



Spina Bifida & Hydrocephalus Association of Canada
Association de Spina-bifida et d'hydrocéphalie du Canada

LIPOMYELOMENINGOCELE

What is it?

Lipomyelomeningocele is an abnormal fat accumulation that starts below the skin and extends through an opening in the spine to the spinal cord.

The skin covered lesion created is found in the buttock and lower spine area. It is not usually painful.

Symptoms, such as muscle weakness or loss of sensation of the lower legs and feet, and bowel or bladder incontinence due to compression on the nerves by the fatty mass during periods of rapid weight loss or gain.

The attachment of the fat to the spinal cord (tethering) may require surgery to release the tethering to the fatty mass especially during growth spurts will reduce the fatty mass.

What is Spina Bifida?

Spina bifida is a Latin term meaning 'open spine'. Medically it refers to a birth defect where the spine does not form completely. The spina bifida defect may leave several vertebrae deformed in such a way as to expose the spinal cord.

The exposure of spinal cord usually results in some damage to it at the point of exposure. Damage at some point along the spinal cord results in limited brain signals to and from muscles and body organs below where the damage has occurred.

Limited communication to and from the brain to muscles and body organs frequently results in reduced development of normal body function. Although spina bifida is originally a skeletal defect, there are a significant number of directly related conditions which precipitate from the defect in the spine. People who are born with spina bifida frequently have one or more related defects.

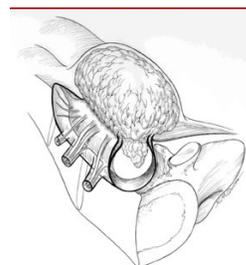
Neural Tube Defects

Spina bifida is considered a defect in the Neural Tube (NTD). This Neural Tube Defect occurs during the first four weeks of pregnancy, before a woman will be tested to confirm pregnancy. It is the early development of the defect which makes it both hard to treat and hard to detect prior to ultra-sound tests.

By the time the 1st ultra-sound is done at about 18 weeks. By this time, permanent damage is already done if a child has a major spina bifida type. Although spina bifida can be detected at the first ultra-sound, the extent of the damage cannot be determined until the child is born.

In most cases, the doctor will give the most severe diagnosis attempting to prepare the family for the worst possible case because if the spina bifida is detected at the ultra-sound stage, the effects on a child will usually be significant.

It is important to note that the effects from spina bifida are extremely varied. They range from severe physical deformation and developmental problems to minor bladder problems usually correctable by surgery. The most common effects are limited use of lower limbs, bowel and bladder limitations, and average mental capability. Spina bifida is usually accompanied by one or more other conditions.



Lipomyelomeningocele diagram of fatty mass

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