

PERCUTANEOUS TREATMENT OF CERVICAL AND LUMBER DISC HERNIATIONS



Nicolae Shavga, Nicolai Shavga

State University of Medicine and Pharmacy "Nicolae Testemițanu", Republic of Moldova

Work's goal: Determinate the safety and efficacy of gelified ethanol in the percutaneous treatment of lumbar disk hernias.
Material and methods. A total of 49 patients were included in this study and treated with radio opaque gelified ethanol and intraarticular steroids of a lumbar and cervical intervertebral disk hernia. We evaluated each patient's pain levels during the procedure itself and then after 3-4 and 8 weeks, and 4, 8, 12, 24 months after procedure.

Results. Pain levels immediately after the procedure were markedly lower than before the procedure. There were no complications. Two months after procedure administration, the initial pain level had fallen by an average of 84 %. The outcome was quite stable over time (mean follow-up: 2 years). Short-term follow-up with magnetic resonance showed little or no changes in the intervertebral disk but there was discordance with clinical signs. Long-term follow-up magnetic resonance showed a dramatic reduction in hernia volume. Very good or good results were obtained in 42 (89,1%) of the 49 patients, fair — in 16 cases and bad in 3 cases (8,6%). Only 2 cases with a bad outcome at lumbar level went to surgery.

Conclusion. This preliminary study shows the efficacy and innocuity of this substance. More especially, it demonstrated the absence of complications and recidivates in the immediate and long-term follow-up for more than 3 years for the first cases.

Keywords: disk hernia, radio opaque gelified ethanol, nucleoplasty.

ALLOPLASTY BECOMES SAVING IN SOME DIFFICULT CASES OF RECONSTRUCTIVE SURGERY OF THE LOCOMOTOR SYSTEM



Ion Marin*, Vasile Starțun, Grigore Dogaru**, Sergiu Ciobanu****

** State University of Medicine and Pharmacy "Nicolae Testemițanu", Republic of Moldova*

***Clinical Hospital of Orthopedics and Traumatology, Chișinău, Republic of Moldova*

Objectives of study

During surgical interventions on osteoarticular apparatus appear difficult cases when highly professional orthopedic doctors are facing unusual tactical and technical hardships, unclear safety prognosis of a rationally planned treatment. As usually, surgeons tend to choose the most appropriate method in given circumstances, and even invent new surgical procedures, but alloplasty still remains a saving method.

Material and methods

According to our experience, alloplasty seemed to be necessary during following operations: removing by resection of tumors and pseudo tumors, bone defects and cervico-cephalic endoprosthesis in 3rd age patients with femoral neck fracture in which the intramedullary channel is enlarged.

We have proposed a stable fixation of prosthetic rod in channel by application of a cortical graft in cases of purulent complications, bone defects, after sequestrectomy, when the remaining defect is too large and may be substituted by allograft.

Results

The results were confirmed in 200 patients with these pathologies, operated in our clinic. Alloplastic grafting contributed favorably to fix, restore, and maintain the integrity of the affected bone, substitution of remaining defect and creation of prodigious medical and biological conditions in local osteogenesis and their perfect integration.

Conclusions

In selection of the rational treatment in difficult situations, we were based on our experience in osteoarticular alloplasty during last 50 years. Positive results were obtained in 95.2% of cases. Retrospective analysis of the results of treatment using given method shows the absence of better alternative regenerative treatment.

Keywords: osteoarticular alloplasty, pseudo-tumor, allograft

SOLITARY BONE CYST ON HEEL, SURGICAL TREATMENT



Ion Marin*, Vasile Starțun, Grigore Dogaru**, Sergiu Ciobanu****

** State University of Medicine and Pharmacy "Nicolae Testemițanu", Republic of Moldova*

***Clinical Hospital of Orthopedics and Traumatology, Chișinău, Republic of Moldova*