

# Good long-term results for fusion surgery for high-grade spondylolisthesis

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A group of children who underwent fusion surgery for spondylolisthesis in the lumbar spine 30 years ago showed a clear reduction in back pain when followed up seven years later. A new study of these patients as adults has found that the benefits have lasted, reveals research from the Sahlgrenska Academy and Sahlgrenska University Hospital presented this week at the International Society of Orthopaedic Surgery and Traumatology (SICOT) annual international conference in Gothenburg.

Spondylolisthesis (forward displacement of a vertebra) in the lumbar spine occurs in 6% of the population and does not usually cause any problems. However, it can lead to [back pain](#) and/or sciatica, and in some cases the displacement is more pronounced, known as high-grade spondylolisthesis. The latest study is a long-term follow-up of around 40 patients with high-grade spondylolisthesis who underwent [surgery](#) as children to fuse the vertebrae together in order to prevent further movement and the risk of the symptoms worsening. From 1972 to 1985, patients' vertebrae were fused in situ with no attempt made to correct their position, due to the risk of [nerve damage](#).

"There was debate about how patients might be affected by the back being bent forward as a result of the fusion operation," says Karin Frennered, PhD (Medicine), a researcher at the Department of Orthopaedics at the Sahlgrenska Academy and consultant at Sahlgrenska University Hospital. "This back position produces an unnatural gait, which could lead to problems in the longer term."

At the seven-year follow-up, however, patients reported low levels of pain and good function, and the same happened in the new follow-up study after almost 30 years.

"What's interesting - and remarkable - about the new study is that patients also describe low levels of pain, good function and high quality of life as adults despite the position of the back," says Frennered.

The researchers will now continue to examine the patients' posture, gait and X-rays in a bid to produce further scientific evidence for safe surgical techniques that can lead to better treatment strategies for these patients.

Provided by University of Gothenburg

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