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Avoiding lumbar instability with U-force device

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Introduction: We wanted to evaluate the mechanisms of action and effectiveness of interspinous distraction in managing symptomatic degenerative lumbar disc herniation, to determine the safety and efficacy of the implant, and to prevent the last step of disc degeneration.

Materials and Methods: A prospective controlled trial (2011-2012) was conducted in a cohort of 50 patients with degenerative lumbar disc degeneration. 25 underwent surgical treatment during which the U device was placed, and 25 control individuals were treated with discectomy alone. Patients underwent serial follow-up evaluations (clinical tests), and radiographic assessment was used to determine the outcome. Follow-up data for a maximum of one year was obtained for all patients.

Aim: To use the device in order to prevent or delay the clinical symptoms after discectomy: Last step lumbar instability.

Results: A minimum of one-year follow-up: Statistically significant improvement was seen in patients treated with the U device.

1. It is an excellent idea to use it for lumbar pain in kissing spine.
2. With one -year follow-up

Conclusion: We made a randomized double blind control trial with another device for ten years, and then we developed this new device for L5 S1 and with another concept. Our study shows that the U device was more effective than discectomy in the management of degenerative lumbar disc herniation, regarding lumbar instability. In order to better understand the long-term development after disc surgery and to prevent further degeneration, namely lumbar instability, we need to conduct a longer Follow-up that to for at least 8-10 year.

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