If cerebral perfusion is decreased increase the bp to make it perfused.

In cases of paraplegia investigate thoracic spine instead of lumbar by MRI.

**Conus medullaris injury is mostly symmetrical , but cauda equaina is asymmetrical.**

Steroids are controversial in spinal cord injuries.

Spinal shock comes with areflexia and flaccidity then goes to exaggerated reflexes

Spinal shock and neurogenic shock can coexist

Bp control is the most single important factor in brain and spinal injuries

Congenital stenosis patients presents earlier.

Neurogenic claudication (that comes with lumbar stenosis) presents after walking and standing (only relieved by sitting)

 . It Can be anywhere in lower limb from the hip down

. Numbness ,pain ,fatigue.

He has to sit down to be rested.

 Unlike the vascular which can rest even by standing and charectrized by calf muscles.

Cauda equina is a emergency situation because of sphincter dysfunction.