

1958

1957-1959

The earliest descriptions of the technique have always been attributed to [Ralph Bingham Cloward](#), [George W. Smith](#), and Robinson. However, in the French literature, this procedure was also described by others during the exact same time period (in the 1950s). At a meeting in Paris in [1955](#), Belgians Albert Dereymaeker and Joseph Cyriel Mulier, a neurosurgeon and an orthopedic surgeon, respectively, described the technique that involved an [anterior cervical discectomy](#) and the placement of an [cortical iliac crest autograft](#) in the [intervertebral disc space](#). In [1956](#), a summary of their oral presentation was published, and a subsequent paper—an illustrated description of the technique and the details of a larger case series with a 3.5-year follow-up period—followed in [1958](#). The list of authors who first described ACDF should be completed by adding Dereymaeker's and Mulier's names. They made an important contribution to the practice of [spinal surgery](#) that was not generally known because they published in French ¹⁾.

In 1958, Cloward ²⁾ pioneered the ventral approach to the [cervical spine](#). With his technique, it was easy to remove the disc and fuse the level by placing a bone dowel between the vertebral bodies.

Several modifications have been described to the original procedure developed by Smith and Robinson for [ACDF](#) ³⁾

In [1958](#), Niemeyer described a more selective [approach](#) to the [hippocampus](#) and [amygdala](#) through the [middle temporal gyrus](#) ⁴⁾.

The [Odom criteria](#), established in [1958](#), are a widely used, 4-point rating scale for assessing the clinical [outcome](#) after [cervical spine surgery](#) ⁵⁾.

In [1958](#), four visionary Swiss surgeons shared a common goal: to conduct research into bone healing within a structured, coordinated study group. It was effectively the birth of the [AO](#) (Arbeitsgemeinschaft für Osteosynthesefragen—literally translated, “working group for bone fusion issues”).

Year over year, its scope has expanded to keep pace with rapid developments in musculoskeletal surgery and patient care, and in [1984](#) the AO Foundation was formally established.

see [AOSpine](#).

In 1958 Gillingham popularized [wrapping](#) with [cotton](#) or [muslin](#) ⁶⁾. An analysis of 60 patients showed that 8.5% rebled in ≤ 6 mos, and the annual rebleeding rate was 1.5% thereafter ⁷⁾ (similar to the natural history)

¹⁾

Bartels RHMA, Goffin J. Albert Dereymaeker and Joseph Cyriel Mulier's description of anterior cervical discectomy with fusion in 1955. J Neurosurg Spine. 2018 Jan 12;1-6. doi: 10.3171/2017.7.SPINE17182. [Epub ahead of print] PubMed PMID: 29327972.

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Cloward RB. The anterior approach for removal of ruptured cervical disks. J Neurosurg. 1958;15:602-17.

³⁾

Smith GW , Robinson RA . The treatment of certain cervical-spine disorders by anterior removal of the intervertebral disc and interbody fusion. The Journal of Bone & Joint Surgery. 1958;40(3):607-624. doi:10.2106/00004623-195840030-00009

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Niemeyer P, Baldwin M, Bailey P. The [transventricular amygdala-hippocampectomy](#) in [temporal lobe epilepsy](#). In: Temporal Lobe Epilepsy. Springfield: Charles C Thomas; 1958:461-482

⁵⁾

Odom GL, Finney W, Woodhall B: Cervical disc lesions. JAMA 166:23-28, 1958

⁶⁾

Gillingham FJ. The Management of Ruptured Intracranial Aneurysms. Hunterian Lecture. Ann R Coll Surg Engl. 1958; 23:89-117

⁷⁾

Todd NV, Tocher JL, Jones PA, et al. Outcome Following Aneurysm Wrapping: A 10-Year Follow-Up Review of Clipped and Wrapped Aneurysms. J Neurosurg. 1989; 70:841-846

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