

American Society of Interventional Pain Physicians-ASIPP®
12th Annual Meeting- June 26-30, 2010
Abstract Submission

Author:

Timothy R. Deer, M.D.
Director, The Center for Pain Relief
Clinical Professor, Department of Anesthesiology
West Virginia University
Charleston, WV

Abstract Title:

mild® (Minimally Invasive Lumbar Decompression) Procedure for the Treatment of Lumbar Spinal Stenosis: Procedure Description and Safety

Background:

Minimally Invasive Lumbar Decompression (*mild*) is a minimally invasive treatment for pain relief from symptomatic central lumbar canal stenosis. Lumbar spinal stenosis is a common problem that can be caused by many factors, including ligamentum flavum hypertrophy. The *mild* technique provides removal of small but adequate amounts of ligament and lamina, avoiding the need for aggressive resection of bone and muscle, as well as surgical implants. During the *mild* procedure, bone and ligament sculpting tools are passed through a small 6G Portal, under fluoroscopic visualization, to achieve decompression.

Objective:

To describe the *mild* procedure and to report on safety of this minimally invasive interlaminar lumbar decompression method.

Methods:

Safety of the *mild* procedure has been collected either manually or electronically for over 250 *mild* patients. All patients were treated with the *mild* procedure for symptomatic lumbar spinal stenosis. *mild* is conducted through a very small Portal site under fluoroscopic guidance, and is most often performed with moderate sedation. The *mild* decompression procedure can be performed unilaterally or bilaterally, at single or multiple levels.

Results:

Data have been collected and reviewed on over 250 patients treated with the *mild* procedure. To date, there have been no reports of serious adverse events or major complications related to the *mild* devices or the procedure in these clinical cases. Major complications are defined as dural tears, nerve root damage, post-op infection requiring surgical treatment, hemodynamic instability, and post-op spinal structural instability. There also have been no reports of blood transfusions, epidural bleeding or hematomas.

Conclusions:

The *mild* procedure is a safe method for the treatment of lumbar spinal stenosis. No serious device or procedure-related adverse events were reported in over 250 *mild* patients with follow-up ranging from acute to one year. This minimally invasive procedure allows decompression with minimal surrounding tissue disruption. *mild* offers an early option for the treatment of LSS following failed conservative therapy, but prior to more invasive surgical treatment.