



## Case Review:

Prestige Artificial Disc  
above a previous fusion

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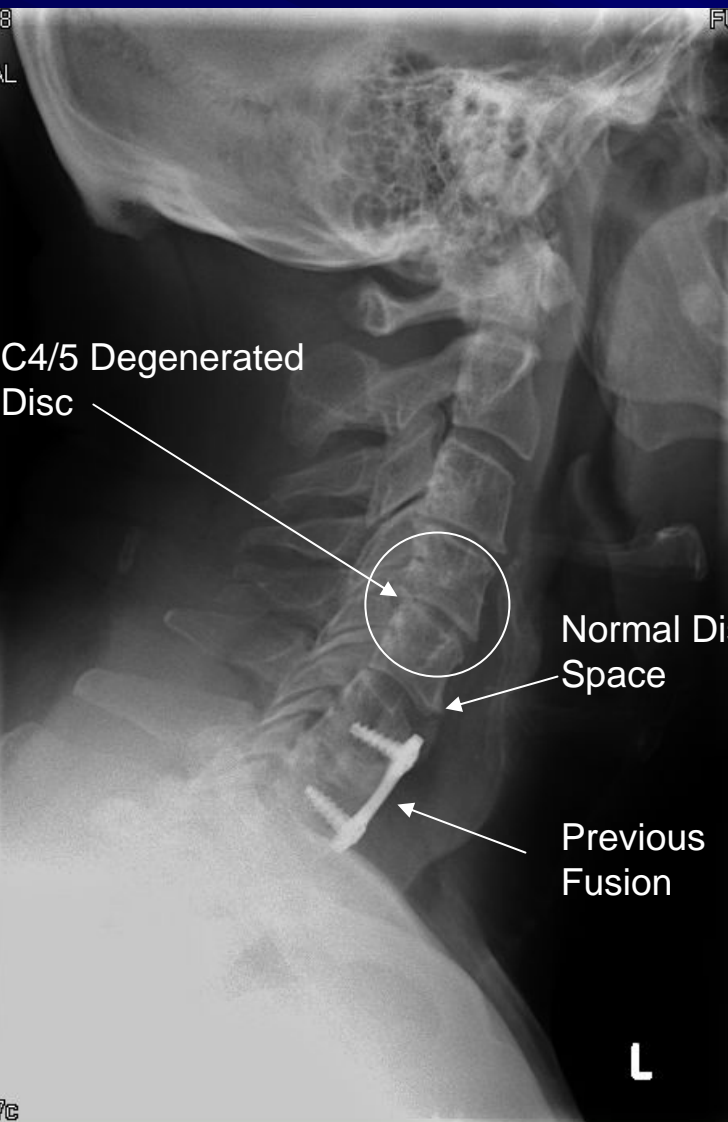
Scoliosis and Spinal Deformity Surgery

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# Patient History

- 57 yr old male
- Status post Anterior Cervical Discectomy and Fusion at C6/7 for radiculopathy.
- Massive neck pain and arm pain
- On MRI found to have myeloradiculopathy due to a second level supra adjacent degeneration disk herniation at C4-5. The disk herniation effacing the cord into the neural foramen bilaterally.
- The patient was offered either a 3-level fusion, (because doing a fusion above and below a normal segment would put this segment at too much risk of having spinal cord decompression) or a cervical total disk replacement at the C4/5 level.

# Pre-op X-rays



This patient is a unusual situation where there is a healthy level between the prior fusion and current disc degeneration at C4/5.

An Anterior Cervical Discectomy and Fusion would require treating the healthy disc as well as the degenerated disc. The Artificial Disc allowed us to treat only the affected area.

# Indications for Surgery

- Disk herniation at C4-5, cervical myelopathy.
- Status post anterior cervical discectomy and fusion at C6-7.
- Normal C5-6 interval space.
- Failed conservative therapy.
- Motor sensory deficit

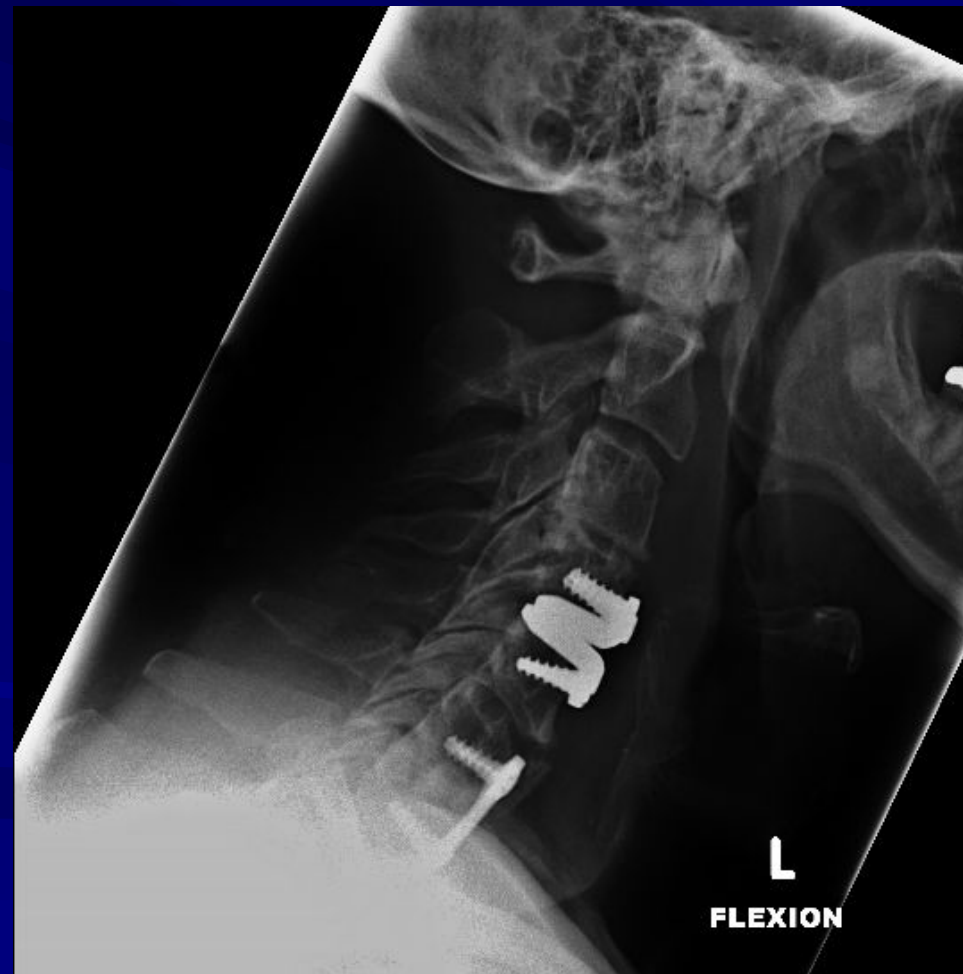
# Surgical Strategy

- Subtotal vertebrectomy, C4-5, removal of massive uncovertebral osteophyte compressing spinal cord and nerve roots bilaterally.
- Radical diskectomy, C4-5, under the microscope with spinal canal decompression.
- Prestige total cervical disk replacement, 7 by 16, for reconstruction of cervical C4-5 disk space.
- Intraoperative somatosensory evoked potentials.
- Intraoperative fluoroscopy.

# Post-Op Films



# Post-Op Flexion and Extension X-rays



# Pre-Op/Post-op Comparison



The patient is doing well post-operatively. His neck pain and arm pain have almost completely resolved.

# Pre-Op/Post-op Comparison

