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## Spinal Infections: From Prevention to Cure

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## Editorial

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AOSpine North America (AOSNA) is honored to have the ability to present this focused issue on spinal infections. As we are all aware, spinal infections are a prevalent part of our daily treatment regimen as spine surgeons—whether these infections are in our elective practice or emergencies. Yao et al discuss how to identify patients with an increased risk for infections in “Surgical Site Infection in Spine Surgery: Who Is at Risk?” Spina et al. instruct use how to avoid infections in “Surgical Site Infections in Spine Surgery: Preoperative Prevention Strategies to Minimize Risk” Then, Dowdell et al explain how to prevent, identify, and diagnosis any postoperative spine surgical infections (“Postoperative Spine Infection: Diagnosis and Management”) and Nasser et al detail with the evidence shows in order to treat these postop infections in the most efficient manner (“Risk Factors and Prevention of Surgical Site Infections Following Spinal Procedures”).

Taylor et al reviews the option for treating primary diskitis (“Presentation and Outcomes After Medical and Surgical Treatment Versus Medical Treatment Alone of Spontaneous Infectious Spondylodiscitis: A Systematic Literature Review and Meta-Analysis”). We then review diagnosis and treatment of epidural abscess by spinal regions. Each region has a unique

anatomic makeup, and thus diagnosis and treatment should be approached individually:

- Cervical: Stricsek et al (“Etiology and Surgical Management of Cervical Spinal Epidural Abscess (SEA): A Systematic Review”)
- Thoracic: Howie et al (“Thoracic Epidural Abscesses: A Systematic Review”)
- Lumbar: de Leeuw et al (“Lumbar Epidural Abscesses: A Systematic Review”)

In addition, Rajasekaran et al provide a more global prospective with their knowledge and insight in treating spinal tuberculosis (“Spinal Tuberculosis: Current Concepts”).

It is our hope that this focus issue provides a baseline of evidence-based literature to help direct patient care.

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