

ORTOPEDYCZNO-REHABILITACYJNY
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Experience in Unilateral Biportal Endoscopic Spine Surgery for Adjacent Segment Disease

Mikołaj Dąbrowski

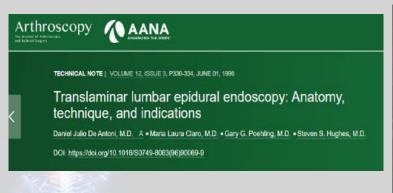
Adult Spine Orthopaedics
Department
Poznan University of Medical
Sciences

History of UBE (Unilateral Biportal Endoscopic Spine)

1996 De Antoni et al.

First articles Soliman 2013, 2015, herniation, stenosis

2016 Unilateral Biportal Endoscopy (South Korea)



Unilateral Biportal Endoscopic Spine Surgery

Basic and Advanced Techniqu

Dong Hwa Heo Cheol Woong Park Sang Kyu Son





Unilateral Biportal Endoscopy of the Spine

An Atlas of Surgical Techniques

Javier Quillo-Olvera Diego Quillo-Olvera Javier Quillo-Reséndiz Michael Mayer Editors







UBE

Indications

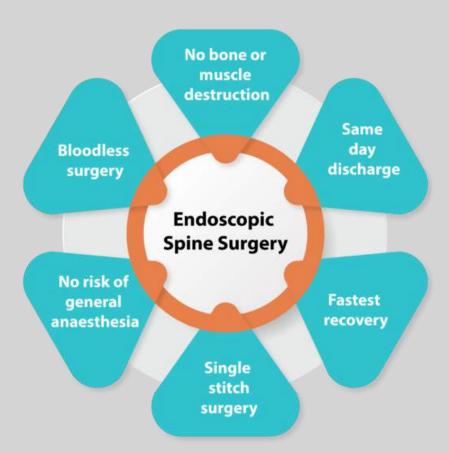
- Neurogenic claudication
- Radiculopathy
- Stenosis on MRI / CT
 - disc herniation central, lateral, foraminal, extraforaminal
 - recurrent herniation
 - stenosis
 - fusion
 - discitis
 - calcifications in the PLL (cervical and thoracic spine)

Contraindications

- Advanced deformity
- Advanced instability
- Infection

Advantages of endoscopic procedures

- Reduced risk of muscle damage
- Reduced risk of complications
- Reduced post-operative pain
- Reduced risk of infection
- Reduced blood loss
- Faster return to activity time
- Improved cosmetic results
- Local anesthesia options



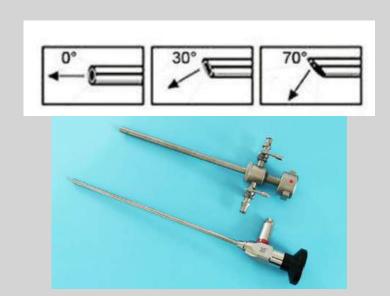
Devices



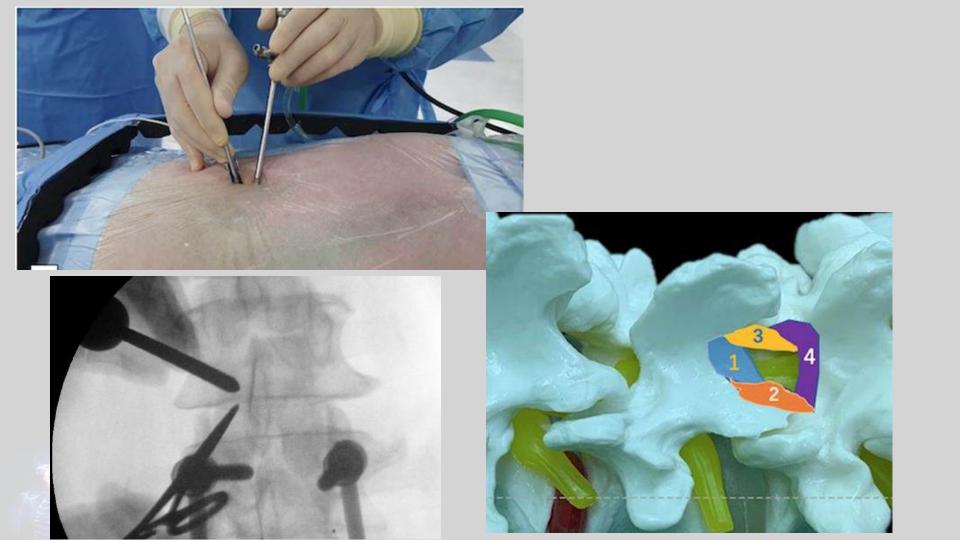
Diamond Bur

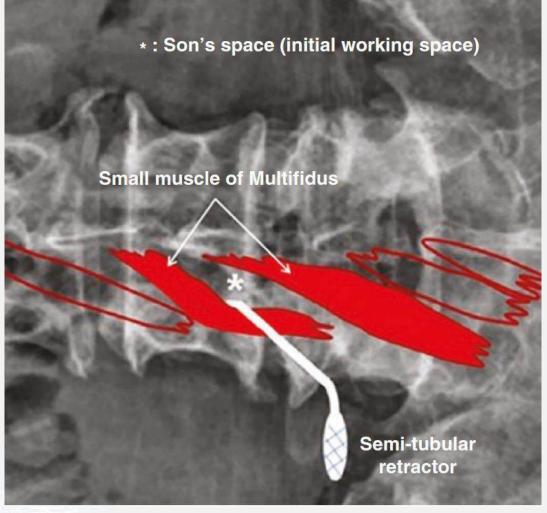


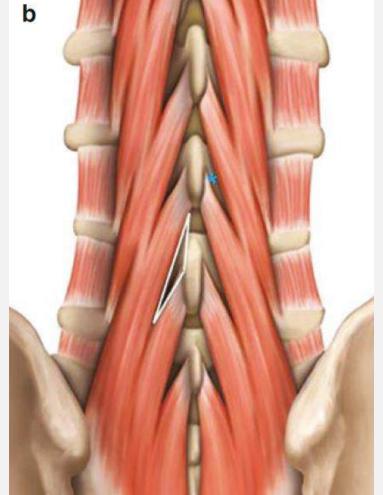
90 degree RF wand



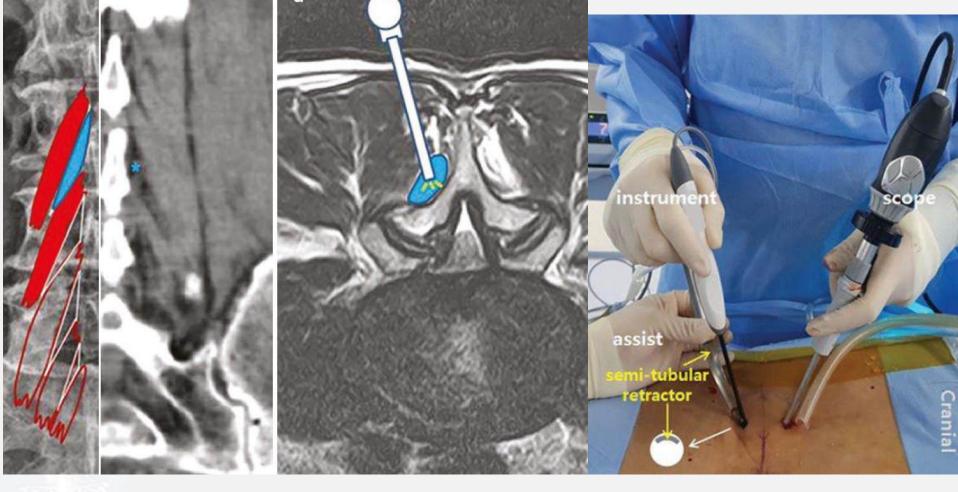




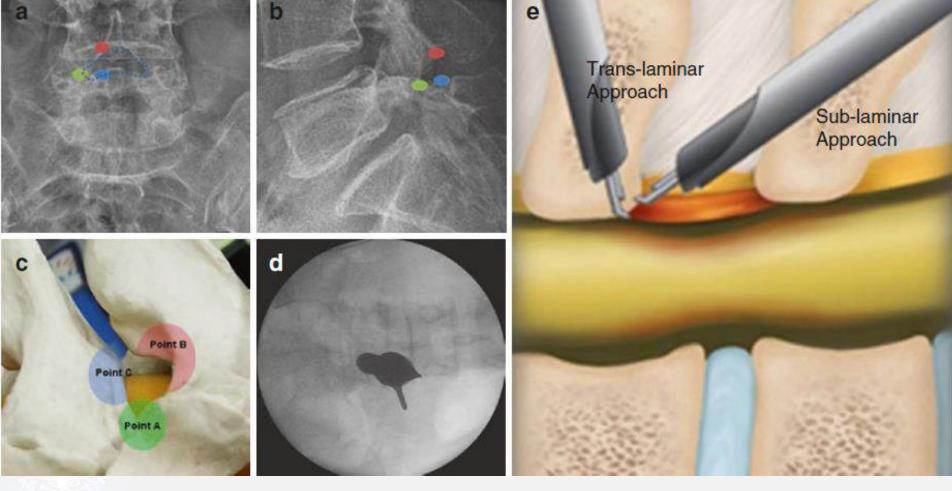




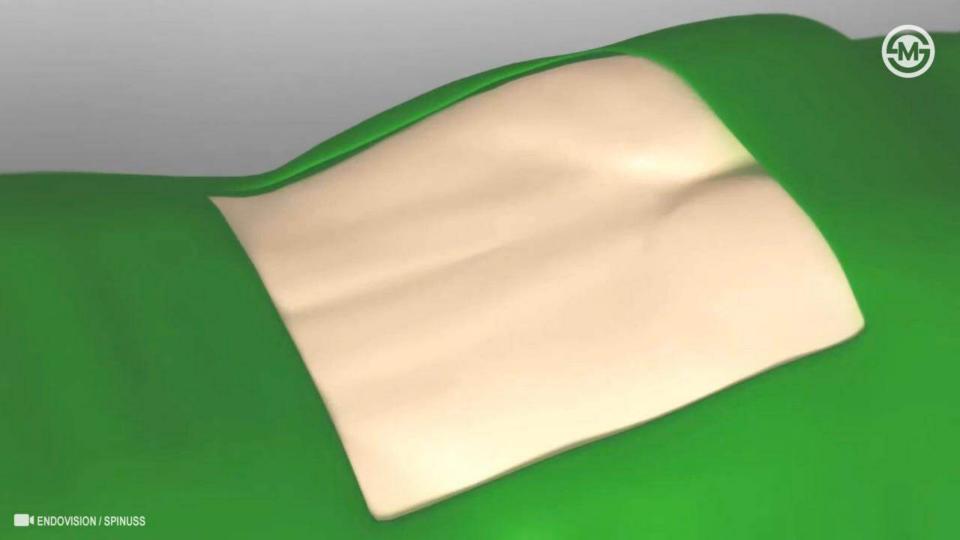
Heo, Dong Hwa, et al. *Unilateral biportal endoscopic spine surgery*. Berlin: Springer Nature, 2022



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Kim, Hyeun Sung, et al., eds. Advanced techniques of endoscopic lumbar spine surgery. Springer Nature, 2020c



Possibilities of surgical approaches using UBE Compartment 3 Compartment 1 **UBE-Interlaminar UBE-PLIF** UBE-ULBD Superior Pars articular Interarticularis UBE/Ex-TLIF and FES process UBE-Spondylitis UBE-EFLIF UBE-Transforaminal Transverse Process Spinal Process Intervertebral disk Accessory Note: The black spot in the Process second anatomical compartment does not Inferior Lamina include UBE-FES. Compartment 2 Compartment 4 articular

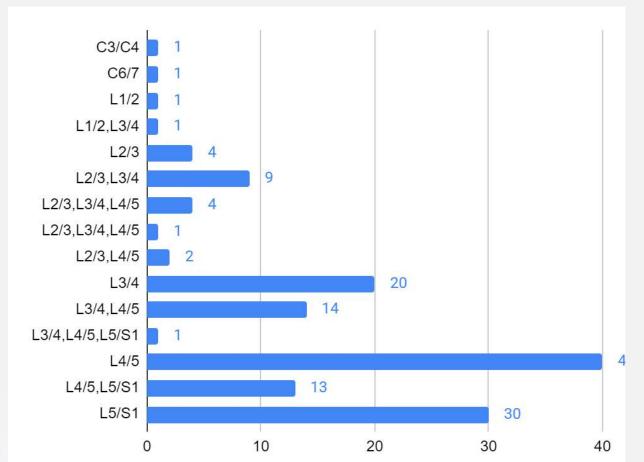
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2 years of experience in UBE

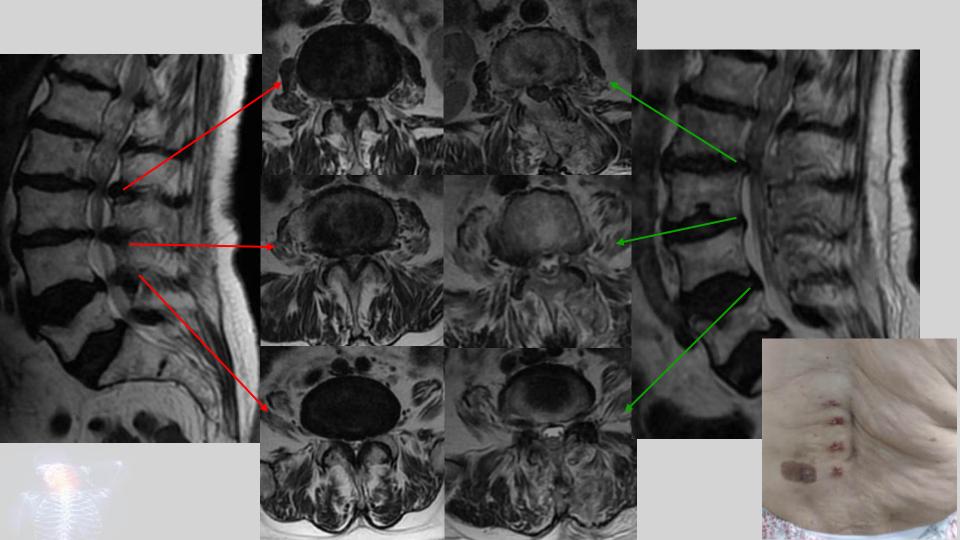
- 137 patients / 142 decompressions / 191 decompressed segments
 - age mean 64 yo (25-89, median 67)
 - sex: F/M 78 / 59
 - approach: interlaminar/ foraminal 133 / 4
 - site: left/right 115 / 22
 - number of operated segments: 1/2/3 99 / 37 / 6

- ASD 3
- PLIF UBE 2
- Arthrodesis after ALIF 23

2 years of experience in UBE



segment	number
L1/2	2
L2/3	20
L3/4	50
L4/5	75
L5/S1	44



Complications

insufficient decompression	8	5,63%
dura tear	5	3,52%
limb paresis	2	1,41%
hematoma	2	1,41%
secondary instability	1	0,70%

Stenosis in Adjacent Segment Disease (ASD)

- Woman 70 yo
- Fusion L4/5 (20 years ago)
- Stenosis L3/4
- Endoprostheses due to hip dysplasia



