

## Percutaneous Laser Lumbar Discectomy

Patient is prone positioned under the local anesthesia so as to communicate with the surgeons and nurses. The surgeon inserts the thin wire into the disc with minimal pain. With the 0.6 cm (diameter) of endoscope, the surgeon could observe the inside so that it is very safe.

With the better view under endoscope, minute forceps, radio-frequency, Holmium-YAG laser, the surgeon could make the disc shrink so as to condense the disc, diminishing the pain.

## Indication

Either Intracanalic, Foraminal or Extraforaminal disc herniations of any size or migration could be managed by Percutaneous Endoscopic discectomy.

## Advantages

- ⊙ As the procedure is done under local anesthesia and not general anesthesia, old age patients or even those with comorbidities like diabetes IHD / HTN could be managed with this technique with low risk.
- ⊙ It has cosmetic effects since it is minimally invasive spinal surgery.

- ⊙ It preserves vertebrae and normal nucleus pulposus and removes only the lesional site so that there is no risk of evoking the neural adhesion.
- ⊙ Bloodless surgery, no transfusion is required.
- ⊙ It saves the time and the costs. 75% of the patients discharged on the same day and it might take one day more or less.
- ⊙ Due to rapid recovery, compared to open surgeries, it is recommendable for workers or students to get back to their works.

## Prognosis

The possibility of getting an excellent result is 90%.

## What is the Soft Cervical Disc Herniation?

The Soft Cervical Disc Herniation is defined as when the disc between the vertebral bodies is torn and the nucleus pulposus is herniated so that it could compress the nerve root and spinal cord. The upper limb nerves, which causes pain in the arm is usually exited postero laterally. Also it often causes some pain around the scapula.

## Indication

The soft cervical disc herniation that has showed no improvement by the physical therapy or exercise would be a main indication. However, it is desirable to treat the patient before the cord is compressed causing a severe condition.

It is necessary that open surgery should be performed on the patient if the patient cannot run or walk as fast as they normally could because of a compressed spinal cord.

## Advantages

- ⊙ Neither epidural bleeding nor nerve fiber adhesion occurs.
- ⊙ No need for bone fusion due to partial removal of disc.

- ⊙ No instability.
- ⊙ Prevention of disc migration to the neural canal, owing to the small fenestration on the cervical disc.
- ⊙ Less time and cost due to a short hospital stay and rapid recovery.

## What is Laser?

LASER (Light Amplification by Stimulated Emission of Radiation) is one of the most useful modern surgical tool. It cuts and modulates tissues to a very high precision, to an accuracy of one fifth of a millimeter. It can also deal with tissues of any consistency whether soft or hard disc or bone. KMCH is the pioneer institution in India regarding use of Trimedyne 80w HoYag Laser in endoscopic spine surgeries.

Program done under the auspices of

COIMBATORE ORTHOPAEDIC ASSOCIATION (COS)



KOVAI MEDICAL CENTER AND HOSPITAL

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# KMCH Spine Conference 2011



Laser Certification Course

Date: 30<sup>th</sup> July 2011 Time : 2.00 pm  
Venue: KMCH Auditorium

CME and Workshop on  
Percutaneous Endoscopic Spine Surgery  
for Back Pain & Sciatica

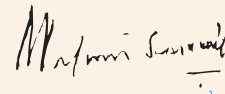
Date: 31<sup>st</sup> July 2011 Time : 8.30 am 5.00 pm  
Venue: KMCH Auditorium

## Foreword

I am pleased to invite you for a Spine Conference in KMCH, this time on PERCUTANEOUS ENDOSCOPIC SPINE SURGERY FOR BACK PAIN & SCIATICA. MINIMALLY INVASIVE SPINE SURGERY is a rapidly evolving concept and of this, Percutaneous Endoscopic spine surgery has made tremendous advancements during the last decade. After introducing the latest concepts in Percutaneous Endoscopic Spine surgery, we think it is a necessity to keep our community updated about them.

KMCH is a pioneer in Percutaneous Laser Endoscopic Spine surgery, which is a scarless surgery. The present conference will disseminate knowledge and techniques in this new area of minimally invasive spine surgery. I request you to participate actively and learn. My hearty welcome to all of you.

With warm regards,



Dr. Nalla G Palaniswami  
Chairman  
Kovai Medical Center and Hospital

## Topics

### PERCUTANEOUS ENDOSCOPIC SPINE SURGERY

- The Evolution of the Philosophy
- Basic Anatomy and Physiology of the intervertebral disc
- Basic Techniques
- Advanced Applications
- Hands on training (Depends on availability)
- Live Surgical Demonstrations
- Laser Safety Certification Course

## Faculty

Dr. Satishchandra Gore  
Pune



Dr. D. Dhatchinamurthi  
KMCH

Mr. S. Mahendramohan  
KMCH



Dr. P. E. Sreedharan Namboothiri  
KMCH

## Organising Committee



Dr. K. Baskaran  
Consultant Orthopaedic Surgeon,  
KMCH



Dr. V. Lenin Babu  
Consultant Orthopaedic Surgeon,  
KMCH



Dr. A.S. Thennavan  
Consultant Orthopaedic Surgeon,  
KMCH



Dr. S.G. Thirumalaisamy  
Consultant Orthopaedic Surgeon,  
KMCH



Dr. P. E. Sreedharan Namboothiri  
Consultant Orthopaedic Spine Surgeon,  
KMCH

Dr. Sreedharan Namboothiri, the Orthopaedic Spine Surgeon of KMCH is actively doing Endoscopic Spine Surgery from year 2006 onwards. He is specially trained in Spine Surgery from Amrita Institute of Medical Sciences, Cochin, and had taken training in Advanced Spine Surgery Techniques from WSH, Seoul. Recently he had training from Dr. Antony Yeung in Arizona, USA, about the most advanced concepts in Endoscopic Spine Surgery.