

P0322 Epidemiological and clinical features of spondylodiscitis

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Background: The insidious onset of spondylodiscitis (SPD) and the high frequency of back pain are behind, not only the diagnosis delay, but also devastating neurologic complications. We aimed to study the epidemiological, clinical and evolutionary features of SPD.

Materials/methods: We conducted a retrospective study including all patients with SPD hospitalized in the Infectious Diseases Department between 1990 and 2017.

Results: Totally, we enrolled 160 patients. There were 94 males (58.8%). The mean age was 52 ± 18 years old. One hundred nineteen patients (74.4%) came from rural area. Raw milk consumption was noted in 88 cases (55%). The most common symptom was back pain in 152 cases (95%) followed by fever and sweat in 99 cases (61.9%) and neurologic deficit in 53 cases (33.1%). There were 72 cases of tuberculous SPD (45%) treated for 13 ± 7 months. Brucellar SPD, treated for 8 ± 4 months, represented 45 cases (28.1%). We noted 42 cases (26.2%) of pyogenic SPD treated for 4 months duration [2 - 12 months]. Besides medical treatment, immobilization was required in 107 cases (66.9%). Both surgery and abscess drainage were performed in 18 cases (11.2%) in each case. The outcome was favourable in 120 cases (75%). Otherwise, sequelae were noted such as back pain in 60 cases (37.5%), spinal deformity in 24 cases (15%), functional neurologic deficit in 6 cases (3.7%) and radiculitis in also 6 cases (3.7%).

Conclusions: SPD was ranked at an alarming rate in our region. An early diagnosis, the appropriate drug choice are the key to avoid complications and sequelae.

