Paraplegia as a Result of Spinal Anesthesia Induced Hemorrhagic Ependymoma: Case Report and Literature Review

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Abstract

Spinal ependymomas are rare primary central nervous system tumors that often exhibit vague symptoms before being identified. There have been reports of intramedullary hematomas with neurological deficit following spinal or epidural attempts, indicating intraspinal hemorrhages from an incidental lumbar ependymoma that was not previously diagnosed before spinal anesthesia. Spinal anesthesia is widely utilized in numerous orthopedic surgical procedures, as it's a well-tolerated invasive procedure with a low risk of complications. The patient in this case underwent elective orthopedic surgery under general anesthesia following two unsuccessful trials with spinal anesthesia. Subsequently, the patient developed paraplegia as a result of an incidental hemorrhagic spinal ependymoma. The patient had an L3 laminectomy for decompression of the dural sheath, and an ependymoma was confirmed based on the histopathological assessment. This case report aims to raise awareness regarding the potential complication of spinal anesthesia arising from incidental tumors of the spinal cord, thereby emphasizing the imperative of early recognition and management in order to mitigate adverse outcomes.