

Markers of Spinal Dysraphism

Spinal Dysraphism

Spinal dysraphism refers to a range of conditions that are characterized by incomplete fusion of the spine or spinal cord.

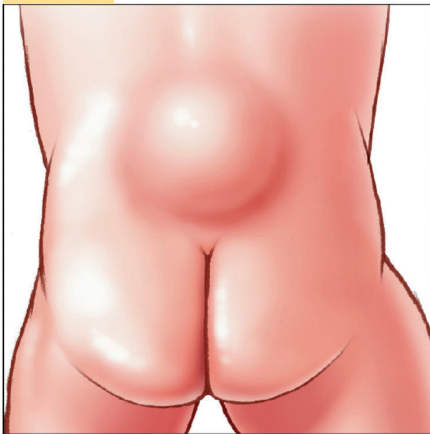
Open Neural Tube Defect

- Spina Bifida Aperta, Myelomeningocele

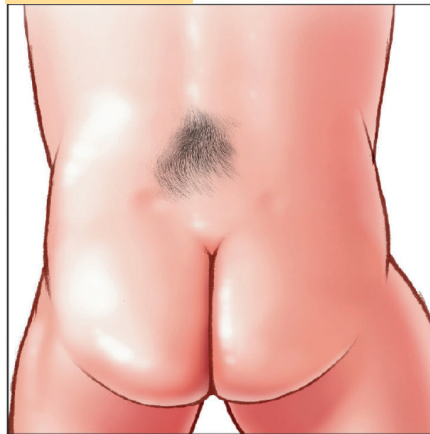
Closed Neural Tube Defects (skin-covered lesions):

- Occult Spinal Dysraphism (OSD)
 - Lipoma
 - Patch of hair on midline of back (Possible marker of split cord syndrome)
 - Deviated or bifid (Y) gluteal cleft
 - Hemangioma
 - Caudal appendage
 - Dermal sinus tract (Possible marker of tethered cord syndrome)

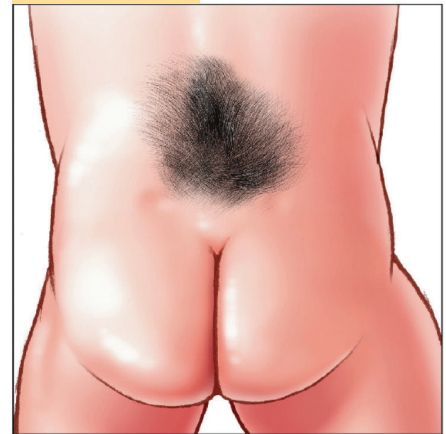
Lipoma



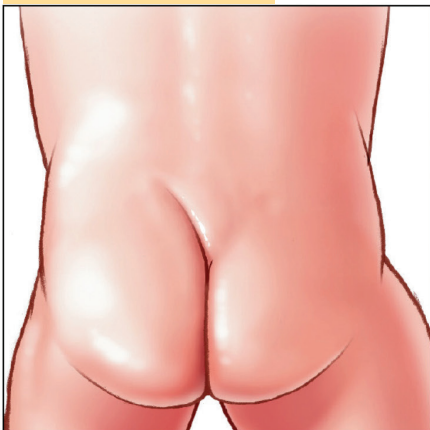
Hairy Patch (1)



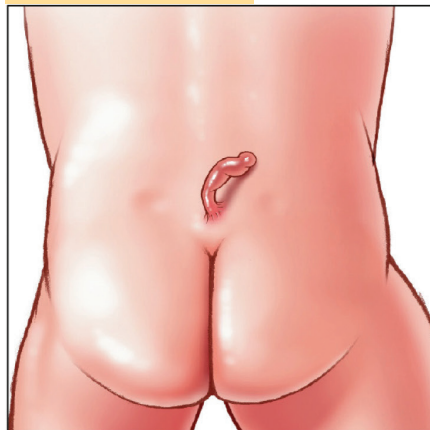
Hairy Patch (2)



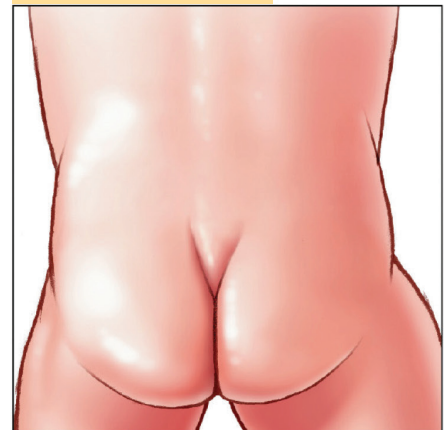
Deviated Gluteal Cleft



Caudal Appendage



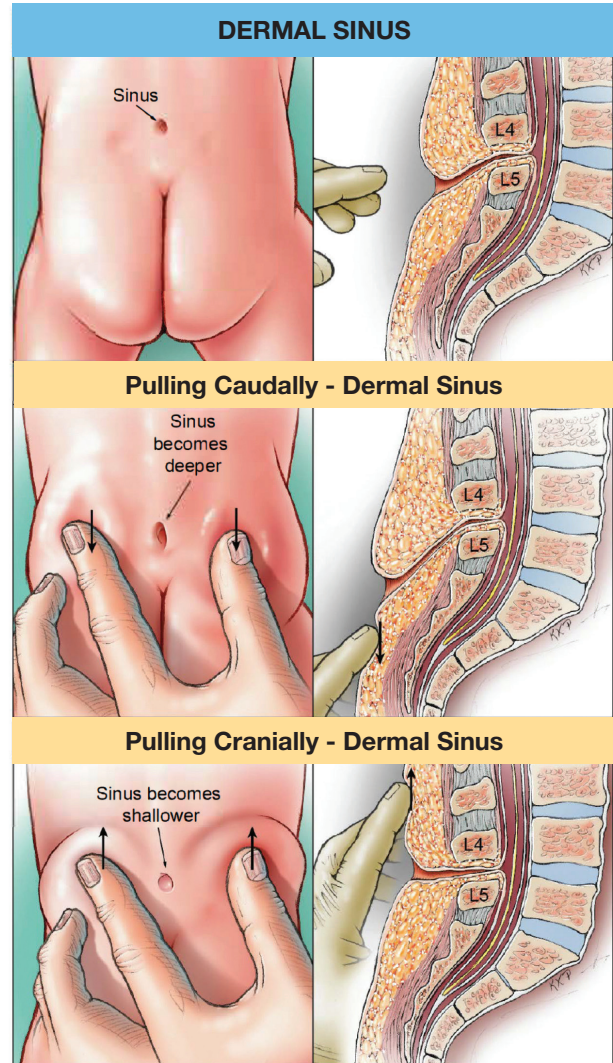
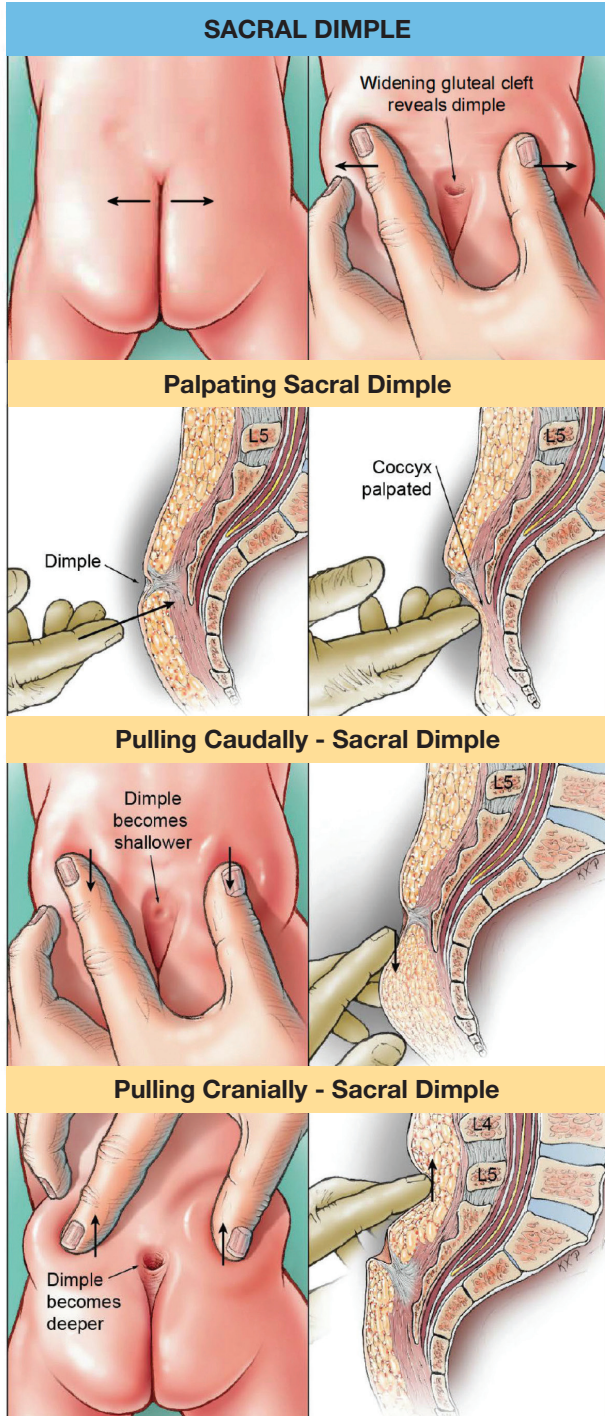
Bifid (Y) Gluteal Cleft



Markers of Spinal Dysraphism (cont.)

Sacral Dimple

A sacral dimple is a common benign lesion that needs to be differentiated from a dermal sinus tract. The first indicator is the location of the dimple. A sacral dimple is found in the gluteal cleft, and you will need to separate the glutes to find it. A dermal sinus tract is a rare neural tube defect and is located above the gluteal cleft. The tests illustrated below will help you indicate an innocent sacral dimple:



Information/Referrals

Pediatric Access Center:
(877) 822-4453 (877-UC-CHILD)

Pediatric Brain Center Phone:
(855) 722-8273 (855-PBC-UCSF)

Web: ucsfbenioffchildrens.org/pbc

Email: pbcc@ucsf.edu

Twitter: @UCSF_PBC