

## **What is Minimally Invasive Spinal Surgery?**

Minimally invasive spinal surgery is the use of specialized retractors or tubes with lighting sources that go through slightly different muscle planes to allow spinal surgeons to do the same types of spinal surgery with potentially an easier recovery.

Minimally invasive spinal surgery does not necessarily give you a smaller scar. Some scars from minimally invasive spinal surgery are in different locations than you would expect from open surgery. In addition, there may even be some cases where the scars are opposite of what you would expect.

There are many procedures that can be done with minimally invasive techniques such as laminectomies, discectomies, and even fusions, but before determining whether minimally invasive spinal surgery is the right approach for any patient, an accurate assessment of the pathology must be done. There are some instances when minimally invasive spinal surgery is not advised.

At the Center for Spinal Disorders, we perform all types of spinal surgery, including minimally invasive spinal surgery. In addition, Dr. Hennenhoefer provides non-operative spinal and musculoskeletal care. We are happy to assess your spine and customize the appropriate course of treatment whether it involves open surgery, minimally invasive spinal surgery, or non-operative interventions.

## **What is Vertebroplasty and how does this differ from Kyphoplasty?**

Vertebroplasty and Kyphoplasty are percutaneous procedures. This involves using special x-ray machines in the operating room to do the procedure through small incisions in the skin. The bony elements of the spine are not visualized directly.

Vertebroplasty is a procedure that involves placing needles into a vertebral body that is fractured from osteoporosis or tumor. Through these needles, a type of cement is injected into the bone and it stabilizes the cracks in the fractured bone. This can reduce the pain of the fracture.

Kyphoplasty is a type of percutaneous Vertebroplasty that involves placing a balloon through the needle prior to the injection of cement. The balloon creates a space, and once the balloon is deflated and removed, the cement is placed into the vertebral body.

Each case is individualized and we evaluate which procedure would be the most appropriate for our patients.