

Desert Institute for Spine Disorders, P.C.

MINIMALLY INVASIVE SURGERY

For patients who are suffering from back conditions of various types, including radicular-type complaints (leg pain) as well as mechanical back pain related to the degenerative process. There is a myriad of new and old technology that allows surgeons to provide the patient significant reduction in their pain with the least amount of surgical dissection. This is typically termed as minimally invasive spinal surgery.

In the past, in the case of spinal fusion surgery, we performed surgery with a large surgical incision for one or two-level disease, with a significant amount of muscle stripping in order to provide adequate visualization to place hardware and bone graft material. With our new technology, we are now able to perform minimally invasive spinal fusion surgery for one to three-level disease in patients who are suffering from both mechanical back pain and leg pain. This technology has improved the patient's ability to recover quickly, reduce their intra-operative bleeding, operative time and hospital stay. It appears post-operatively that many of the patients who have undergone the minimally invasive fusion surgery, as opposed to standard open fusion surgery, have shown a remarkable difference in their post-operative pain management requirements and their ability to return back to a functional life.

Patients with thoracic predominant scoliosis, in the younger population, it is now possible to perform a minimally invasive thoroscopic spinal fusion surgery to help correct their curve, reduce their deformity, and thus reduce the risk of progression of their spinal deformity. The thoroscopic approach, while incorporating a selective fusion paradigm, has allowed us to again reduce the patient's post-operative morbidity, operative time, blood loss, and reduced pain management requirements. In my hands, we have found thoroscopic scoliosis reconstructive surgery to be an important part of our overall treatment for your younger population who has clear evidence of progressive thoracogenic scoliosis.

Minimally invasive surgery is also a mainstay treatment for patients who have predominant radicular complaints (leg pain) in the presence of a corresponding herniated disc. Options include Microscopic lumbar Discotomy, Microendoscopic Discotomy, and Laser Discectomy. In my hands, this is a quick and safe surgical procedure, resulting in a one-inch incision, 25 to 45 minute operative time, with a 98 percent chance of an excellent outcome in the reduction of the patient's pre-operative, disabling leg pain. All patients, with the exception of the elderly population, are able to be discharged from the hospital within hours of the operative procedure, and are able to return back to most of their pre-surgical activities within one to three weeks.

If you have any further question about this treatment for your problem, feel free to contact our office for an appointment.

Duane D.H. Pitt MD