

Letter to the Editor

Letter to the Editor: Disc Space Preparation in Transforaminal Lumbar Interbody Fusion: A Comparison of Minimally Invasive and Open Approaches

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To the editor,

We read the article by Rihn and colleagues [2] with great interest.

In the study, the authors randomly assigned 40 lumbar levels (L1-2 to L5-S1) from eight fresh cadaver specimens to open and minimally invasive

surgery (MIS) groups using a random number generator. We do not know the discectomy levels assigned to MIS or the open approach. Additionally, the clinical significance of disc space preparation regarding fusion rate or clinical outcome was not addressed. We wondered how the authors believe readers might make use of this study's findings given that the discectomy levels studied might have had an influence, and given the fact that this laboratory study could not speak to clinical outcome or even fusion rate.

The authors do not suggest that Transforaminal Lumbar Interbody Fusion (TLIF) is superior to other surgical approaches. However, data exists that calls into question the clinical benefit of the TLIF procedure compared with other methods of lumbar fusion [1, 3]. Regarding the adequacy of disc space preparation, the authors

concluded that when performed by a surgeon experienced with MIS TLIF, MIS and open approaches are similar. In light of this controversy, should we be focused on whether and when to perform TLIF, rather than how?

References

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