

Editorial

Japanese issue of *Paraplegia*

This is the second chance for Japanese members to submit papers for *Paraplegia*, the International Journal of the Spinal Cord. The previous Japanese issue was published in June 1989 with 11 papers: five from orthopaedic, three from rehabilitation, two from urology and one from neurosurgery specialties. Since these special issues will reflect the actual situation and activity of the experimental, clinical and social aspects of paraplegic medicine in our country, we have tried to encourage our members to submit papers which they read at the 27th annual meeting of the Japanese Medical Society of Paraplegia held in Sapporo, Japan in September 1992. We selected 50 papers from 144 read from the platform and 22 given at the workshop and the symposium at this meeting. We were subsequently able to send 22 papers for consideration for publication in the Japanese issue of *Paraplegia*. Hopefully these papers will provide a general idea of recent developments in spinal cord injury medicine in Japan. We would like to express our sincere thanks to Drs Hideya Hanaoka and Shoichi Fujimura, the secretaries of the Japanese Medical Society of Paraplegia for their assistance in selecting the 50 papers. Nine are from orthopaedists, three from neurosurgeons, four from rehabilitation physicians and six from urologists. In the nine orthopaedic papers, three relate to the diagnostic value of MRI, correlating the histological, clinical and prognostic features of spinal cord injury. Two are concerned with spinal fixation surgery for thoracolumbar spinal fractures and a new spondylectomy technique for spinal tumours. Two give details of the orthopaedic treatment, carried out in a university hospital, of cervical spine and cord injuries. The results and possible benefits of surgical or of conservative treatment are still not clear and the authors seek the services of other institutions to look after patients with high level quadriplegia who cannot be discharged from nonspecialist hospitals treating SCI

patients. The final two papers are on the epidemiology of spinal cord injury.

Dr Hikosuke Shingu, Chairman of the SCI Prevention Programme Committee of the Japanese Medical Society of Paraplegia, presents valuable statistics of spinal cord injury in 1990 and reports that the incidence of SCI in Japan was 50.5 per million per annum, 60% of whom have permanent paralysis. This is one of the most important studies which has been done by our Medical Society of Paraplegia and will surely be a breakthrough for real social activity in our country.

The three papers from neurosurgery include MRI findings of 12 respiratory quadriplegics, eight autopsy cases with compressive cervical myelopathy, and the report of six cases with glioma of the conus medullaris. The four papers from rehabilitation medicine include a case report of below-knee amputation for a Charcot joint of a long term SCI patient; a statistical report from one of the major rehabilitation centres of Japan; a report of tetraplegic wheelchair basketball in Japan, started 12 years ago, and the anthropometric analysis of competitors in the Oita Wheelchair Marathon Race, which was founded by the late Dr Yutaka Nakamura. The statistical report from the Kanagawa Rehabilitation Centre illustrates the dilemma and the contradictions in the treatment of spinal cord injury patients in Japan. Ideally, all patients with an acute spinal cord injury should be admitted to a specialised centre for spinal cord injury. To resolve this dilemma all surgeons, especially orthopaedists, in our country require to understand the pathology of spinal cord injury. Creating a Chair of Paraplegic Medicine in a medical school to educate medical students and encourage young orthopaedists to go abroad to see what is happening in specialised centres for spinal cord injury would be a shortcut to fulfill this ideal. The six papers from urologists include a case report of a unique urodynamic study to analyse psychogenic erection with ejaculation; two papers report the clinical experience of oral administration of alpha adrenal

blocking agents and intravesical instillation of oxybutinin hydrochloride for neurogenic bladder dysfunction. There is a case report of a quadriplegic patient who fathered a child after an intracavernous injection of papaverine hydrochloride. A follow up report of penile protheses for the spinal cord injured and a urological analysis to consider the prognosis in patients with long standing quadriplegia who are usually being managed with an indwelling catheter in the acute stage are also included.

From the 1st May to the 2nd June 1994 all members of the Japanese Medical Society of Paraplegia are invited to the 33rd IMSOP Annual Scientific Meeting in Kobe, Japan, where you will find many exciting presentations and will see what is going on in this field in Japan.

In conclusion, Professor Takaaki Ikata and I wish to express our thanks to all

contributors for their excellent papers and to Mr Joe Helmick of Fukuoka, Japan for his expertise in proofreading and copyediting. We wish to inform all of our Japanese members and contributors that the expenses of preparing the Japanese issue of *Paraplegia* have been obtained from the activity fund (donated to the memorial fund for the late Yutaka Nakamura) of the Japanese branch of IMSOP. We again wish to express our sincere thanks to Mr Phillip Harris, editor of *Paraplegia* and to Mrs Ann Scott, editorial secretary, for their warm support and kind cooperation.

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Editor's Note

Not all of the papers submitted for the Japanese Issue of the Journal have been published in this issue due to certain practical unexpected delays; also, there are a larger number of acceptable papers for publication from Japan than was expected. Thus, these papers will be published in subsequent issues of the Journal.