

## **Recommendations of good practice for cervical disc replacement.**

### Authors

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### Objective

Implants for cervical and lumbar disc replacement are becoming increasingly popular. Medical Insurance companies reported a rise of 300% between 2002 and 2005. Yet, no clear evidence can be found in the literature about the indications for these implants. The Belgian Neurosurgical Spine Society (BNSS), felt it was its duty to try and clarify the rightful indications for these novel implants by the development of recommendations of good practice.

### Method

As a complete consensus amongst all disc prosthesis users was unlikely to be achieved, the BNSS board developed a frame of what they considered to be acceptable indications, then contacted very frequent users of disc prostheses, and the latter's recommendations were implemented in the existing frame.

### Results

The following situations would be considered as acceptable for cervical disc replacement :

- a. Age between 18 and 60
- b. Radiculopathy due to soft disc herniation and/or moderate uncarthrosis
- c. 1 or 2 levels maximum
- d. None of the following contra indications
  - i. Severe uncarthrosis
  - ii. Severe facet arthritis
  - iii. Clinical or radiological myelopathy with exception of myelopathy due to a big soft disc herniation in combination with a sufficiently large spinal canal.
  - iv. Spinal canal narrowing
  - v. Fracture

### Conclusion

Although these recommendations of good practice are in no way meant to be compulsory guidelines, we believe that they can be helpful to rationalize the use of cervical disc prostheses, in order to achieve a greater quality of care for our patients, yet keeping the costs for society contained.