

1. LSUHSC School of Medicine, 2. Veterans Affairs Medical Center of New Orleans, 3. LSU Physical Medicine & Rehabilitation

Objectives and Background

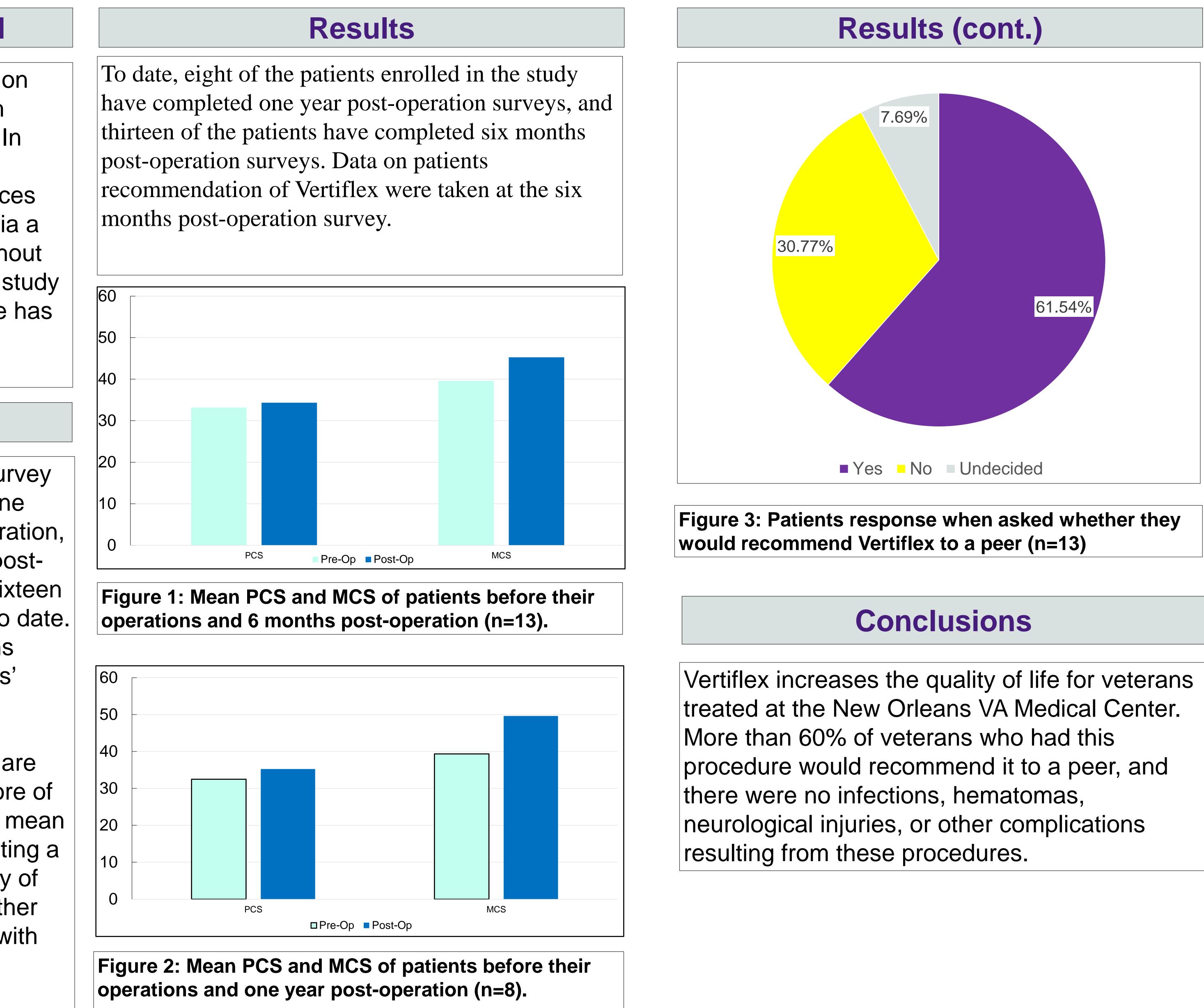
Lumbar interspinous process decompression (IPD) has been in use to treat patients with lumbar spinal stenosis (LSS) for decades. In 2015, a second-generation IPD, Vertiflex, became FDA-approved. The main differences are that Vertiflex placement is performed via a percutaneous route, can be performed without general anesthesia, and is reversible. Our study aims to confirm that the Vertiflex procedure has successfully improved the quality of life in military veterans.

Methods

Patients were given the SF-12v2 health survey at consistent time points: Pre-operation, one week post-operation, one month post-operation, three months post-operation, six months postoperation, and one year post-operation. Sixteen patients have been included in the study to date. The SF-12v2 measures eight total domains which are combined to provide the patients' Mental Component Summary (MCS) and Physical Component Summary (PCS) as indicators of quality of life. These scores are measured on a 100-point scale, with a score of 50 indicating the United States population mean score, and each 10-point increment indicating a change of one standard deviation in quality of life. Additionally, patients were asked whether they would recommend Vertiflex to peers with similar symptoms to their own.

"Vertiflex Improves Quality of Life in Military Veterans Suffering from Low Back and Leg Pain" Andrew Mercante¹, Casey A. Murphy MD², Randolph L. Roig MD²,

E. Thomas Fincke MD³



This research project was supported through the LSU Health Sciences Center, School of Medicine



