

1894

1893-1895

Since the end of the nineteenth century, the wide dissemination of [Pott's disease](#) has ignited debates about which should be the ideal route to perform ventrolateral [decompression](#) of the dorsal rachis in case of [paraplegia](#) due to [spinal cord compression](#) in tuberculosis [spondylitis](#). It was immediately clear that the optimal approach should be the one minimizing the surgical manipulation on both neural and extra-neural structures, while optimizing the exposure and surgical maneuverability on the target area. The first attempt was reported by Victor Auguste Menard in [1894](#) ¹⁾, who described, for the first time, a completely different route from traditional [laminectomy](#), called [costotransversectomy](#). The technique was conceived to drain tubercular paravertebral abscesses causing paraplegia without manipulating the spinal cord.

The procedure defined by Capener in [1954](#) ²⁾ resulted in better results for the treatment of [spinal tuberculosis](#), due to the effect of [antibiotics](#) ³⁾

¹⁾

Ménard V. Causes de la paraplégie dans le mal de Pott. Son traitement chirurgical par l'ouverture directe du foyer tuberculeux des vertebres. Rev Orthop 1894; 5: 47-64.

²⁾

CAPENER N. The evolution of lateral rhachotomy. J Bone Joint Surg Br. 1954 May;36-B(2):173-9. doi: 10.1302/0301-620X.36B2.173. PMID: 13163099.

³⁾

Benzel EC. Spine Surgery: Techniques, Complication Avoidance, and Management, 3th Ed. Saunders, Philadelphia 2012.

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Last update: **2024/06/07 03:00**

