

Attachment "A"

From: Ohaegbulam, Chima O., MD (Neurological Surgery) <cohaegbu@nebh.org>
Date: Tuesday, May 6, 2014
Subject: Cervical Myelopathy
To: William Kois <wekois@gmail.com>

Ed

Thank you for the recent referrals. It is sad to see the large number of significantly disabled patients that have come my way with conditions that could have been treated more successfully earlier in their clinical course.

As you know, and as we have frequently discussed, the diagnosis of cervical myelopathy is a clinical one rather than radiographic. Most clinicians (certainly most surgeons) would agree that there is enough variability to presentation, and enough patients with progressive deficits in spite of seemingly unconvincing MRI reports, that the trigger for surgical intervention is usually derived from the history and exam, and not primarily the MRI report. If I screened patients based on a specific measurement of the spinal canal, I would be doing several patients a disservice, putting them at risk of permanent deficits.

It is sad to see 21st-century patients in the US progressing to wheelchair dependence for cervical myelopathy, when this could be treated. This has been a treatable cause of gait disorder for several decades. Only in 3rd world countries is it common to see patients end up as disabled from myelopathy as the ones who have been showing up after referral from you. I see such patients on visits to Nigeria, and really only see them in Boston when they show up from the VAI

I would be willing to help in any way that I can to facilitate care for patients as early as possible in their clinical course, which would greatly enhance their outcome and decrease disability, if such treatment is not available/possible in the VA system. The cost of caring for these individuals when they decline to the extent that I have recently seen is far greater than what the costs to the system would be with early treatment- and more importantly, the individual would be given a much better quality of life than they are currently ending up with.

Best wishes,

Chima