

BAHAN AJAR VII
CAUDA EQUINA SYNDROME

Nama Mata Kuliah/Bobot SKS	: Sistem Neuropsikiatri / 8 SKS
Standar Kompetensi	: area kompetensi 5: landasan ilmiah kedokteran
Kompetensi Dasar	: menerapkan ilmu kedokteran klinik pada sistem neuropsikiatri
Indikator	:menegakkan diagnosis dan melakukan penatalaksanaan awal sebelum dirujuk sebagai kasus emergensi
Level Kompetensi	: 2
Alokasi Waktu	: 1 x 50 menit

1. Tujuan Instruksional Umum (TIU) :

Mampu mengenali dan mendiagnosis penyakit-penyakit pada tulang belakang dan sumsum tulang belakang, serta melakukan penanganan sesuai dengan tingkat kompetensi yang ditentukan, dan melakukan rujukan bila perlu.

2. Tujuan Instruksional Khusus (TIK) :

- a. Mampu menyebutkan patogenesis terjadinya *cauda equine syndrome*
- b. Mampu melakukan penapisan / penegakan diagnosis *cauda equine syndrome*
- c. Mampu melakukan promosi kesehatan dan pencegahan *cauda equine syndrome*

Isi Materi:

I. Definisi

Cauda Equina Syndrome (CES) adalah kondisi neurologis serius yang disebabkan oleh kerusakan atau gangguan di *Cauda Equina* yang menyebabkan hilangnya fungsi plexus lumbalis (serabut saraf) di area dibawah conus medullaris

II. Etiologi

Causes	Lesions	
Congenital	Spinal dysraphism Vertebral body malformations Dwarfing syndromes Congenital tumours	
Acquired	Trauma	Spinal fracture or dislocation
	Infective	Bacterial abscess Tuberculosis
	Neoplastic	Primary tumour Secondary metastases
	Degenerative	Spondylolisthesis Spinal stenosis Disc Prolapse
	Inflammatory	Rheumatoid arthritis Ankylosing spondylitis
	Vascular	AV malformation Epidural or subdural haematoma
	Iatrogenic	Secondary to surgery

a. Klasifikasi

Kriteria Fraser et al :

- Disfungsi bladder / bowel
- Menurunnya sensasi di *saddle area*
- *Sexual Dysfunction* disertai defisit neurologi area tungkai (motor/sensory loss, reflex change)

Kriteria Tandon dan Sakaran :

- Onset cepat, tanpa adanya riwayat nyeri belakang
- Acute bladder dysfunction dengan riwayat LBP dan siatika

- Chronic bacache dan siatika dengan progresif CES terkadang disertai stenosis kanalis.

b. Gejala klinis

Cauda Equina Syndrome Symptom Chart

Bladder disturbances

Urination different to normal.
 Inability to start, stop and/or control urination.
 Loss of normal sensation when urinating.
 Loss of full bladder sensation.
 Inability to empty bladder fully.

Saddle Numbness

loss of feeling between the legs.
 Numbness in and around the genitals/anus.
 Loss of feeling of toilet paper when wiping.



Bowel function affected

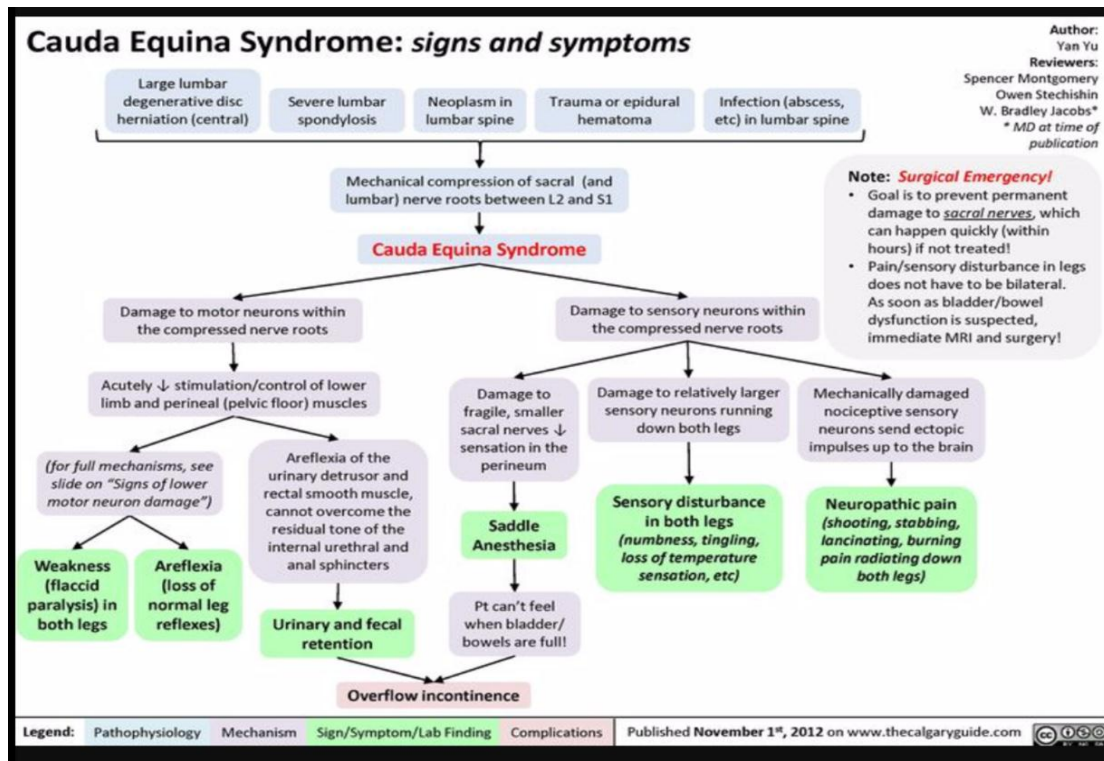
Loss of feeling when passing a bowel motion.
 Constipation.
 Loss of control of bowel movement.

Sexual Dysfunction

Loss of sensation during sexual intercourse.
 Inability to achieve an erection or ejaculate.
 Loss of clitoral sensation.

Low Back pain/leg weakness and sciatica

A combination of these problems may be present. Keep a look out for bilateral toe extensor/flexor weakness, this can occur before other muscle weakness. Marked inability to bend forward with back pain/sciatica and leg weakness may indicate a large disc prolapse. Anal sphincter reflex maybe affected. Look out for bilateral achilles reflex absence.



- c. Diagnosis
- d. Penatalaksanaan
- e. Prognosis

Poor prognostic factors	No effect
Patients with acute onset and often with a traumatic history (41)	Intervertebral disc level (22,27)
Absence of pain (sciatica) at the time of diagnosis (10)	Age (27)
Saddle-style sensory loss (44)	Chronic/newly onset back pain and radiculopathy (27)
Presence of leg pain at the time of diagnosis (31)	Motor deficits (22,31)
Unilateral or bilateral leg pain (22)	Unilateral sciatica (22)
Bilateral sciatica (22)	

DAFTAR PUSTAKA

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LATIHAN

1. Sebutkan etiologi *cauda equina syndrome*
2. Sebutkan pemeriksaan yang diperlukan untuk menegakkan diagnosa *cauda equina syndrome*
3. Sebutkan edukasi kesehatan yang perlu untuk mencegah penyakit *cauda equina syndrome*