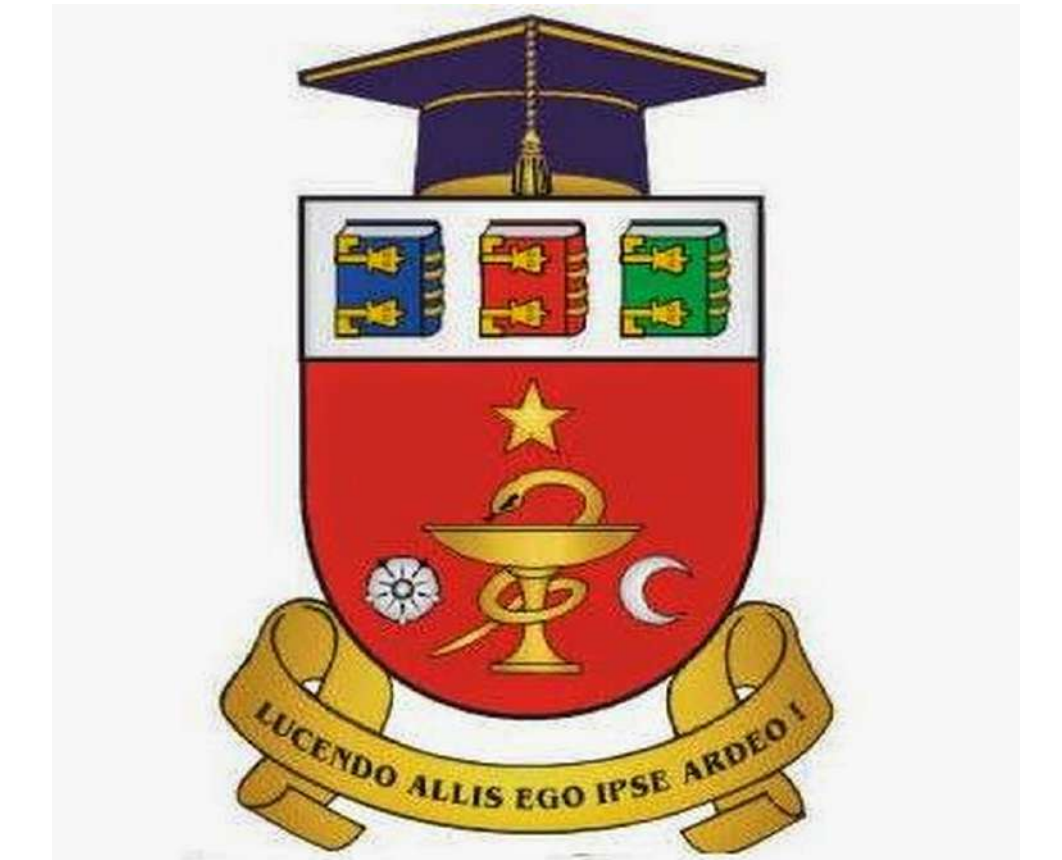


PERCUTANEOUS DISCECTOMY IN LUMBAR DISC HERNIATION TREATMENT

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Introduction

In our days are known multiple surgical treatment methods of a disc herniation but with some controversies in the individual selection of the operation type. Even with successes in degenerative pathology treatment, the term of “Failed back syndrome” was established, that have imposed the development and implementation of minimally invasive techniques, such as percutaneous discectomy (PD).

Keywords

Disc herniation, percutaneous discectomy.

Purpose

The main goal of current study was the evaluation of the efficiency of PD in pain syndrome reduction (by VAS scale) at lumbar disc herniation (LDH) treatment.

Material and methods

The study was based on the analysis of 100 cases with LDH, that were operated in 2016-2020 through PD. The results of the treatment were appreciated according to the pain relief, reducing of neurological deficit, improving the psycho-emotional state, decreasing of analgesic intake, length of hospitalization and the return to daily activity (Denis scale).

Results

PD has proven to be a convenient method of treatment through: minor invasiveness, no need of general anesthesia, the absence of the alteration of the spine support function, reducing the risk of postoperative adhesions and patients’ rehabilitation period.

Conclusions

Comparison of medical and surgical treatment’ results has demonstrated that PD clearly improves treatment outcomes compared to the conservative treatment and that the result could be compared with the microsurgical discectomy in an unencumbered LDH case ($d \leq 6$ mm).

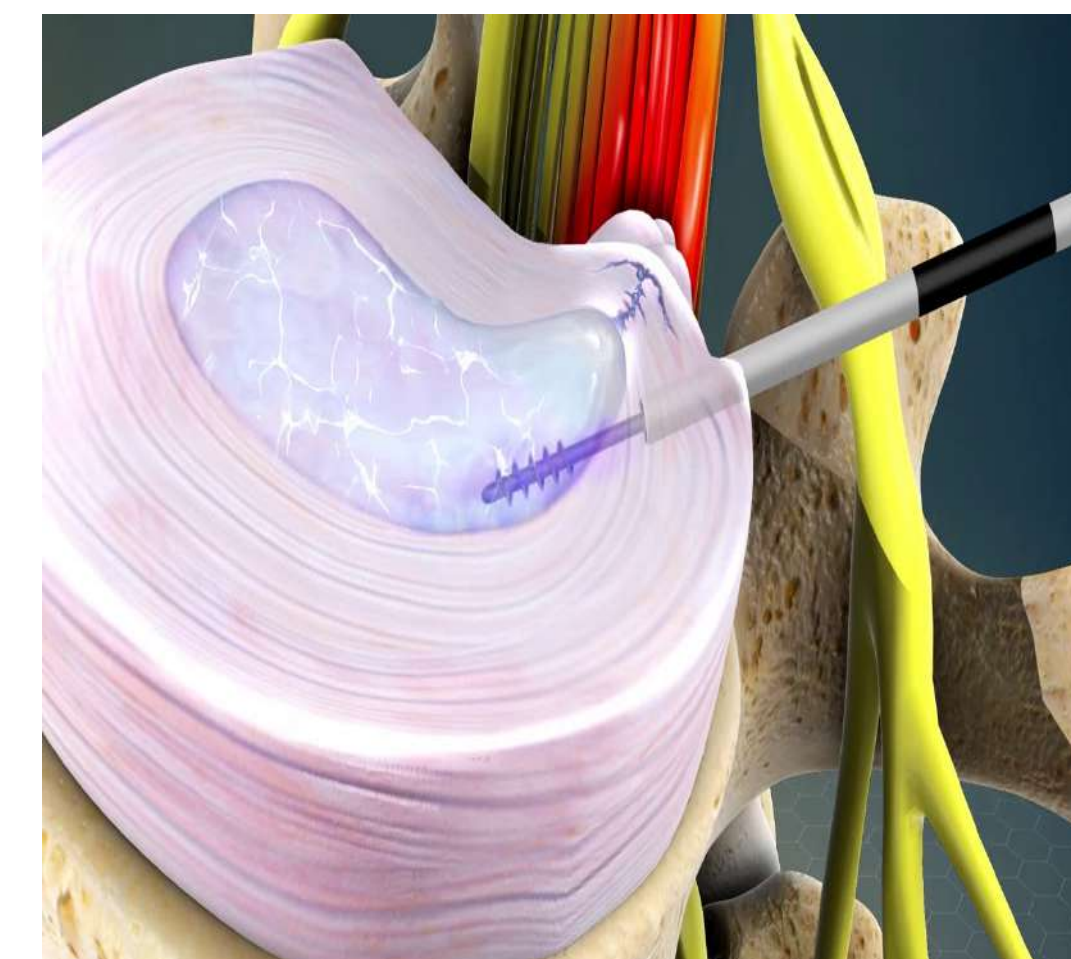


Image 1: Color graphic representation of root conflict. Graphical representation of percutaneous discectomy.



Image 2: Fluoroscopic image for determining the level and correctness of the location of the puncture needle. The needle for discectomy located in space L4-L5. Lateral projection.



Image 3: Fluoroscopic image for determining the level and correctness of the location of the puncture needle. The needle for discectomy located in space L4-L5. Postero-anterior projection.