2017 Summer Spine Meeting Program

**Wednesday, July 26**
7:00 a.m.-6:00 p.m.  
Registration/Speaker Information Center

7:30 a.m.-3:00 p.m.  
Spine Foundation Non CME Course: Biologic Interventions for Spinal Pathologies: Stem Cells, Growth Factors and Novel Therapeutics  
*Chair: Wellington K. Hsu, MD*

**Thursday, July 27**
6:30-8:00 a.m.  
Breakfast

6:30 a.m.-12:00 p.m.  
Technical Exhibition  
ePoster Kiosks

6:30 a.m.-12:30 p.m.  
Registration  
Speaker Information Center

7:10-7:15 a.m.  
Welcome/Opening Remarks  
*Clinton J. Devin, MD*  
*Yong-Eun Cho, MD, PhD, Korean Spinal Neurosurgery Society*

7:15-7:30 a.m.  
Advocacy presentation  
*Chair: John G. Finkenberg, MD*

7:30-9:00 a.m.  
**Symposium: Workup of Mimicking Pathology**  
*Chairs: D.J. Kennedy, MD; Byron J. Schneider, MD*  
Successful management of spine versus large joint (hip or shoulder) pathology is underpinned by accurate diagnosis. There is overlay in the presentation and pain referral patterns of the cervical spine and shoulder and similarly of the lumbar spine and hip. Physical exam in conjunction with diagnostic tests can help differentiate. Diagnostic injections can further clarify the diagnosis. At times, concomitant pathology exists necessitating both issues be addressed. This session will provide an evidence-based approach is using history, exam, imaging, and diagnostic injections to determine accurate diagnosis.
Upon completion of this session, participants should gain strategies to:

- Discuss what similarities exist in the presentations of cervical spine and shoulder pathology and then how do differentiate between the two;
- Clinically apply these concepts in the setting of a multidisciplinary practice that utilizes collaboration between surgical and non-surgical providers.

**Agenda**

7:30-7:40 a.m.  
**Introduction: Prevalence and Diagnostic Confidence**

7:40-8:00 a.m.  
**Neck and Shoulder Pain: Presentation, Diagnosis, and Conservative Treatment**

8:00-8:15 a.m.  
**Surgical Perspective to Neck and Shoulder Pain with Case Presentation**

8:15-8:35 a.m.  
**Hip Spine Syndrome: Presentation, Diagnosis, and Conservative Treatment**

8:35-8:50 a.m.  
**Surgical Perspective to Hip Spine Syndrome with Case Presentation**

8:50-9:00 a.m.  
**Questions and Answers**

9:00-9:30 a.m.  
**Break/Technical Exhibition**

9:30-10:30 a.m.  
**Abstract Paper Presentations: Cervical Spine**

10:30-11:00 a.m.  
**Break/Technical Exhibition**

11:00 a.m.-12:30 p.m.  
**Symposium: Cervical Myelopathy**

*Chair: Wellington K. Hsu, MD*

**Agenda**

11:00-11:15 a.m.  
**Posterior Approaches**

11:15-11:30 a.m.  
**Tricks and Pearls: Indications for Laminoplasty**

11:30-11:45 a.m.  
**Anterior Approaches**

11:45 a.m.-12:00 p.m.  
**Complications**

12:00-12:30 p.m.  
**Discussion**

12:30 p.m.  
**General Meeting Adjourns**

1:30-4:30 p.m.  
**Technique Workshops (attendees may participate in any of the three)**

1. **Technique Workshop: Cervical Spine Techniques**

*Chair: Clinton J. Devin, MD*

This technique workshop will review the different forms of posterior fixation in the cervical spine, MIS techniques for treatment of cervical radiculopathy, laminoplasty tricks and pearls, C7 Pedicle subtraction osteotomy vs posterior column osteotomies, and cervical disc replacement pearls. We will review the indications for posterior cervical fixation, MIS approaches, laminoplasty, and disc replacement in the treatment of degenerative cervical pathology. The preoperative planning and intraoperative pearls will be discussed at the work stations and in the didactic
session to avoid and manage complications. Additional time will be spent on radiographic parameters for cervical deformity and the indications for cervical pedicle subtraction osteotomy versus posterior column osteotomy including indications, techniques, and pitfalls.

**Upon completion of this session, participants should gain strategies to:**

- Determine the indications to perform posterior cervical fixation, MIS posterior cervical approaches, and laminoplasty in the treatment of degenerative cervical pathology;
- Determine the indications and updated information on cervical disc arthroplasty;
- Review radiographic parameters in evaluation of cervical deformity and indications for cervical pedicle subtraction osteotomy vs. posterior column osteotomy.

**Audience**
This course is for orthopedic surgeons and neurosurgeons who are involved in spine care.

**Credits**
The North American Spine Society designates this live activity for a maximum of 3 *AMA PRA Category 1 Credits™*. Physicians should claim only the credit commensurate with the extent of their participation in the activity.

1:30-1:45 p.m. Posterior Approaches to Treatment of Cervical Radiculopathy and Myelopathy

1:45-2:00 p.m. Cervical Disc Replacement: Who is it Right for, Tricks and Pearls, and Management of Complications

2:00-2:15 p.m. Assessing Cervical Deformity: Radiographic Pearls, Perioperative Optimization, Indications for Approach and Osteotomy Type, and Management of Complications

2:15-4:30 p.m. Sawbones Available for Hands-on Instruction

2. **Technique Workshop: Osteotomies for Correction of Sagittal Plane Deformity and Placement of Pelvic Fixation**

*Chair: Jason W. Savage, MD*

This technique workshop will review the different types of posterior-based osteotomies available for the correction of flexible or rigid sagittal plane deformity. We will review the indications to perform a posterior column osteotomy versus a pedicle subtraction osteotomy, and highlight the techniques, pearls and pitfalls of each procedure. We will also review the placement of iliac fixation and S2AI screws, and the use of lateral interbody fusion for restoration of lumbar lordosis.

**Upon completion of this session, participants should gain strategies to:**

- Determine indications to perform a posterior column osteotomy versus a pedicle subtraction osteotomy;
• Review the pearls and pitfalls of performing posterior based osteotomies for spinal deformity;
• Review the techniques to place pelvic fixation (including iliac screws and S2AI screws).

**Audience**
This course is for orthopedic surgeons and neurosurgeons who are involved in spine care.

**Credits**
The North American Spine Society designates this live activity for a maximum of 3 *AMA PRA Category 1 Credits™*. Physicians should claim only the credit commensurate with the extent of their participation in the activity.

1:30-1:45 p.m. Posterior Osteotomies for the Correction of Sagittal Plane Deformity

1:45-2:00 p.m. Placement of Iliac Screws and S2AI Screws

2:00-2:15 p.m. Direct Lateral Interbody Fusion: Achieving Restoration of Lordosis Through the Lateral Approach

2:15-4:30 p.m. Sawbones Available for Hands-on Instruction

3. **Technique Workshop: Conservative Treatment Modalities of the Sacroiliac Joint**
   **Chair:** David J Kennedy, MD  
   **Co-Chair:** Byron J Schneider MD
   This session will cover the neural anatomy of the sacroiliac joint and how this pertains the performing radiofrequency neurotomy targeting the sacroiliac joint. Outcome evidence of sacroiliac joint targeted radiofrequency neurotomy will be covered. Lastly, the predictive values of anesthetic response of sacroiliac joint injections will be covered.

   **Upon completion of this session, participants should gain strategies to:**
   • Describe the relevant anatomy as it pertains to radiofrequency neurotomy targeting the sacroiliac joint;
   • Use new radiofrequency electrode technology to properly perform sacroiliac joint targeted radiofrequency neurotomy;
   • Interpret the positive and negative predictive value of intra-articular sacroiliac joint injection anesthetic responses.

**Audience**
This course is for orthopedic surgeons, neurosurgeons, anesthesiologist, and physiatrists who are involved in spine care.

**Credits**
The North American Spine Society designates this live activity for a maximum of 3 *AMA PRA Category 1 Credits™*. Physicians should claim only the credit commensurate with the extent of their participation in the activity.

1:30-1:45 p.m. Innervation of the Sacroiliac Joint
1:45-1:52 p.m.  Outcome Evidence for Sacroiliac Joint Targeted Radiofrequency Neurotomy

1:52-2:00 p.m.  Positive and Negative Predictive Values of SI Joint Injection Anesthetic Responses

2:00-4:30 p.m.  Sawbones Available for Hands-on Instruction
   a. Sacroiliac Joint Neurotomy using cooled radiofrequency electrodes
   b. Coolief Sinergy Sacroiliac Cooled Radiofrequency by Halyard
   b. Sacroiliac Joint Intra-articular access

5:00-6:00 p.m.  Opening Reception

**Friday, July 28**
6:30-8:00 a.m.  Breakfast

6:30 a.m.-12:00 p.m.  Technical Exhibition
ePoster Kiosks

6:30 a.m.-12:30 p.m.  Registration
Speaker Information Center

7:25-7:30 a.m.  Opening Remarks
*Jason W. Savage, MD*

7:30-9:00 a.m.  Symposium: Spine Deformity
*Chair: Jason W. Savage, MD*

   **Agenda**
   7:30-7:45 a.m.  What A General Spine Surgeon Needs to Know
   7:45-8:00 a.m.  Minimally Invasive Approach and New Technology
   8:00-8:15 a.m.  Management and Mitigation of Complications
   8:15-9:00 a.m.  Case Debate

9:00-9:30 a.m.  Break/Technical Exhibition

9:30-10:30 a.m.  Abstract Paper Presentations: Thoracolumbar Surgery

10:30-11:00 a.m.  Break/Technical Exhibition
11:00 a.m.-12:30 p.m.  
**Symposium: Cervical Radiculopathy**  
*Chair: Scott L. Parker, MD*

**Agenda**

- 11:00-11:15 a.m.  
  Disc Replacement: Indications, Complications, and Future

- 11:15-11:30 a.m.  
  Foramintomy and Minimally Invasive Approach

- 11:30-11:45 a.m.  
  ACDF/Hybrid

- 11:45 a.m.-12:30 p.m.  
  Case Debate

12:30 p.m.  
Lunch on own

1:30-3:00 p.m.  
**Korean Spinal Neurosurgery Society Symposium: MISS Suggestion for Pure Lumbar Foraminal Stenosis Management**  
*Chair: Yong Eun Cho, MD, PhD*

**Agenda**

- Minimized Solution by Percutaneous Endoscopic Lumbar Foraminotomy  
  *Hyeun Sung Kim, MD, PhD*

- Not Enough: A More Thorough Decompression Only by MED Paraspinal Approach  
  *Jin-Sung Kim, MD, PhD*

- Not Stable: Proven Longevity for Efficacy by MIS-TLIF  
  *Jeong-Yoon Park, MD, PhD*

- Posterior Manipulation is Not Truly MISS: Indirect Foraminal Restoration by ALIF  
  *Dong-Hwa Heo, MD, PhD*

3:00 p.m.  
General meeting adjourns

**Saturday, July 29**

6:30-8:00 a.m.  
Breakfast

6:30 a.m.-12:00 p.m.  
Registration  
Speaker Information Center

7:25-7:30 a.m.  
Opening Remarks  
*Clinton J. Devin, MD*

7:30-9:00 a.m.  
**Symposium: Lumbar Stenosis/Spondylolisthesis**  
*Chair: Peter G. Whang, MD*

Lumbar stenosis is essentially ubiquitous in the elderly population and remains one of the most common conditions for which older patients undergo spinal surgery. With recent advances in operative technique, it is now possible to achieve the same goals of neural element decompression and maintenance of segmental stability using less...
invasive surgical procedures. Nevertheless, given the prevalence of therapeutic interventions and the increasing life expectancy of individuals in our society, it is inevitable that surgeons will need to be familiar with safe and effective revision strategies to treat conditions such as recurrent stenosis, adjacent segment degeneration, and progressive spinal deformities. There are a number of patient and procedural factors that may contribute to the development of perioperative complications which surgeons need to be cognizant of because prompt recognition and the implementation of appropriate treatments are critical for minimizing morbidity and mortality. This symposium is intended for spine surgeons and other practitioners who are interested in learning more about the “best practices” that have been developed for the surgical management of lumbar stenosis with or without instability.

Upon completion of this session, participants should gain strategies to:

- Determine the purported benefits as well as the potential pitfalls inherent to minimally invasive surgical techniques for addressing lumbar stenosis/spondylolisthesis;
- Adhere to well-established surgical principles for increasing the safety and efficacy of revision lumbar decompressions and/or fusion procedures;
- Review the complication profile of these operations in order to facilitate the expedient diagnosis and treatment of these adverse events.

**Agenda**

7:30-7:45 a.m. Minimally Invasive Approach
7:45-8:00 a.m. Revision Surgery: Pearls and Tricks
8:00-8:15 a.m. Complications and Management
8:15-9:00 a.m. Case Debate

9:00-9:30 a.m. Break

9:30-10:30 a.m. Abstract Paper Presentations: Basic Science

10:30 a.m.-12:00 p.m. Symposium: Oncology

*Chair: Mohamad Bydon, MD*

A panel of experts will provide an overview of spinal oncology, both primary and metastatic tumors in addition to extradural and intradural tumors. The session will conclude with case debates.

Upon completion of this session, participants should gain strategies to:

- Manage primary versus metastatic tumors;
- Manage intradural tumors, both intramedullary and extramedullary;
- Understand a variety of surgical approaches for spinal oncology.

**Agenda**

10:30-10:45 a.m. Metastatic Spine Disease and Stability
10:45-11:00 a.m. Primary Spine Tumors
11:00-11:15 a.m. Intradural Spinal Tumors
11:15 a.m.-12:00 p.m. Case Debate

12:00 p.m. General Meeting Adjourns