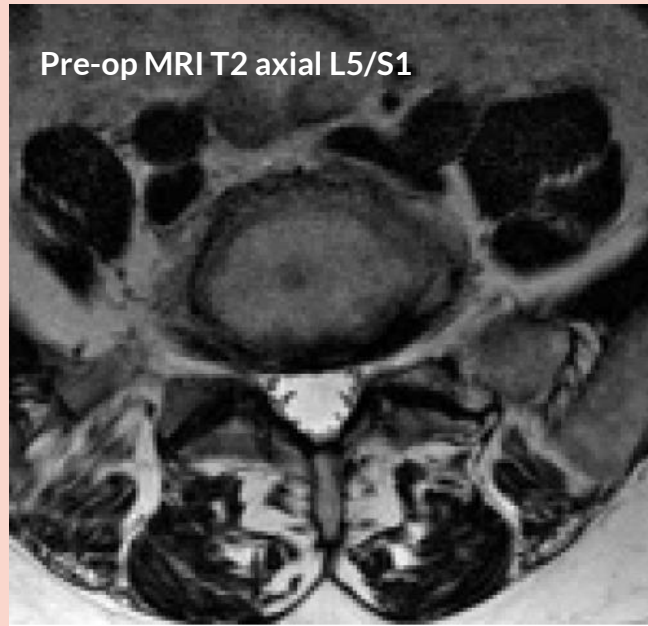


Posterolateral fusion with minimally invasive technique

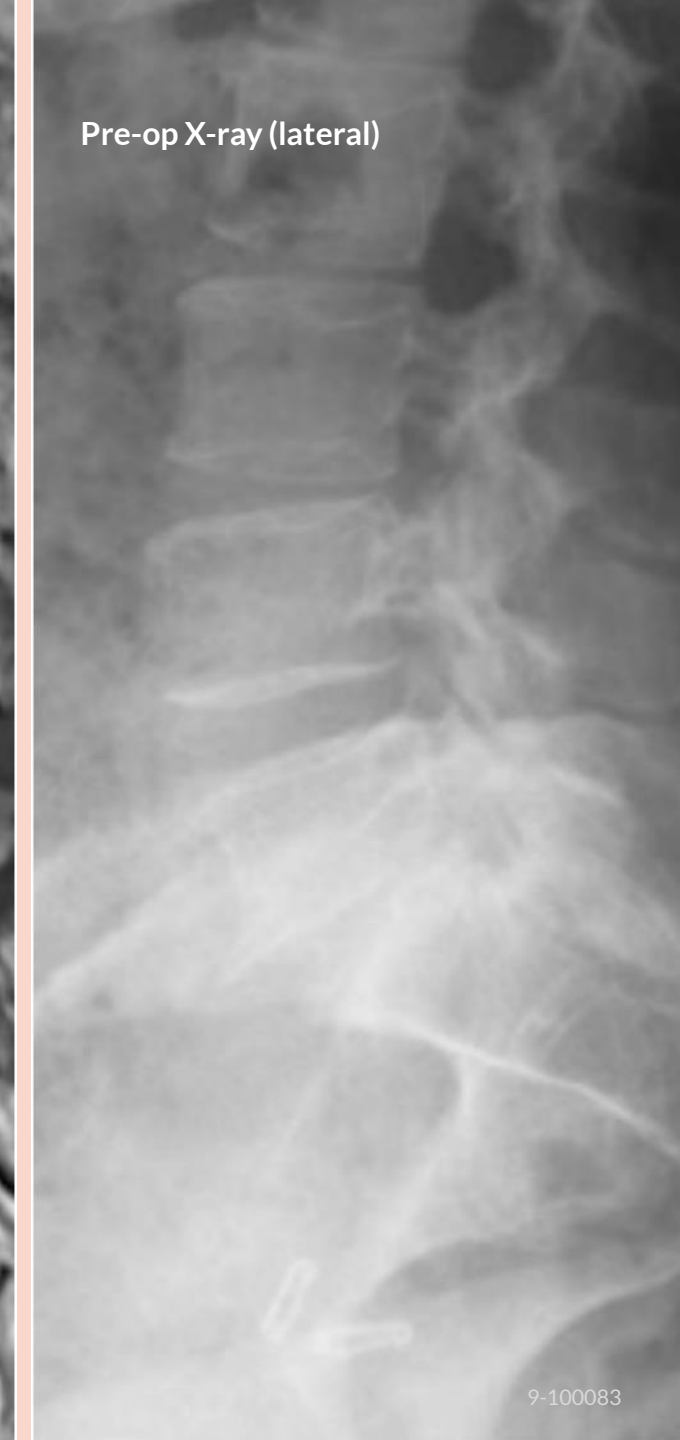
Patient

54-year-old patient suffering from low back pain for 2 years. Worsening radicular pain in the left leg (L5). The patient received physiotherapy and changes to tasks required at the patient's place of work were made to alleviate symptoms. Preoperatively instability symptoms. Sensory defect on L5 dermatome left side. Lumbar MRI showed L5/S1 disc degeneration and Modic I changes. A small central disc herniation and fluid in the facet joints.



Courtesy of Turku University Hospital, Finland

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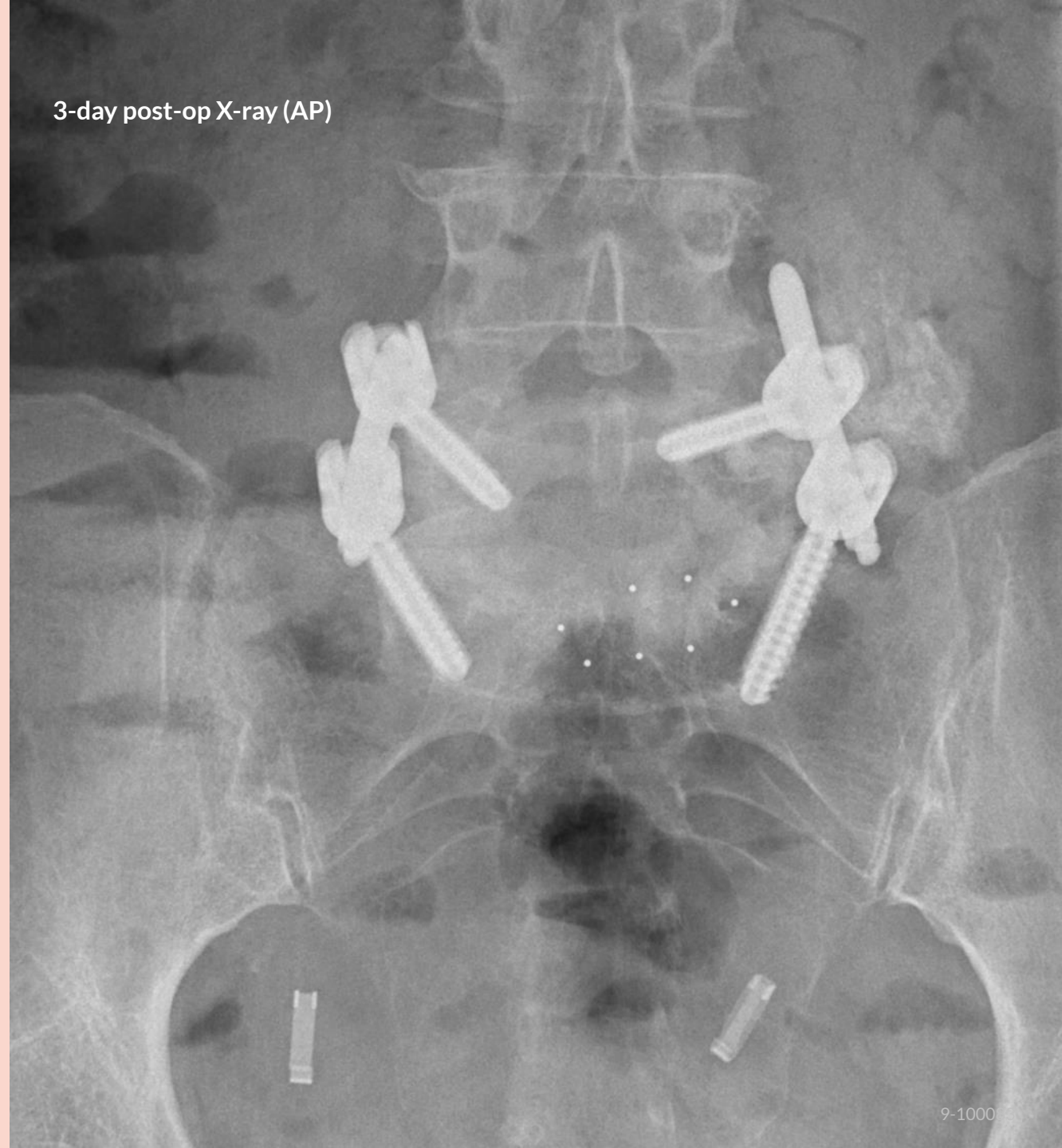


Operation

Transpedicular fusion L5/S1. Posterolateral (left) and intercorporeal fusion using autograft and Bonalive® putty as bone graft expander.

*Courtesy of Turku University
Hospital, Finland*

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Clinical outcome

Intraoperative O-arm® images showed that the instrumentation was placed correctly. Postoperatively for one month the patient complained of left sided paresthesia and radicular pain on the left side (L5).

Outpatient clinic visits at 3 months and 12 months post-op. At one-year follow-up the patient had returned to full time work. No revisions, excellent outcome.

Courtesy of Turku University Hospital, Finland

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3-month post-op X-ray (AP)



12-month post-op X-ray (AP)

