



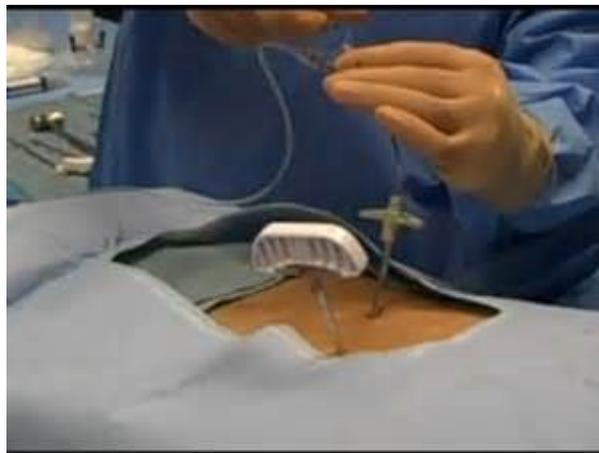
NEUROSURGERY AND SPINE

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KYPHOPLASTY PROCEDURE

A kyphoplasty is a surgical procedure designed to stop the pain caused by a spinal compression fracture, to stabilize the bone, and to restore some or all of the height of the vertebrae which is lost due to the compression fracture.



WHEN IS KYPHOPLASTY APPROPRIATE?

Kyphoplasty cannot correct a long standing deformity of the spine and certain patients with osteoporosis are not candidates for this treatment, but...

Patients experiencing painful symptoms or spinal deformities from **recent** compression fractures are likely candidates for kyphoplasty. Ideally, the procedure should be completed within 8—12 weeks of when the fracture occurs for the highest probability of success.

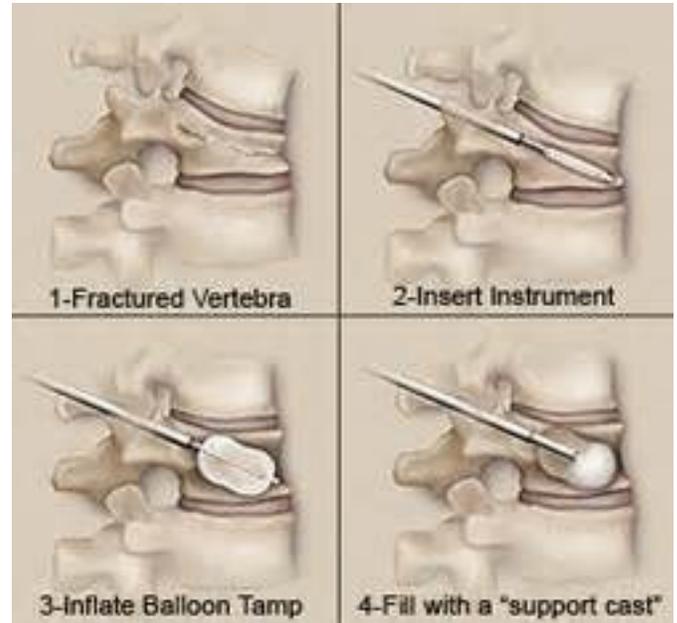
THE KYPHOPLASTY PROCEDURE

During kyphoplasty surgery, a small incision is made in the back through which the doctor places a narrow tube.

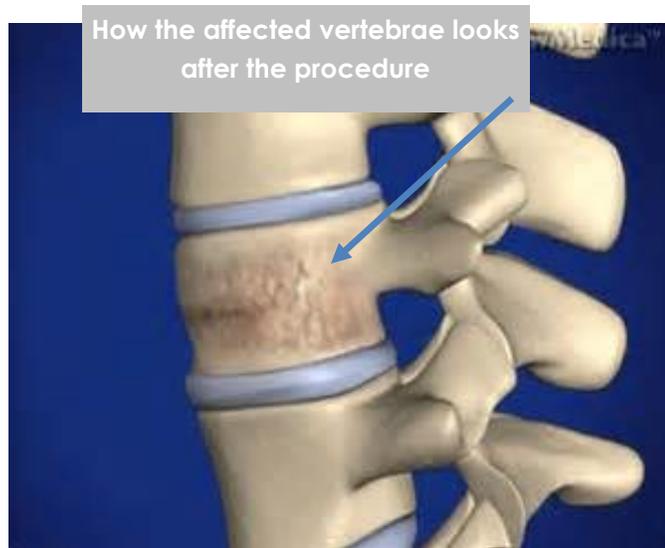
Using X-ray to guide it to the correct position, the tube creates a path through the back into the fractured area through the pedicle of the involved vertebrae.

Using X-ray images, the doctor inserts a special balloon through the tube and into the vertebrae, then gently and carefully inflates it.

As the balloon inflates, it elevates the fracture, returning the pieces to a more normal position. It also compacts the soft inner bone to create a cavity inside the vertebrae.



The balloon is removed and the doctor uses specially designed instruments under low pressure to fill the cavity with a cement-like material called polymethylmethacrylate (PMMA). After being injected, the pasty material hardens quickly, stabilizing the bone.



AFTER KYPHOPLASTY

The kyphoplasty procedure takes about one hour for each vertebra involved.

Patients may spend one day in the hospital after the kyphoplasty procedure or be released the same day.

Pain relief will be immediate for some patients.

In others, elimination or reduction of pain can take up to 6 weeks.

At home, patients can return to their normal daily activities, although strenuous exertion, such as heavy lifting, should be avoided for at least six weeks.

Some patients may be asked to wear a back brace to support the back and limit adverse movements during the 6-week recovery period.

In patients who have compression fractures as a result of osteoporosis they will also need to work with their primary physician to review their treatment plan for osteoporosis, including medications to prevent further bone loss.