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This highly regarded text is one of the most comprehensive reference works available on the topographical, functional and radiographic anatomy of the lumbosacral spine. Fully updated in this sixth edition, *Clinical and Radiological Anatomy of the Lumbar Spine* walks the reader through the structure, function and common disorders of the lumbar spine. It covers the basic anatomy of lumbar components, how the spine changes with age, clinical problems, and imaging. Internationally renowned author Nikolai Bogduk's thorough referencing and clear text bridge the gap between science and clinical presentation to provide practical, validated and clinically relevant information that will be invaluable for students and clinicians alike. Clearly written and accessible - brings the science to life Thoroughly and comprehensively referenced - can be used as a starting point for research High quality illustrations to support understanding Highly relevant to undergraduate and postgraduate courses in physiotherapy, pain medicine, chiropractic, and rehabilitation medicine New understanding of the causes and pathology of back pain Additional references reflect current literature New, colour illustrations of nerves Expanded radiographic anatomy chapter The official publication of the International Society for the Study of the Lumbar Spine, this volume is the most authoritative and up-to-date reference on the lumbar spine. This edition provides more balance between basic science and clinical material and has been completely reorganized for easy reference. New chapters cover gene therapy, outcomes assessment, and alternatives to traditional nonoperative treatment. The editors have also added chapters on preparation for surgery, surgical approaches, spinal instrumentation, and bone grafts. Chapters on specific disorders have a consistent structure—definition, natural history, physical examination, imaging, nonoperative treatment, operative treatment, postoperative management, results of surgery, and complications. The "Bone and Joint Decade" draws our attention with increased intensity to the problem of the changes related to aging of our musculoskeletal system and the associated socioeconomic implications. In view of the increasing age of the worldwide population the impact seems to be tremendous. The editors of *The Aging Spine* pick up this interesting topic and engage opinion leaders to contribute their knowledge in this supplement. The various contributions cover most of the important problems, which are included in the vast specter of aging spine: osteoporosis, spinal stenosis, and tumors of

the spine. The aging spine will be an everpresent issue in the life of a physician taking care of the different pathologies of the spine. This text will help to better understand the nature of the different changes in the spine of the elderly. It contributes to enabling us to diagnose and to treat this complex problem in an appropriate way. This book draws together recent results and ideas from most of the leading UK researchers into back pain. The emphasis is on disorders of the lumbar spine, their pathogenesis, diagnosis and treatment. This is in contrast to most books on the spine which either concentrate on the normal spine or deal with a specialised approach such as surgery. By drawing together contributions from a wide range of clinical and scientific backgrounds, including alternative therapies such as osteopathy and chiropractic, the problem of low back pain is shown to be complex and multifactorial. This highly regarded text is one of the most comprehensive reference works available on the topographical, functional and radiographic anatomy of the lumbosacral spine. Fully updated in this sixth edition, *Clinical and Radiological Anatomy of the Lumbar Spine* walks the reader through the structure, function and common disorders of the lumbar spine. It covers the basic anatomy of lumbar components, how the spine changes with age, clinical problems, and imaging. Internationally renowned author Nikolai Bogduk's thorough referencing and clear text bridge the gap between science and clinical presentation to provide practical, validated and clinically relevant information that will be invaluable for students and clinicians alike. Clearly written and accessible - brings the science to life Thoroughly and comprehensively referenced - can be used as a starting point for research High quality illustrations to support understanding Highly relevant to undergraduate and postgraduate courses in physiotherapy, pain medicine, chiropractic, and rehabilitation medicine New understanding of the causes and pathology of back pain Additional references reflect current literature New, colour illustrations of nerves Expanded radiographic anatomy chapter This highly regarded text is one of the most comprehensive reference works available on the topographical, functional and radiographic anatomy of the lumbosacral spine. Fully updated in this sixth edition, *Clinical and Radiological Anatomy of the Lumbar Spine* walks the reader through the structure, function and common disorders of the lumbar spine. It covers the basic anatomy of lumbar components, how the spine changes with age, clinical problems, and imaging. Internationally renowned author Nikolai Bogduk's thorough referencing and clear text bridge the gap between science and clinical presentation to provide practical, validated and clinically relevant information that will be invaluable for students and clinicians alike. Clearly written and accessible - brings the science to life Thoroughly and comprehensively referenced - can be used as a starting point for research High quality illustrations to support understanding Highly relevant to undergraduate and postgraduate courses in physiotherapy, pain medicine, chiropractic, and rehabilitation medicine New understanding of the causes and pathology of back pain Additional references reflect current literature New, colour illustrations of nerves Expanded radiographic anatomy chapter Previous in-vivo studies showed that compressive force acting on the spine may exceed 2600 N. However, the ligamentous lumbar spine becomes unstable when subjected to compressive loads less than 100 N. It is generally accepted that the ligamentous spine itself is unstable but can be stabilized by muscle forces (MFs) in vivo. Nevertheless, normal spinal muscle contraction patterns remain unknown. In recent in vitro studies, when the direction of the applied load was controlled along the spinal curvature so that the internal spinal load became perfect compressive follower loads (CFLs) at all lumbar levels, the ligamentous lumbar spine was found to withstand large compressive load (up to 1200 N) without buckling while maintaining its flexibility in neutral or flexed postures. The results of in-vivo animal studies also have shown that shear stress has a more detrimental effect on the rate of disc degeneration compared to compressive stress. These results suggest CFLs in the lumbar spine would be a normal spinal load whereas the transverse (or shear) load abnormal. An initial test of this postulation would be to investigate whether the spinal muscles can create perfect internal CFLs in the lumbar spine in all 3-D postures. In addition, small intrinsic muscles (SIMs) are crucial for better control of the direction of the internal spinal load along the spinal axis was also proposed. A finite element (FE) model together with an optimization model were used for this study. Both models consist of the trunk, sacrolumbar spine and 244 spinal muscles. Different from other studies, 54 SIMs were also included in the models. The FE model was validated by comparing the ROM of the spine with the literature data. Minimization of the summation of the spinal loads and moments was used as the cost function for the optimization model. The geometrical data obtained from the FE model was used as the input for the

optimization model; it was then used to calculate the MFs required for creating the CFLs at all lumbar spine levels. The MFs determined in the optimization model were then imported back to the FE model as input loads to check the stability of the spine under this loading condition. Five different postures were studied: neutral, flexion 40°, extension 5°, lateral bending 30° and axial rotation 10°. Many optimization solutions for spinal muscle force combinations creating pure CFLs in the lumbar spine were found available in each posture. However, FE analyses showed that only muscle forces and patterns solved at FLPs along the curve in the vicinity of the baseline curve stabilized the lumbar spine. Stability was determined by small displacement of the trunk (less or equal to 5mm) due to small deformation of the lumbar spine. The magnitudes of joint reaction forces (JRFs) predicted from the optimization model were comparable to those reported in the literature. When the SIMs were removed, optimization solutions were still feasible in all five postures, but JRFs and trunk displacement were increased. This suggests the need of SIM inclusion in future spine biomechanics studies and clinically, damages to the SIMs may have a high risk of future spinal problems, such as spinal instability, early disc degeneration, deformity and/or early failure of spinal fixation devices. The results from this study supported the hypothesis that the perfect CFLs at all lumbar levels could be the normal physiological load under which the lumbar spinal column could support large load without buckling while allowing flexibility. SIMs played an important role in creating CFLs as by including SIMs in the models, the JRFs at all lumbar spine levels were lowered and the stability of the spine was increased. The parameters used to calculate the Dynamic Response (DR - the currently accepted injury criteria for multi-axis impact) for sideward impact are based on a very limited data set. In addition, the current model for spinal injury due to z axis acceleration is based on displacement and cannot account for the effects of off-axis loads. METHODS: Seated, restrained human volunteers were subjected to sideward impacts ranging from 0.031 to 0.250 seconds duration and amplitudes of from 4 to 7 G. Loads were measured at all restraint points and used to calculate dynamic coefficients for a model of upper body response and lumbar spine shear loading. RESULTS: Lumbar spine shear loads can be predicted using a second-order lumped parameter model with a natural frequency of 58 rad/sec and damping ratio of 0.45. CONCLUSIONS: Combining these results with similar models for the x and z axes and correlating then with injury data will allow a comprehensive model of lumbar spinal injury to be produced. This book addresses an extremely prevalent medical problem: low back pain. It is not a general anatomy book, but it relates specifically to the lumbosacral spine, encompassing anatomy, histology, histopathology, and imaging all in one volume. For students, the text incrementally introduces them to lumbosacral anatomy terms and scientific knowledge by using photographs of gross and histological sections of the spine, as well as schematic drawings and images, in preparation for clinical practice. It answers many questions about the pathogenesis of low back pain, helpful for clinicians, both for treatment decisions and for counselling patients. Key features: Provides a clear explanation for many of the pain generators in low back pain and illuminates this perplexing and ubiquitous problem Addresses a gap in the existing literature, as 'non-specific' or mechanical lumbosacral spine pain accounts for by far most chronic spinal pain sufferers' complaints for clinicians from general medical practitioners to spinal specialists in various fields such as sports medicine who deal with spinal pain syndromes Illustrates anatomical structures that can be injured and thus become responsible for causing mechanical lumbosacral spine pain; frequently, such injuries cannot be detected on sophisticated imaging such as MRI This book is a superbly illustrated guide to the latest endoscopic approaches employed in surgery to the lumbar spine. In the past, spinal endoscopic surgeries have been performed mainly in the treatment of lumbar disc herniation, but indications have now expanded owing to breakthroughs in surgical methods and instruments. Furthermore, in addition to the traditional percutaneous transforaminal approach, various other approaches are now feasible, including the posterior, paraspinous, transpedicular, and contralateral. This book describes and illustrates the full array of approaches in indications including lumbar central stenosis, lumbar foraminal stenosis, and lumbar disc herniation. Detailed guidance is also provided on endoscopic lumbar interbody fusion, covering the oblique, uniportal, and biportal approaches. Supplementary surgical videos further facilitate understanding and execution of the described procedures. Written by expert spinal endoscopy surgeons with extensive practical experience and a record of academic achievement, the book will be an ideal aid for spine surgeons at all levels of experience. Lumbalgie. Endoscopic technology has advanced to the point where practitioners

can now access, visualize, and treat spine pathologies previously only accessible through open surgical approaches. Endoscopic Spine Surgery 2nd Edition provides a comprehensive background on endoscopic spine surgery and covers an unparalleled number of minimally invasive spine procedures that have revolutionized the spine treatment paradigm. Readers will greatly benefit from many years of expertise and wisdom shared by master spine surgeons Daniel Kim, Gun Choi, Sang-Ho Lee, and Richard Fessler, and their expert contributors. Due to the narrow endoscopic view, subtle microanatomical differences in the lumbar, thoracic, and cervical regions are not always easy to visually discern. To address this challenge, the book contains detailed procedural descriptions and images mirroring endoscopic views spine surgeons encounter in the OR. Organized anatomically, 53 chapters guide readers systematically through lumbar, thoracic, cervical, and craniocervical junction procedures for pathologies ranging from low back pain and deformities to tumors, lesions, infections, and trauma. Key Features More than 1000 high quality images including color procedural photographs and medical illustrations provide in-depth visual understanding. Spinal pathologies and procedures delineated in 75 videos accessible via the Media Center - from case studies to step-by-step technique tutorials. Covers the full spectrum of spine endoscopy including percutaneous approaches, microdiscectomy, laminectomy, discectomy foraminotomy, hemilaminectomy, thoracic decompressions, fusion, fixation, and thoracoscopic procedures. The use of state-of-the-art technology such as ultrasonic bone dissectors, endoscopic radiofrequency denervation, the video telescope operating monitor (VITOM), minimally invasive tubular retractors, and 3D stereo-tubular endoscopic systems. Neurosurgical and orthopaedic residents, spine fellows, and seasoned spine surgeons will all greatly benefit from the significant knowledge and insights revealed in this remarkable multimedia resource. This book may also be of interest to neurosurgical and orthopaedic nurses, physical therapists, chiropractors, and medical device professionals. Offering in-depth coverage of an often-neglected topic, Revision Lumbar Spine Surgery identifies clinical problems and discusses recent major advances in this challenging area. Dr. Robert F. Heary and a team of international experts share their knowledge and experience with even the most difficult lumbar cases, helping you provide optimal outcomes for your patients. You'll find authoritative guidance on indications, diagnosis, approaches, and follow-up, with a focus on the significant advances that have occurred over the past two decades in this fast-changing field. Identifies the clinical problems related to unsuccessful back spine surgery as well as indications, diagnosis, and new treatment options and advances in this complex area. Provides in-depth information on the multiple options that exist for most clinical situations: anterior, posterior, lateral, and combined anterior and posterior approaches. Covers methods of fixation, the use of interbody grafting, and surgical planning related to scar tissues, bleeding, and spinal fluid leaks. Discusses critical follow-up topics such as key clinical procedures, radiography, patient reported outcomes, and pain management. Includes timely chapters on robotics, bone density issues, medical fitness concerns, instrumentation options, imaging considerations, and much more. Enhanced eBook version included with purchase. Your enhanced eBook allows you to access all of the text, figures, and references from the book on a variety of devices. Written by leading authorities in the field of spine care, this book is a comprehensive reference for the latest techniques for managing intervertebral disc disorders affecting the lumbar spine. Divided into four main sections, the book opens with a review of fundamental basic science concepts, including epidemiology, anatomy, pathophysiology, biology, biomechanics, and mechanisms of pain. The second section focuses on the management of disc herniation, with chapters guiding clinicians from the pathophysiology of the herniated disc to clinical presentation to various treatment strategies. The final sections of the book present in-depth coverage of degenerative disc disease and provide essential information for imaging and testing, diagnosis, patient screening, treatment, and rehabilitation. Highlights: Detailed coverage of the latest innovations in the field, including nonsurgical treatments, minimally invasive procedures, biologic techniques, and motion-preserving procedures, enables clinicians to select the appropriate treatment for each clinical situation More than 200 high-quality illustrations and images demonstrate key concepts Valuable discussion of safety considerations and how to avoid and manage potential complications Ideal for practitioners and trainees with a focus on spinal disorders, this book will be an invaluable resource for orthopaedists, neurosurgeons, pain specialists, physiatrists, neuroradiologists, and researchers in these specialties. Two-thirds of degenerative diseases of the vertebral column involve the lumbar spine. Magnetic

resonance imaging plays a pivotal role in diagnosis and treatment. With more than 450 illustrations and 78 case studies illustrating various constellations of findings, this book provides a wealth of illustrations that guide the reader through the MR imaging of lumbar disk herniations and spinal stenosis: Impressive series of MR images illustrate both common and unusual findings, helping to enhance conceptual understanding and sharpen diagnostic perception. Clinical findings and progression are covered in addition to MRI findings, helping the reader to appreciate the correlations between clinical and imaging findings. The role of diagnostic imaging is addressed for specific disorders, helping to foster the more discriminating use of imaging procedures in the lumbar spine. The book concludes with a chapter on the current technique of performing CT-guided injections at the lumbar level. Owing to their frequency and possible consequences and considering the fact they frequently affect young people, traumatic lesions of the thoraco lumbar spine represent a special point of interest within the field of Neurotraumatology. Traffic accidents are the commonest cause, which accounts for the high peak of occurrence between 15 and 24 years of age. It is also worth noting that according to published series nearly 50% of the cases affect the thoraco-lumbar junction. From an anatomical point of view, we must note the severity of thoracic spinal cord lesions especially of the thoraco-lumbar junction and of the lumbar region and be able to associate injuries of the conus medullaris and of the cauda equina where there is a possibility of neurological recovery. Clinical evaluation is not always easy, but remains the basis for diagnosis and prognosis. The neurological classification proposed by FRANKEL et al. in 1969 and used at STOKE MANDEVILLE Hospital seems to retain its value. A more sophisticated study of medullary evoked potentials, as described by Tsubokawa can allow a more precise localisation and appreciation of the extent of the lesion as well as a better evaluation of the prognosis and of the evaluation of treatment in the acute phase. The neuro-radiological study should include standard views of the whole of the spine with antero-posterior and lateral tomograms of the fractured or luxated area. At present, the unquestionable contribution of the CT. "Larson and Maiman have pioneered both the study of the lumbar spine, as well as the surgical and non-surgical management of lumbar spine pathology. A comprehensive treatise... clearly enhances the surgeon's ability to care for patients with lumbar spine pathology; most importantly; it significantly advances the field." -- Edward C. Benzel, MD (from the foreword) Written by two of the most distinguished leaders in modern spine surgery, this book provides "everything you need to know" regarding surgery of the lumbar spine. Throughout, you will find an emphasis on incorporating biomechanics into clinical decision-making, with detailed coverage of anatomy and pathology, fusion principles, and surgical approaches. Lumbar spine-specific pathology is addressed from an anatomical, clinical, and therapeutic point of view. Plus, you will benefit from the authors' frank discussions of techniques, complications, and surgical "pearls." The numerous high-quality drawings aid the discussion in providing a thorough understanding of the surgical procedures used in the lumbar spine. Surgery of the Lumbar Spine is an invaluable book for resident and experienced surgeon alike. Highlights of this outstanding work include: Provides a comprehensive view of lumbar-spine pathology and treatment Straight talk from experienced surgeons on techniques and complications A unique approach to clinical decision making that stresses biomechanics Hundreds of clear photographs and descriptive surgical drawings An authoritative new reference detailing the diagnosis and treatment of virtually every disorder affecting the lumbar spine, covering basic science research, physical examination, diagnostic studies and surgical treatment. This book presents the latest information on the epidemiology, pathophysiology, diagnosis and treatment of peripheral nerve entrapment neuropathy, focusing on the lumbar spine and the lower limbs. The book is divided into three thematic sections, on para-lumbar spine disease, lower limb entrapment neuropathy, and comprehensive reviews. In addition to exploring the latest advances, it also features short essays by the Editor that provide valuable insights into the disease. Though neuropathy of the upper limbs has been studied in detail and substantial evidence is available, there are very few books on para-lumbar spine and lower limb entrapment neuropathy. Often, the symptoms are misdiagnosed as lumbar spine disease, overlooked, or treated as failed back surgery syndrome. This book provides a comprehensive overview of the disease and shares the latest findings from the last 10 years of research into its diagnosis and treatment, offering essential guidance for general clinicians, spinal surgeons and neurosurgeon who treat numbness and pain in the lower limbs and lower back. It will also benefit young doctors interested in the field, nurses, therapists and patients The official

publication of the International Society for the Study of the Lumbar Spine, this volume is the most authoritative and up-to-date reference on the lumbar spine. This edition provides more balance between basic science and clinical material and has been completely reorganized for easy reference. New chapters cover gene therapy, outcomes assessment, and alternatives to traditional nonoperative treatment. The editors have also added chapters on preparation for surgery, surgical approaches, spinal instrumentation, and bone grafts. Chapters on specific disorders have a consistent structure--definition, natural history, physical examination, imaging, nonoperative treatment, operative treatment, postoperative management, results of surgery, and complications.

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