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MIS LLIF

Minimally Invasive Lateral Lumbar Interbody Fusion

What is MIS LLIF?

A fusion surgery in general involves the joining (essentially "welding") of two vertebrae. This includes removing a damaged or worn out disc and replacing it with a spacer that restores normal disc height. The spacer acts as a placeholder to keep the vertebrae spread apart so there is plenty of room for the nerves. The goal of a fusion is to re-align the spine and fuse the vertebrae into one solid piece of bone to eliminate the abnormal motion causing pain.

How is an LLIF performed?

LLIFs are performed with the patient laying on his/her side (the lateral position). A small incision is made in the flank area and the muscles and tissues are gently and bluntly dissected down to the spine. The degenerated disc is removed, and the spacer is inserted between the vertebrae. Most often, screws and two rods are also needed to stabilize the spine and prevent motion so that the fusion may occur.





How is minimally invasive lumbar fusion different from conventional fusion?

Conventional open lumbar fusions are performed through various approaches to remove the disc, but the screws and rods are inserted through a midline incision that detaches important spine stabilizing muscles from their point of insertion. Screw and rod insertion through a minimally invasive technique is performed through two 1-inch incisions on either side of the spine by gently separating the muscles surrounding the spine, rather than cutting through them. These small incisions greatly minimize structural damage to bones and muscles which leads to more rapid recovery and return to activities after spinal fusion surgery.

Patient Positioning



Implant Insertion



Indications

In general, lumbar fusions are indicated to restore alignment and stabilize the spine while also relieving pressure on nerves. Some common diagnoses requiring a lumbar fusion include spondylolisthesis, degenerative disc disease, and degenerative scoliosis.

How do I know I need a fusion?

Most patients experience back pain radiating down one or both legs with associated numbness, tingling, or weakness. Surgery is indicated when non-operative treatments provide inadequate relief of symptoms that significantly limit functioning and quality of life.

To learn more about lumbar fusion surgery, visit MISCOE.org or <u>click here</u> for an information packet and <u>here</u> for examples of actual surgery on our YouTube page.

