

Destandau technique

Endoscopic surgery for lumbar disc herniation using [ENDOSPINE Karl Storz](#) system.

It has been gaining popularity, as it is attractive for small skin incision and allows a gentle and excellent tissue dissection with excellent visualization. Many authors have published results of their own studies; however, in all these studies the long-term follow up of the patients has not been emphasized.

Case series

2016

A retrospective study of intradural extramedullary tumors extending up to two vertebral levels was studied. Pre- and postoperative clinical status, magnetic resonance imaging was done in all patients. The [Destandau technique](#) was used, and resection of ipsilateral lamina, medial part of the facet joint, base of the spinous process, and undercutting of the opposite lamina was performed. Dura repair was done using an endoscopic technique. Fibrin glue was used to reinforce repair in the later part of the study. Results The sagittal and axial diameter of tumor ranged from 21 to 41 mm and 12 to 18 mm, respectively. There were four cervical, two cervicothoracic, five thoracic, three thoracolumbar, and four lumbar tumors, respectively. All 18 patients improved after total excision of tumor. Average duration of surgery and blood loss was 140 minutes and 60 mL, respectively. Postoperative stay and follow-up ranged from 3 to 7 days and 9 to 24 months, respectively. Conclusion Although the study is limited by the small number of patients with a short follow-up and is a technically demanding procedure, endoscopic management of intradural extramedullary tumors was an effective and safe alternative technique to microsurgery in such patients ¹⁾.

¹⁾

Parihar VS, Yadav N, Yadav YR, Ratre S, Bajaj J, Kher Y. Endoscopic Management of Spinal Intradural Extramedullary Tumors. J Neurol Surg A Cent Eur Neurosurg. 2016 Dec 12. [Epub ahead of print] PubMed PMID: 27951615.

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