novel therapeutic interventions. The issue provides the reader with a broad overview of the latest surgical and therapeutic options for the diagnosis and treatment of acute SCI. It also covers novel therapies in the pipeline that represent promising future strategies to treat SCI.

We owe a sincere thanks to all the authors who have contributed to this effort on this very important topic for spine surgeons.

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Disclosures

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