

Percutaneous cervical disc nucleoplasty

In [percutaneous cervical nucleoplasty](#) (PCN) a portion of the nucleus tissue is ablated using the Coblation technique. Re-surgery is an important factor for the clinical outcome. However, the rate of subsequent surgery after PCN is still unknown. The aim of a study was to investigate the frequency of an additional open surgery after PCN in a retrospective of more than ten years.

Retrospective observational study. Consecutive patients with PCN between 2005 and 2007 were included. Patient's satisfaction was evaluated using McNab's outcome criteria. The necessity of an additional open surgery at the cervical spine, the period between PCN and the fusion, and the treated levels were analyzed.

133 patients were included. The follow-up time was longer than 5 years in 31.6% of the patients and longer than 10 years in 6.0%. The short-term success rate was 70.7%. However, subsequent surgery was performed in 19.5% of the patients. Overall, 57.7 % of the reoperations were performed during the first year after PCN. In patients with a good result after PCN, subsequent surgery was less frequent and the interval between PCN and additional surgery was larger ($P < 0.01$).

This is the first study reporting the frequency of re-surgery after PCN. Overall, 70.7% patient satisfaction was observed after one month. This result is worsened due to a re-surgery rate of 19.5%. The data from this study suggests that PCN is a poor replacement for conventional open surgery. Degeneration of the disc is progressive despite or because of PCN ¹⁾.

¹⁾

Klessinger S. The Frequency of Re-Surgery after Cervical Disc Nucleoplasty. World Neurosurg. 2018 Jun 20. pii: S1878-8750(18)31290-7. doi: 10.1016/j.wneu.2018.06.075. [Epub ahead of print] PubMed PMID: 29935322.

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