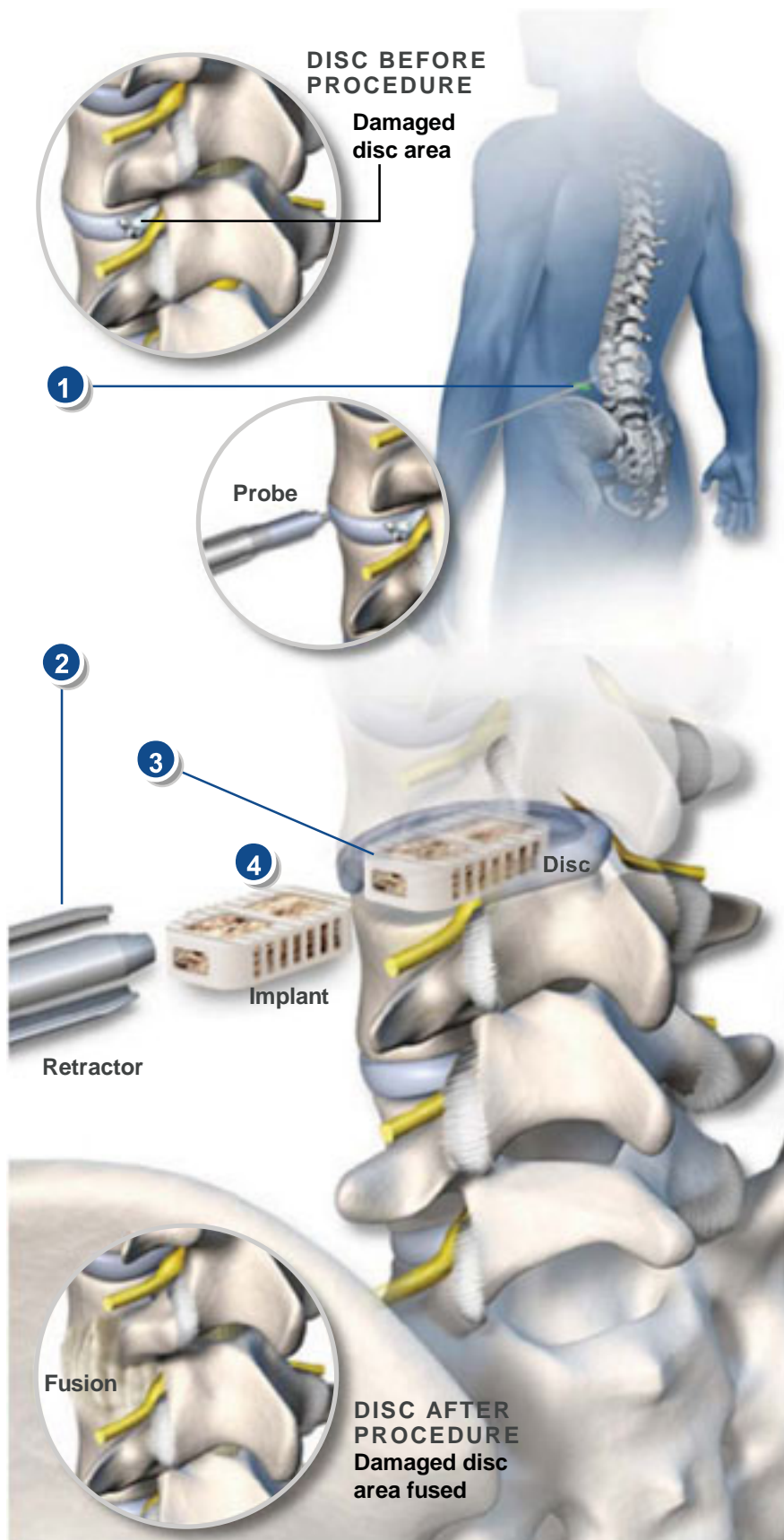


XLIF® Lateral Lumbar Interbody Fusion



Overview

Unlike traditional back surgery, XLIF® is performed through the patient's side. By entering this way, major muscles of the back are avoided. This minimally-invasive procedure is generally used to treat leg or back pain caused by degenerative disc disease. It can be performed on an outpatient basis.

Accessing the Spine

The surgeon creates two small incisions in the patient's side. These incisions are much smaller than those used in traditional back surgery. A probe is inserted through one incision. The second incision is used to help guide the surgical instruments.

Avoiding Nerves

The surgeon uses the probe to stimulate and detect nerves along the side of the spine. When a nerve is found it can be avoided and left undamaged. Fluoroscopic x-ray images also are used to guide the probe to the proper position on the spine.

Dilation Tubes Inserted

A series of dilation tubes are slid over the probe to create a larger opening. Then, a retraction device is used to move aside muscle tissue and gain access to the spine.

Disc Removed

The surgeon operates through the channel created by the retractor. The damaged disc is removed.

Implant Inserted

An implant filled with bone graft is placed into the empty disc space, realigning the vertebral bones. This also lifts pressure from pinched nerve roots. Bone Morphogenetic Protein (BMP) may also be used to encourage bone growth and a strong fusion.

End of Procedure

The morselized bone graft will grow through and around the implant, forming a bone bridge that connects the vertebral bodies above and below. This solid bone bridge is called a fusion.

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