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Surgical pain management by *in-vivo* endoscopic visualization of pain generators in the lumbar spine

Introduction: There is a crisis of affordability in spine care delivery. Interventional pain management, often the first line of invasive treatment only provides temporary relief that depend on natural healing to mitigate pain. Visualizing the pathoanatomy with an endoscope targeting the pathoanatomy, however, has opened the door for surgical decompression and ablation of the pain generators. Endoscopic spine surgery is effective using mobile cannulas to target the pain source. When a surgeon combines interventional techniques with endoscopic visualization brings effective steps for surgical pain management.

Materials & Method: Endoscopic foraminal surgery (The YESSI) technique is featured. Intra-operative evocative chromo-discography is performed to confirm discogenic pain; Intradiscal therapy and visualizing the hidden zone of Mac Nab identifies 90% of pain generators; Endoscopic foraminoplasty decompresses the lateral recess and visualizes the exiting and traversing nerve in the axilla containing the dorsal root ganglion (DRG) and Dorsal visualized rhizotomy denervates the facet joint. 10,000 surgical cases illustrate the painful conditions most suitable for foraminal endoscopic surgery.

Results: The transforaminal endoscopic technique will allow surgical access to the lumbar spine for treatment of a wide spectrum of painful degenerative conditions. There are

conditions where the endoscopic foraminal approach has advantages over traditional surgical approaches. Discitis; Far lateral foraminal and extraforaminal HNP, even at L5-S1; Upper lumbar HNP; Lateral foraminal stenosis and discogenic pain from toxic annular tears.

Conclusions: New surgical skills by spine surgeons incorporating endoscopic spine surgery are needed. The techniques focusing on intradiscal therapy, disc augmentation, biologics, annular modulation, and neuromodulation are all well suited for the endoscopic foraminal approach. This will open the door to for true minimally invasive access to the lumbar spine without affecting and destabilizing the dorsal muscle column. Formal training or mentorship will bring make this technology mainstream.

Speaker Biography

Yeung A specializes in diagnosing and treating the patho-anatomy of back pain and sciatica from painful degenerative conditions of the lumbar spine, particularly discogenic pain from toxic annular tears, disc herniations, lumbar spondylosis and foraminal stenosis. His Endoscopic procedures are over 10,000 since 1991 are effective in relieving both back and leg pain, by visualizing, decompressing, and ablating the pain generator with an endoscope. He is the developer of the Yeung Endoscopic Spine System, and has interest in developing a robotic and image guidance system to facilitate his technique for spine surgeons in training.

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