Technical Note

Translaminar Full Endoscopic Technique
With Tom Shidi Needles For Highly- and Dorsally-migrated Lumbar Disc Herniations.

César Luiz Bertonha MD, Lucas Mathias Bertonha MD, Stephanie Louise R. Telles MD, Juliana M. Bertonha MS, Ivar Rodrigues Ferreira Neto MS, Marcus André Acioly MD, PhD, Oscar Luiz Alvez MD, PhD

ABSTRACT

Introduction

Despite several advances since Kambin’s first clinical series of lumbar disc herniations (LDH) treated by arthroscopic microdiscectomy thirty years ago, sequestrated disc fragments over the dorsal aspect of the dura, and disc migration have been a relative limitation of the transforaminal endoscopic technique. The interlaminar window was the next step to deal with such highly migrated LDHs. Favorable outcomes were obtained in 70-90% of the patients in the long-term, but recurrence rates remained high (approximately 12%), and the approach could be limited by the size of the interlaminar window. Few relevant studies have addressed the role of translaminar full endoscopic technique for migrated LDHs.

Objective

To describe an innovative modification of the translaminar full endoscopic approach with Tom Shidi needles.

Methods

This technical modification is presented in a detailed fashion for treating these challenging LDHs and illustrated through a clinical case.

Conclusion

Translaminar full endoscopic technique with Tom Shidi needles is a promising modification of the previously presented interlaminar and translaminar endoscopic routes in the treatment of migrated LDHs to fasten surgical procedures and increase the safety of spinal canal manipulation.

References (0)

Cited by (0)