Whats New in my Specialty "Spine surgery"

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ORTHOPEDIC SPINE SURGERY

OGDEN UT

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Disclosures

- Conflicts of interest None
- ▶ Stocks None
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Intermountain Orthopedics and Sports Medicine

Multi-Specialty Orthopedic Group:

- ▶ Jeffery Harrison MD Sports Medicine
- ► Neil Callister MD Hand Surgery
- Nick Goucher Foot and Anke Surgery
- Casey Bachison MD Spine Surgery
- Todd Grunander MD Joint Replacement
- ► Terry Finlayson MD Orthopedic Trauma
- Sean Kuehn MD Orthopedic Trauma
- Brady Mock MD Joint Replacement
- ▶ Blake Sellars MD Hand Surgery
- Outstanding PA/NP's

Derek Smith, Austin Okelberry, Joe Bowcutt, Colton Peterson, Shannan Montague, Andew Nelson, Jairon Fessler, Sean Peterson



Objectives

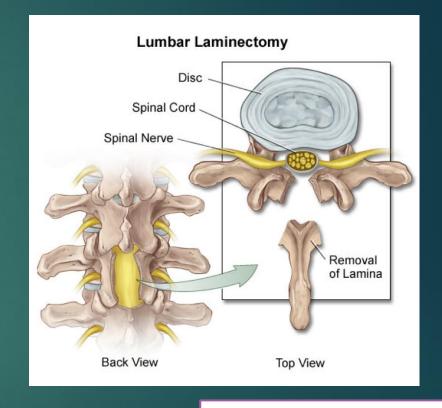
- ▶ The Basics Remain the same
- Non operative options are expanding to include treatment for DDD
- Minimally invasive technique are becoming commonplace, including interbody fusions, Lateral fusions and SI joint arthrodesis



The Basics Remain Unchanged



- Two major roles of Spinal Surgeons
 - Decompression (Laminectomy)
 - Herniated discs
 - stenosis
 - Stabilization (Fusion with Hardware)
 - Instability due to deformity, trauma, infection, neoplasm, scoliosis, kyphosis
 - Spondylolisthesis (single most common diagnosis requiring fusion surgery)
 - Restoration of Neuro-foraminal height (NF)





Non-Operative Options

- Medications NSAIDS, muscle relaxer,
 Nerve modulators, Pain medication
- Physical therapy
- Injections
 - Epidural injections
 - Medial Branch block/Radiofrequency ablation
 - Basivertebral Nerve ablation new and promising treatment for previously poorly treated Degenerative disc disease



Degenerative Disc Disease

- Historically isoloated DDD is one of most complicated and poorly treated conditions of the spine.
 - Physical therapy
 - NSAIDS
 - Fusion (Trouble is there's no stenosis or instability)
- Typically patient presents with back pain. Seldom have sciatica







Degenerative Disc Disease

- ▶ Back pain
- Modic changes





Type 1: inflammation and edema



Type 2: fatty infiltration



Type 3: sclerotic change and endplate thickening

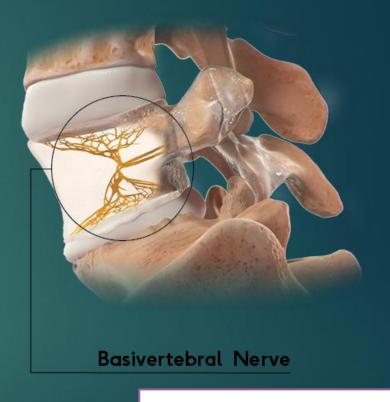






Basivertebral Nerve Ablation

- Basivertebral Nerve provides inervation to the Vertebral endplate at the superior and inferior aspects of a single vertebral body.
- An ablation to the BVN inhibits pain transmission from the Disc to the CNS





BVN Ablation

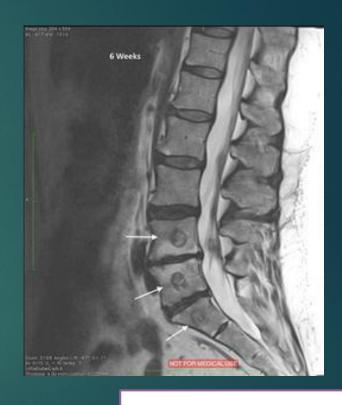




BVN Ablation

Outcomes

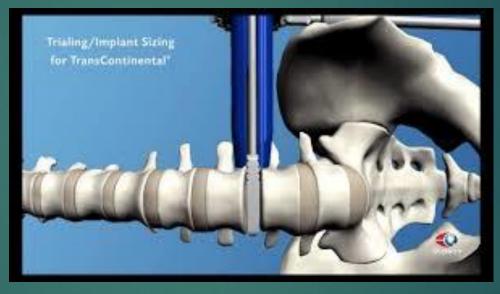
- RTC 140 patients 1:1 BVN ablation/standard conservative Treatment
- At 3 months BVN group! showed 20.3 point decrease in ODI
- At 12 months BVN group showed 25 point decrease in ODI and VAS of 3.8
- 64% had >50% improvement with 29% reporting complete relief
- Cross over then reported 25.6 point decrease in ODI

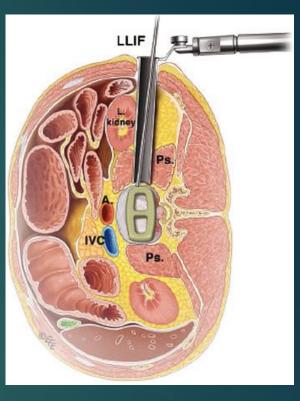




Lateral Lumbar Fusion

- Minimally Invasive Surgical Technique for fusion of the lumbar spine
- 4 cm flank incision, Approach through a lateral retroperitoneal plane
- Decreases amount of dissection to the posterior muscle groups



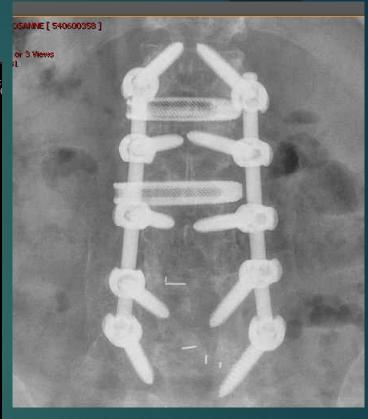




Lateral Lumbar Fusion

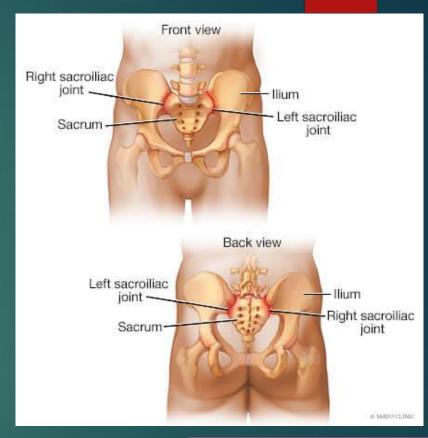
- Placement of Large Cages (Tall and Long)
- Better maintenance of interbody height
- Better restoration of foraminal height
- Can eliminate need for laminectomy
- Posterior screws are place percutaneously.





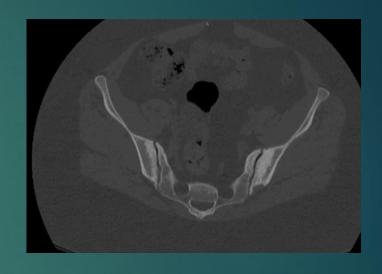


- SIJ dysfunction historically poorly treated
- Difficult to approach
- Difficult fusion
- Very morbid open procedure requiring extensive muscular stripping/trauma to expose joint for fusion
- Increased success of long spinal fusions leads to increased SIJ arthrosis/Pain

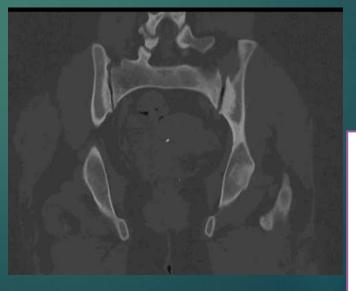




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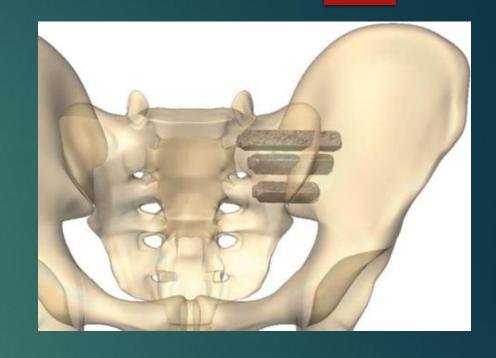






- MIS Techniques for SIJ fusion becoming available
- Porous titanium screws, wedges, triangles available for implantation
- Provide fusion of SIJ via ongrowth and Ingrowth through porous surface
- Implants placed through a single 2 cm incision.















Other New Technologies

- ► Spinal Robotics
- ► Endoscopic spinal surgery
- Motion preservation surgery



Questions



