



NEUROSURGERY AND SPINE

19 Limestone Drive, Suite 11
Williamsville, NY 14221
716-634-3500



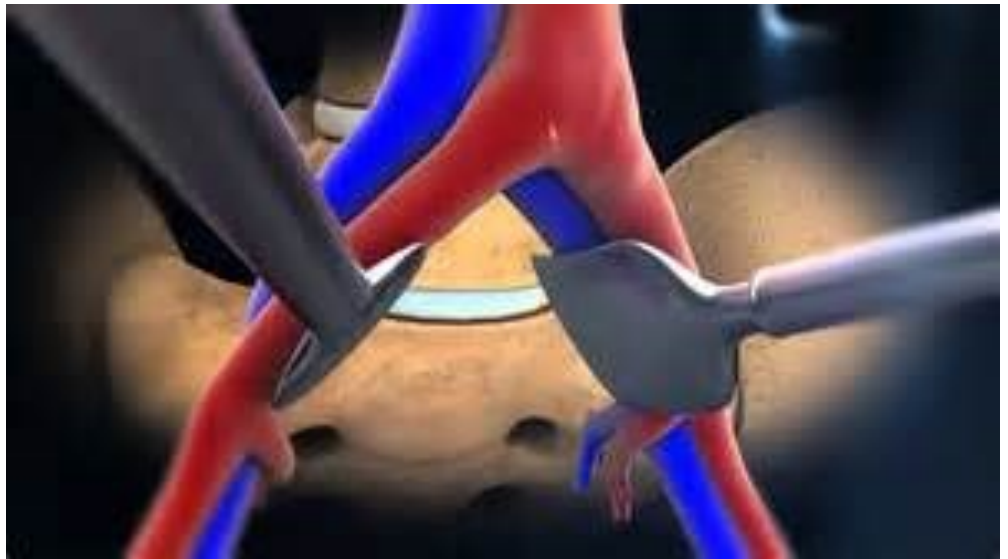
ANTERIOR LUMBAR INTERBODY FUSION (ALIF)

Lumbar Interbody Fusion involving the removal of damaged vertebral (spinal) discs and insertion of bone grafts into the space created between the two adjoining vertebrae (where the disc was removed).

Anterior lumbar fusion (**ALIF**) is performed from the front of the body through the abdomen in order to treat lower back disc degeneration and instability caused by congenital defect, injury or aging of the spine.

MINIMALLY INVASIVE ALIF

In the past, surgeries of this type involved large incisions. With new techniques, ALIF procedures can now be performed in a minimally invasive manner, sparing impact on the back muscles and other structures, and therefore minimizing pain and the length of recovery time.



When minimally invasive surgery is possible, insertion of the necessary implants is accomplished through a very small incision, minimizing the cutting of muscles and impact on nerves.

WHAT IMPLANTS ARE USED DURING AN ALIF?



In performing the fusion procedure, the Dr. DenHaese will use bone grafts between the vertebral segments which causes the body to begin healing and fusing the vertebrae together (the bone grafts make the body behave as if it is healing a broken bone).

In order to keep the spine stable and prevent excess movement during healing, the surgeon will also use metal implants to act as an internal brace to immobilize the vertebral section being fused.

This is an example of one type of bone stabilizing instrumentation that is used in ALIF procedures.

LIMITATION OF ALIF

Occasionally, minimally invasive ALIF is not possible due to the extent of disc disease or damage and the doctor may advise an open procedure, but more likely, the doctor may recommend several minimally invasive procedures. The surgeon will advise you of the best approach(es) for your specific condition, and may even recommend surgery occur in stages.

RECOVERY

Everyone recovers at a different rate but in general, you will be up and walking on the day of surgery, and will be home within 2-3 days.

You will be given a custom fitted brace to wear which will prevent you from making sudden or extreme moves and therefore will aid in your healing. Your specific pain will be assessed and treated throughout your post-op period.