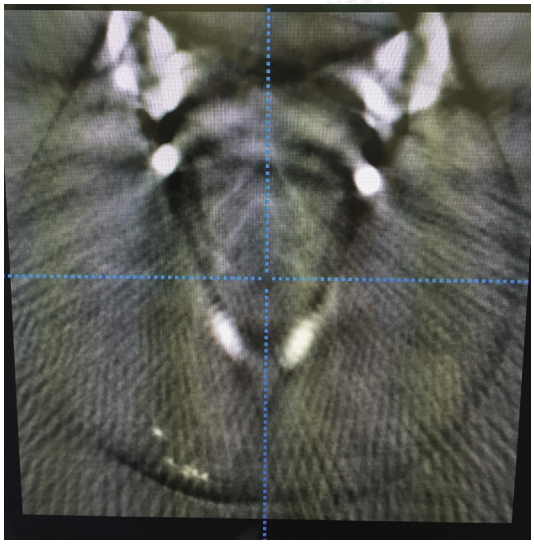
Stereotactic neurosurgery

Peter Reed

Mr Ken Garoo presented with worsening severe bilateral lower limb pain after multiple prolonged episodes of dynamic hopping which were required for his locomotion. Magnetic resonance imaging revealed severe lower lumbar spinal stenosis and nerve root compression. Operative management with stereotactic-assisted decompressive lumbar laminectomy, spinal rhizolysis and fusion was undertaken. Intraoperative mobile 2D x-ray spin of his L4-L5 vertebrae (Figure) is shown along with artefact from two pedicle screws that had already been inserted. Mr Ken Garoo clearly seems satisfied with the position of the screws and was obviously keen to rejoin his mob. He subsequently made a booming recovery and was advised to limit all future compressive forces.



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