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TRANSAXIAL FIXATION OF THE LUMBOSACRAL SEGMENT AS A STAND-ALONE PROCEDURE

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Introduction Fusion has a long standing history as a treatment option for chronic discogenic back pain. Standard procedures include ALIF and PLIF, whether or not combined with pedicle screw fixation. All of these procedures are invasive with potential damage of muscles, facet joints, nerve roots, scar formation etc. The transaxial approach (AxiaLIF[®]) is a novel minimal invasive way of gaining access to the L5/S1 disc space with the possibility to remove disc, clear endplates, fill it with a graft and achieve fusion.

Aim of the study

To establish whether transaxial fixation as a stand alone procedure can achieve the same results as standard approaches in patients with single level discopathy at the lumbosacral joint. Material and Methods Since March 2006 60 patients (24 male, 36 female) were treated for discogenic back pain ascribed to the lumbosacral segment. Five patients had had previous disc surgery. Pre-operative work up included plain films, MRI, discography (provocation and anesthetizing), VAS, ODI and SF-36 scores, demographic features. Fixation was achieved by the transaxial presacral approach, filling the disc space after removal with osteogenic bone matrix substitute. Average operating time was 41 minutes. Patients were discharged after one or two days, there was no specific post-operative treatment.